

TRANSCRIPT: "CHRIST-CENTERED HEALING FROM DEPRESSION AND LOW SELF-WORTH"

*By Carrie Maxwell Wrigley, LCSW
Originally given August 15, 2005, BYU Education Week
Recorded by KBYU-TV, Brigham Young University*

Hello. I am Carrie Wrigley, and I am here today to talk to you about what has become over the last few years one of my very favorite topics. The topic I've been assigned is "Christ-Centered Healing from Depression and Low Self-Worth."

Now some of you hearing me say that might wonder to yourselves, "*How in the world can that be her favorite topic? How can you get excited about depression?*" Depression is not that exciting, and some of you may well know that from experience, from having suffered from depression yourself, or living with someone or being close to someone with depression. Depression is anything but exciting.

But I'll tell you what is exciting: *healing* from depression is exciting. And most especially, Christ-centered healing from depression. That is tremendously exciting and hope-giving. And inspiring in ways that draw people out of those dark places that sometimes we experience in this world. Christ is truly the "light that shineth in darkness." Even in that very personal darkness that some of you may know very well.

What is Christ-Centered Healing?

Now before we begin, let's define some of these terms. First of all, what does it mean to heal? Well, the dictionary tells us that to heal simply means, to make or become whole. Not just somewhat improved, not held together or managed, but made *whole*.

Now that's what it means to heal; what does Christ-centered healing mean? It means, as I understand it, to become whole through a process guided by and centered in Jesus Christ, in His teachings, and those truths that He has revealed to us through His mouthpieces: the general authorities, the scriptures, and the personal guidance of the Spirit of the Lord. To heal by those means, guided by those means, is what I mean by Christ-centered healing.

Now I'd like to give you an example from the scriptures of a kind of healing that our Savior does. This is an example of a physical healing, but I think we can certainly liken the principle to ourselves and our loved ones who struggle with emotional difficulties. This is found in the gospel of Mark, verse 5, starting with verse 25:

"And a certain woman, which had an issue of blood twelve years, And had suffered many things of many physicians, and had spent all that she had, and was nothing bettered, but rather grew worse,

"When she had heard of Jesus, came in the press behind, and touched his garment. For she said, If I may touch but his clothes, I shall be whole.

“And straightway the fountain of her blood was dried up; and she felt in her body that she was healed of that plague.

“And Jesus, immediately knowing in himself that virtue had gone out of him, turned him about in the press, and said, Who touched my clothes? And his disciples said unto him, Thou seest the multitude thronging thee, and sayest thou, Who touched me?”

“And he looked round about to see her that had done this thing. But the woman fearing and trembling, knowing what was done in her, came and fell down before him, and told him all the truth.

“And he said unto her, Daughter, thy faith hath made thee whole; go in peace, and be whole of thy plague.”

Now this woman experienced a remarkable, complete transformation. This story of the woman with issue of blood was told a number of years ago by my stake president in a local stake conference. And in talking about this story, he pointed out the elements of that story that related how she had gone from physician to physician, seeking answer after answer, and that none of that had healed her. That instead it had simply taken all of her income, all of her energy, all of her strength. She'd been left *worse*, rather than better, as a result of all of that seeking after the arm of flesh for a resolution to her problems. And then my stake president, with the power and mantle of his calling, said words I will never forget. He said, in contrast, *“The Lord’s healing is **complete** healing.”*

Those words went down like fire into my spirit. They settled into my very bones. I pondered them over and over again over the years that followed. *What does it mean to completely heal through the Lord?*

Now I had experienced by that time in my life a certain amount of the healing process. I'd been trained as a counselor at the University of Utah, and had functioned in that capacity for a number of years, particularly for LDS Family Services. I had seen people get somewhat better, somewhat less miserable, somewhat less dysfunctional. But I had not seen *complete* healing.

And I'll tell you the truth: I had also not experienced it for myself. From those little things that I still struggled with in my own life that sometimes brought me down. That phrase, “complete healing,” was very powerful, inspiring one to me. It drove me on to look for better answers than the ones that I had been taught in my professional training.

That phrase gained a second witness a few years later. In a talk given by Elder Richard G. Scott in October 2002, Elder Scott said:

“You need not experience a lifetime of counseling. Complete healing will come through your faith in Jesus Christ. Ponder the power of the Atonement. Pray to understand how it can heal you.”

Again that phrase “complete healing” reinforced that first experience I had had with that phrase. I wanted that. I wanted it for my clients; I wanted it for myself, with those remaining bits of darkness that had been left over from disappointing, difficult experiences from my past.

Well, the Lord never seems to plant a question or a desire without providing the means for that question to be answered, the desire to be fulfilled. The answer to this desire came in a very simple form, as so often is the case. Not with the appearance of legions of angels, but in very simple way. I got an assignment through my employment with LDS Family Services to be a speaker for a local ward Relief Society. The topic that had been chosen was Dealing with Abuse, and since that was something I did a lot in my practice, my boss felt like I would be a good speaker for that topic.

Well, I was very well-prepared. I had all my talk put together, all my references, all my stories. And then a week before I was to speak, the Relief Society president of that ward called me and she said, "Sister Wrigley, I really, really hate to do this to you, but I'm feeling strongly impressed that I need to change your assigned topic." *Gasp!* It's the week before!

But I tried to stay calm, and I said, "Okay, Sister, what is it that you're feeling? What would you like me to do?" And she said, "I would like you, instead of abuse, to talk about depression." She said, "Now I'm sure that there are certain instances in which people struggle with chemical depression. But Sister Wrigley, 80 percent of the sisters in my ward are on Prozac. And that just doesn't seem right to me. Will you please come and tell us what we need to know about depression, and how we can see it through a spiritual point of view?" That threw down a challenge to me, a challenge that I welcomed because I wanted to understand that for the reasons I've described before.

So I spent the week, as you can well appreciate, *cramming!* I went into the best research tool that I was aware of at the time, the InfoBases disks. Some of you may remember that technology - before the internet, there was InfoBases. I scoured those disks. Most especially, I put in the search topic "depression," curious what I would come up with from things that had been written by the Brethren. I was absolutely astounded in the things that I found, the treasures of wisdom and understanding that were unfolded to me from those pages.

Here's just a sampling. First of all, Ezra Taft Benson, in a talk entitled "**Do Not Despair,**" given initially in October 1974, and then repeated in 1986 as a First Presidency Message when he became prophet, gave the following insight:

"We live in an age when, as the Lord foretold, men's hearts are failing them, not only physically, but in spirit. Many are giving up heart for the battle of life..."

*"As the showdown between good and evil approaches, with its accompanying trials and tribulations, **Satan is increasingly striving to overcome the Saints with despair, discouragement, despondency, and depression.**"*

A second quote came from Elder Packer, from a talk given a few years later in April conference 1978, in a welfare session. Elder Packer first talked about that grand principle of Church welfare called self-reliance. That in Church welfare we don't just keep handing people resources and answers and supports; we build capacity within them to be self-reliant. And then he applied that grand principle of self-reliance to these areas of emotional struggles, and said:

“We live in a day when the adversary stresses on every hand the philosophy of instant gratification. We seem to demand instant everything, including instant solutions to our problems. We are indoctrinated that we should always be instantly emotionally comfortable. When that is not so, some become anxious—and all too frequently seek relief from counseling, from analysis, and even from medication.

“It was meant to be that life would be a challenge. To suffer some anxiety, some depression, some disappointment, even some failure is normal. Teach our members that if they have a good, miserable day once in a while, or several in a row, to stand steady and face them. Things will straighten out. There is a great purpose to our struggle in life.”

And then finally, going back to that wonderful article **“Do Not Despair”** from President Benson. He initially quotes Joseph Smith, and said,

“‘Salvation,’ said the Prophet Joseph Smith, ‘is nothing more nor less than to triumph over all our enemies and put them under our feet.’”

And then editorializing further, President Benson said:

“We can rise above the enemies of despair, depression, discouragement, and despondency by remembering that God provides righteous alternatives.”

Those words stunned me as I read them in preparation for that talk. They stunned me because they were so very different in their terminology than the kind of approach that I had been exposed to, that you’ve been exposed to, that we’ve all been exposed to through the media and other sources. A view of depression that says depression is an illness. It’s when something goes wrong in your brain, and the only thing that you can do about it is take medication to manage the symptoms. And then if that medication wears out, you move on to another medication.

These brethren were talking about something quite different than that. They were talking about a form of spiritual attack from the Destroyer, a form of attack that can and must be mastered, risen above, triumphed over, *overcome*.

I would submit to you that that phrase, *“complete healing,”* cited before from Elder Scott and from my stake president, has relevance to this condition that so commonly we think of as a lifetime disease. I have experienced in my counseling office, and in my own life, that there are powerful, permanent ways that people can learn to rise above, to triumph over, to overcome, to heal completely from this affliction that otherwise can be so long-term and so deadly.

Understanding the Stages of Healing

So, how do we heal? What does it consist of? I was asking this question new kinds of ways about a year and a half ago over a Christmas season when I was doing a play at my children’s school, going back and forth about four times a day to help prepare the children. Walking through the snow back and forth, and trying to do too much by myself. Well, to make a long story short, I got myself sicker than a dog. I kept pushing myself because, of course, only *I* could direct these children, and *I* could do this great job!

Ended up getting pneumonia. I got myself sick being *dumb*. I could've asked for help; I didn't. Got myself sick. Went into the doctor, and he started to put me through the process of healing. We'll use that as an example, to exemplify what I like to refer to as stages of healing.

The first thing that my doctor did for me as I went was took a careful history of what I was going through, what my symptoms were. And from that he was able to carry out an assessment and diagnosis. He was able to say to me, "Carrie, you got yourself pneumonia." Great, that's great information. But you know what, it *was* great information, because I needed to know what I had before I could move on from there.

Secondly, he moved onto the second stage and said, "Here's what we're going to do; here's the intervention; here's the treatment. You're going to need a pretty powerful antibiotic for this. You're going to need probably several weeks of bed rest. You're going to need to push fluid, don't take any extra stress on. Give yourself a good rest. And tell you what, because you've pushed yourself so far, you're probably going to need to rest for not just several weeks, but maybe up to a month or longer." That was not thrilling news either. But at least I knew what I needed to do. I started taking the medication, I did the bed rest, I did everything that he said.

And it wasn't long before number three, stage number three, started to kick into gear: recovery and rehabilitation. Particularly after the medication wore off, the healing powers of my own body started to kick in. I started to feel better, my energy started to return. My capacity started to return, and I started to feel stronger and stronger. The intervention, the treatment for that period of time had worked to activate that within myself that was able to heal.

And then finally, stage four, I once again began to experience, after a series of several months, wellness and relapse prevention. Meaning that I finally felt whole; I finally felt well. And you bet I was a little bit smarter this time about what I needed to do to prevent any such recurrence. I never wanted to be on bed rest for another month. I am a mother of five; I have a lot of things going in my life; I didn't need to waste my time being sick! And so you can bet I'm a lot smarter now about what I take on and how much I will do by myself, as opposed to getting help. I spent a lot of weeks during those weeks in bed – I had a lot of time to think about: what can I do different the next time? I made this whole complex list about, well, I could have so-and-so do this, and I can only do this much of that. And I kind of trimmed down my plan so that I could prevent a relapse, or prevent a recurrence of the condition that had caused so much disruption in my life.

And I realized, as I thought about those four stages of healing - ***assessment and diagnosis; intervention, and treatment; recovery and rehabilitation; wellness and relapse prevention*** - that that is what happens with complete healing from any condition. We go all the way through those four stages.

But I would submit to you that there are very common approaches to depression that don't take us the whole distance, all the way through those four stages. That in many cases do assessment and diagnosis, and begin intervention and treatment, but then the treatment continues... and continues, and continues, and continues. And they're done in such a way that it doesn't activate that healing power within us that can ultimately take us all the way to wellness. And certainly, there is very little said about prevention.

Three Ineffective Approaches

I'm going to describe three specific kinds of treatment approaches I find to have that self-limiting, incomplete kind of effect.

The first approach I like to call "***assessment-only therapy.***" Some of you may have experienced this in yourself or a loved one. I've heard it described to me a number of times from clients. This is the kind of therapy where you go in and the therapist says, "So, what's going on? What's happened in your life? Why are you distressed?" And you tell the person. And then the therapist says: "So how do you *feel* about that?" And you tell them how you feel about that.

And then they say, "What *else* does this remind you of? When *else* have you been this distressed? When do you think this all started?" And then you tell them about all the bad experiences that have happened your whole entire life, and all the reasons that you're messed up, and all the ways that your mom ruined your life, and all the ways... you get the picture! And so you know deeper and deeper and deeper levels of why you're so dysfunctional!

And clients come into my office after that kind of an experience and say, "I know now the names for all the ways that I'm ruined. I now know all of the specific manners in which I am broken and my family was dysfunctional. But you know what I *don't* know? I don't know one single thing about how to fix *any* of it." That's assessment-only intervention.

Fortunately, in recent years, that kind of therapy has been identified in the scientific community as not being particularly helpful either. In fact, with depression particularly, it was found that that kind of focusing on the problem, and your feelings about the problem - that kind of treatment and nothing else - took people farther and farther down: in their self-esteem, in their mood, in their depression. It was like the woman with the issue of blood. People are made *worse*, rather than better, when that is the only strategy applied, and people are not guided onward to "So what do you do about it?" Okay, so that's the first ineffective strategy.

The second one, in our day and age, is even more common. This one I refer to as "***medication-only intervention.***" Now let me say in the beginning: medication certainly has a crucial and important place with certain people at certain times. There do seem to be parts of some people's issues that really are about biology.

But can I share with you from 13 years of clinical experience, that percentage is minute. I deal more with depression than probably anything else in my practice, and I would say there's probably one to two percent of the folks that come in that at some point or the other I say to them, "You know what, I really think maybe we need to think about medication here." Those are the folks who are so far down that they honestly can't do the exercises that I try to give them. They can't process things; they cry all day; they literally cannot get up and do anything else.

That's the time when I consider it, and even then, I'm a little bit nervous to do so, because I've seen over the years increasing numbers of side effects, difficulties with withdrawal, and just simply a sense of "the only way I can be normal is to be on medication" that I think is counter-productive. I think it brings people's sense of self-worth down even farther to think: "I have a chemical imbalance and the only thing I can do is rely on some outside source to fix it."

There are better answers; there are more permanent answers, and they work for most people. For others, again, as I said, medication can be an important part of their recovery for a certain amount of time.

But research has established in a scientific way in recent years what I've been observing for the 13 years I've been practicing, which is: When people are *only* given medication, and again, *not* information about how they can manage their lives, and their attitudes, and their relationships more effectively... those folks that get medication-only intervention are more prone to relapse to a recurrence of their original depressive problem than any other group studied. Including, they're more vulnerable to relapse than people who are put on placebos : sugar pills. They're more prone to relapse than people who didn't get any intervention at all, and just kind of muddle through, and stand fast, and try to be strong through it. It seems to *exacerbate* problems.

In fact, I was reading a study comparing the impact of exercise with the impact of Zoloft. Interesting study. The study said, they had three different groups. One group was given nothing but Zoloft. Another group was given an exercise regimen. The third group was given an exercise-plus-Zoloft regimen.

The results of that study were shocking to me. The folks that were put on medication-only intervention had a relapse of their depression within six months - 38 percent of those folks in that medication-only group. The folks that were put on the exercise regimen had a relapse rate of 8 percent within six months. 38 percent from medication, 8 percent for exercise. Now here was the surprise. Those who were put on Zoloft *plus* exercise, guess what their relapse rate was? This shocked me - 31 percent! Go figure; I don't understand that!

But I think what happens is that when people buy into not just the medication itself, but the mindset that says, "I have a chemical, genetic, biological problem; and I need to rely on this out here to fix it, rather than draw on my own healing resources" - I think that's *depressing!* And it exacerbates the problems people come in with, rather than the kind of approach we'll be talking about in a minute that gives people some options to do what we learned from the Brethren before - to rise above, to triumph, to overcome, to heal from the inside, *permanently*, from these conditions that we struggle with.

Now finally, the third ineffective strategy for depression. This I find to be very common in my clientele, which by definition is members of the Church, at LDS Family Services. This one I would call "***misguided spirituality.***"

Now this one I need to be careful with, because you'll soon see, spirituality is at the very center of what I believe, and what I practice as a therapist. *I believe that our deepest healing comes from no other source than through our Savior Jesus Christ, and the power of His Atonement.* And the processes of our covenant-making, and the Spirit, and all these wonderful things that we've been given.

But I'll tell you what I mean by "misguided" spirituality. It's not infrequent that a very faithful member of the Church (card-carrying, temple-going, scripture-reading, Family Home Evening-having person) will come to my office and say, "Sister Wrigley, I don't know what else to do. I am doing every single thing I can do, everything the Brethren have taught me. For years and

years and years, I've done it, and I'm still miserable. And I cry and cry and cry to God that He will just take this thing away from me. Isn't that His job, to take my burdens away from me?" And it is sweet to tell them: that ain't the gospel! The gospel of having our problems taken away from us, friends - that ain't the gospel!

Here's the gospel: *Mosiah 24:14* talks about how the people of Mosiah didn't have their problems removed from them when they were captured by the Lamanites. They were *visited in* their afflictions.

Second reference: *Alma 36: 3 and 27*. Alma testifies powerfully that in the process of his ministry, he's been through all kinds of problems and afflictions and tribulations, and that he has been *supported in* all that variety of his challenges.

Nephi, in *2 Nephi 4:20*, "*I have been led **through** mine afflictions in the wilderness.*" They weren't taken away; he still had to eat the raw meat; he still had to cross the desert; he still had to have his brothers almost try to kill him. But he was led *through*, he was supported, he was visited *in* those challenges. That's the *real* gospel of Jesus Christ, as it relates to our adversities.

And finally another insight from Nephi and those wilderness conditions. **1 Nephi 17:3** talks about how if people turn to God in their afflictions, He will nourish them, and strengthen them, and provide means for them to get through whatever it is. *That* is the real gospel of Jesus Christ as it relates to our adversities. And there is healing, and there is grace, and there is power in that.

But it is strengthening power. It is the power of God who wants to lift us to His kind of strength and patience and grace and kindness and gentleness, and all those kinds of things that simply don't happen in us when life's going great for us. It's when somebody tries your patience that you learn how to really be patient. It's when the winds blow so strong, or the waves crash so heavy, you wonder how you can keep going. That's when you develop strength. Not when you're walking comfortably on the seashore.

Our Father *allows* us, He *sent* us to this earth to have challenges. He very, very infrequently will rescue us from those. Far more commonly what He will do is - visit us in, support us in, lead us through, nourish, strengthen, provide means for us to get *through* those challenges that we are called, like Joseph Smith, to face in our lives.

I find that when people latch onto that idea, that they can direct that spirituality not to the no-win, never-ending "please make this go away!" But rather, "*God, teach me what I need to learn. Strengthen me; strengthen my shoulders that I may bear this. Cleanse my heart; forgive my sins; lead me forward.*" Those are the kinds of prayers that get answered.

So, we've reviewed three ineffective strategies for dealing with depression: **assessment-only therapy, medication-only intervention**, and **misguided spirituality**. Let's talk, even more importantly, of course, now - about what *works*.

Learning by Study, and by Faith

I was given some clues to this by a wonderful talk given by Chieko Okazaki in October 1994. Some of you sisters may remember this - it was in a Women's Conference. She came, and with her usual strategy, she brought props. This time there were two huge oars. (Remember this, sisters?) One of them was labeled "study." The other was labeled "faith." And she talked about how, if you were to use just one of those oars - let's say you use the "study" oar. And you find out everything the world has to say about a topic of concern, and you paddle, and paddle, and paddle, and paddle, on that side of the boat. What happens? You don't go forward; you go in circles, right?

So let's say you get tired of that approach, and you pull out the "faith" oar. And you paddle, and paddle, and you do every single thing you can do, enhance your faith, and do all your religious practice, and... circles, round and around.

She said, the Lord commanded us to learn by study - *and* by faith. To use those things in a balanced way. And I have found that approach to be particularly potent and powerful, in approaching this problem of depression. To balance, and integrate, and synergize the wonderful things that we learn from the gospel - with the insightful, helpful, practical strategies that have been developed by (I believe) inspired and wise people in the world.

What follows is my personal way of integrating those things. There may be many ways of doing this; this is just the one I find to be most helpful. I find this model to be helpful to first **assess**, then **treat**, and finally, **prevent** episodes of depression. I call this "***The Diamond.***"

The Diamond, Part 1- Relationship Triggers

The Diamond has several elements. First of all, I find that depressions, as I talk to people, don't simply emerge out of the blue. There always seems to be some kind of *situation* that corresponds to the time a person began to get depressed. Something that occurs in the context of a *relationship*. So "**Relationship**" is the first element of the Diamond.

I thought that this idea was original with me - until last year, as I was studying for my Education Week classes, I found that there was a whole course of study and research that was being done by some therapists that had identified a whole branch of therapy called IPT, "Inter-Personal Therapy," based on this idea - that people get depressed in response to life events in their relationships. The IPT therapists identified four specific kinds of **triggers** - events that can set people off in a depressive type of direction.

The first trigger is ***grief***. This is probably no surprise to anybody who's lost someone close to them. There is a very natural kind of sorrow and heartbreak that occurs when we lose someone we love - whether it be to death or divorce or disability or whatever it is. It's not a far stretch between the normal experience of grief and the deepened, more dark experience of depression. Grief can be a very powerful trigger in that direction.

Secondly, they found a trigger of ***transition***. This one was a bit of a surprise to me; I hadn't really thought about it. And for some transitions, it's not very surprising. Let's say a woman becomes divorced, and all of a sudden she has a host of new responsibilities and new

deprivations. She has to go to work and support herself, rather than be able to stay home and take care of her family. Perhaps her living situation changes. Almost definitely her income changes. Her children have to adjust to completely new circumstances. And she's away at work, and can't really manage those things on the 24-hour basis that she would like to - or whatever it is. That's obviously a depressing kind of transition.

But I've found in my personal life, and in my practice, that even *happy* transitions can trigger depression. The birth of a perfectly healthy, beautiful baby. Graduating from high school - or with your Master's degree. That was actually the precipitator of the deepest depressive period I ever went through. When I finally got my Master's - 20 years of school, finally it was done. I didn't know who I was, I didn't know what the new rules were; it was depressing! Went through the darkest period of my life; I never understood it until I saw this model. When your last child leaves the house is a common transition for women to get depressed.

There's a lot of *happy* transitions: moving into a beautiful new house and a beautiful new neighborhood - wonderful thing! People say to me all the time, "I should be happy. I feel so guilty because I have this great life, but I'm still depressed!" Well, guess what it's about? So many times it's about transitions. Even happy ones can set that off.

Conflict, trigger number three. At LDS Family Services, so commonly, we find marital problems and depression walking hand in hand. Or, on the other hand, perhaps, a conflict between a parent and a teenager, or a conflict with a friend the child might have at school, or whatever. Conflict with someone you love is painful; it's depressing. And it can very commonly be a trigger for depression.

The last trigger identified by these therapists was **Lack of Interpersonal Skills**. They found that if people grew up in situations where they had never learned to effectively form and maintain relationships, they would go through a series throughout their life of disaster after disaster after disaster. The same kinds of difficult, heart-breaking things happening, because they never learned in the first place how to have a positive relationship.

Now in addition to those four triggers, before I knew about their model, I had identified three triggers from my own observation. I think these are still relevant as well.

The first of these is **abuse**. I found that when my clients had experienced abuse, especially sexual abuse, it seemed to set them up, in about the most powerful way possible, for self-doubt, for feeling that they were a bad person, for wondering if God loved them, for wondering if all men were evil, or whatever. It sets a very potent breeding ground for depression.

The next trigger I identified was **loss**. This is kind of like grief, but it's broader. It can be things like - you move, and all of a sudden you've lost your neighborhood, you've lost the familiarity of that setting. Or maybe you thought you were going to get a scholarship at such and such university; instead, you don't even get in. Or whatever. Loss of opportunities, loss of dreams, loss of comfortable circumstances you're familiar with - can trigger that kind of response.

And finally, **disappointment**. Thinking life's going to be like this, instead it turns out like this. Thinking marriage is going to be like this, instead it turns out like this. Or whatever.

We go through these seven triggers very consistently in our lives. I don't know that there's any one of us here who hasn't experienced at least one of these triggers in our lives. As Paul said, these things are common to man. So what makes the difference between a depressive trigger, and just a normal life experience?

For example, if I want to make a chocolate cake, I gotta have flour. You just don't make chocolate cake without flour. But if I have a big old 20-pound bag of flour sitting on my counter, I don't automatically have chocolate cake. You need to add other things. And it's that addition of other things that brings us to the next element of the Diamond.

The Diamond, Part 2 - Thinking

There's another team of researchers who, over the past thirty-some years, has identified a form of treatment for depression and other emotional disorders called ***cognitive therapy***. This is based on thoughts - how people respond in their own minds to the experiences that are going on around them, whether they be positive experiences or negative experiences.

Negative thinking about events, they found, *creates* negative feelings. The good news about that is that people can be taught to identify what constitutes negative thinking. They've done a beautiful job of identifying the specific kinds of thoughts that cause emotional distress.

For example, *"If I don't do it perfectly, I've totally failed."* That's a very common one. Or, *"If it happened once and it was bad, it's always going to happen that way, and it's always going to be a disaster."* Or, *"I know what they're thinking about me - and it's not good!"* You know, those kinds of things - they identified as what they call the ten forms of twisted thinking.

It's a wonderful method; I encourage everybody here who has an interest in this topic to research that further. The best place is in a book called the ***Feeling Good Handbook*** by David D. Burns. It was published in 1989; it's still close to a bestseller, because it's just such great information on that topic.

I love this insight about thoughts being part of the process of creating depression, because it's so consistent with what we've been taught in the gospel. Here's an example from general conference from Elder Scott, a talk called ***"Finding Joy in Life."***

"A pebble held close to the eye appears to be a gigantic obstacle. Cast on the ground, it is seen in perspective. Likewise, [the] problems or trials in our lives need to be viewed in perspective... No matter how difficult something you or a loved one faces, it should not take over your life and be the center of all your interest. Challenges are growth experiences, temporary scenes to be played out on the background of a happy life. Don't become so absorbed in a single event that you can't think of anything else or care for yourself or for those who depend upon you."

I love that example, and I've seen countless examples in therapy, and in my own life, of the difference that Elder Scott talks about.

Let's go back to some of these images that KBYU created for this section. Let's go back to that first image, the close-up of the pebble. This illustrates so beautifully how our problems look to

us when we're focusing on those negative experiences - those negative, disappointing aspects of our lives. You see every crevice of this pebble, don't you? All you see in the screen is the pebble and the hand holding it. And if you look into the background, it's just a big blur; you don't even know what's there.

Now let's go to the last of that sequence of images. You still see the pebble; you can almost not make it out, there in the bottom right-hand corner. It's there, it's part of the image. But look what else is there. Those beautiful mountains, and the arches, and that wilderness terrain. If you were to stand where that cameraman was to stand, and not just look at that particular view but a panoramic view all around, you would see even more that there is ever so much more than just that one little pebble.

Cognitive therapy and similar approaches teach us to focus our thoughts on all of those great things, rather than just those one or two disappointing things that truly are there, they truly hurt - but they're not the entire picture. We can learn to see things in perspective - in panorama. And in the process, very actively, very effectively battle and win those battles with depression.

The Diamond, Part 3 - Behavior

Now the next element of the Diamond I like to call "behavior." We've been taught for years in religious contexts, most often in morality lessons, that what you think largely determines what you're going to do. That's true of those morality lessons: if you think those dirty little thoughts, ultimately you'll do those dirty little behaviors. But I think it's not only exclusive to that domain.

Let me just give you some examples. Going back to those three elements we've talked about so far on the model. Let's say that there's a young woman who's been sexually abused. And in response to that abuse, she develops negative thoughts, such as: *"This means I'm a bad person."* *"This was all my fault."* *"Nobody good is ever going to want me, because I'm broken."* *"I am used; I am trash."* *"All men are evil. You can't trust any of them."*

Now if she has those kinds of thoughts, what is her resultant behavior going to be? Most likely, with that system of thought, she will pull away from other people, she will have a hard time trusting anybody, including her bishop, her Heavenly Father.

Or let's add a little different dimension. Let's say that in addition to those kinds of thoughts, she says to herself, *"All I'm good for is sex. And the only way I can get love is through sex."* Then what will her behavior be? She is bound to gravitate to those men - and they exist - that only want her for sex, and that only express love in those kinds of ways, and then cast her aside - expanding and perpetuating that cycle of abuse, that cycle of depression and of pain.

So that's an example of how relationship experiences lead to negative thoughts; negative thoughts lead to negative behavior. Now, let's go on to the last element of the Diamond, and we'll flesh out that example a little bit more.

The Diamond, Part 4 – Spirituality

The last element of the Diamond is ***Spirituality***. What I have found in my practice (and of course the professionals don't write about this as much, but at LDS Family Services, I am not just free but *encouraged* to explore this direction with my clients) I find it to be the most powerful part of the healing process.

Let's get that same little girl into therapy. Little girl's been sexually abused, same history, same exact stuff. Comes in with the same thoughts, and let's say that we start to explore in therapy, (or she may do this on her own) : *"Does this really mean I'm a bad person - or there are all these other good things about me?" "Does this really mean that all men are evil, or did I have one bad experience with one bad man, and I've had hundreds of thousands of great experiences with great men? My bishop and my father, perhaps, and my stake president, whoever."* And instead of pulling away into isolation, or pulling towards the wrong kind of man, she learns how to have positive relationships, positive communications. And most importantly of all, she learns to turn to her Father in Heaven.

See, otherwise, what happens in scenario number one, where she's thinking the negative thoughts, doing the negative behavior, what happens to her spirituality? *It crashes*. She pulls away from her Heavenly Father, because she feels so unworthy, so dark, so bad, so whatever. But when she learns to think and behave differently, and to look to Him to get her through, to support her in, to visit her in her afflictions, the entire picture changes.

Let me illustrate that full model one more time with another scenario. Let's say we have a man, 55 years old. Worked for the same company for 30 years. All of a sudden, a couple of days after his 55th birthday, the boss informs him: *"We just won't need you anymore."* Suddenly, the pension, the life plan, everything that he's planned for all these years, worked for all these years, disintegrates in an instant. A potent trigger: ***loss, transition***. You could even argue ***abuse***; that's not a good way to treat a human being.

So, let's follow the depressive cycle first, through the Diamond, as we've talked about. Maybe he thinks to himself: *"This just proves you can't trust anybody."* *"I've worked all these years, and if I've worked all these years, and had this kind of result, I must be a complete failure as a human being."* *"If I'm to go out at 55 years old, do you think I'm going to find a job? Do you think anybody's going to want to hire an old guy like me?"*

Well, if he thinks those kind of things, what's going to happen to his behavior? He's going to be very unlikely to go looking for a job. Or even if he does, he'll be so downcast he won't come across well at interviews. And if he does that, what's that going to do to his spirituality?

So often people say to me things like, *"How could God do this to me? I have paid my tithing my entire life; I have lived a good life; how could He let this happen?"* And it disintegrates their relationship with their God. And then it rolls all the way back around the top of the Diamond, to Relationships again. And they pull away, perhaps, from their wife, or people around them. Or they kind of snap at them and become irritable. Thus setting in motion the foundation for somebody else's whole depressive cycle! Because there's a loss of that relationship, or there's abusiveness in that relationship, or whatever.

There is a better way. As we learn to look to our Heavenly Father - as we learn to identify the kinds of thoughts and behaviors and spiritual and relationship strategies that bring us down - we can learn instead to look to our God to bring us up.

Now I'd like to illustrate that kind of perspective at this point with some words that you may find familiar, words that are inspired by some sections of the Doctrine and Covenants. This is a song I wrote a few years ago for one of our Young Women's groups. It's called "**For Thy Good.**" And again, it's a little bit different perspective on why we are allowed to go through the experiences that we experience in our lives.

*So many questions I can't find answers to, So many things that I don't understand.
So many times I don't know what to do.
Dear Father, won't you guide me with your gentle hand?*

*For so many times, you've lit my darkness,
And through the years you've been my most trusted friend.
So often you've calmed my storm and shown me the way:
Dear Lord, could you do it for me once again?*

A voice, tender and kind, Lights up my heart and illuminates my mind:

*"All things shall work together for thy good,
All things will come about the way they should.
If you search and pray and be believing,
All these things shall be for thy good."*

*I think of Jesus and all he passed through, When He was here upon the earth.
He bore trials, pains, and afflictions, Even from the moment of His birth.*

*So I know He knows all I feel,
And I hear those words again, bringing hope and healing:*

*"All things shall work together for your good,
All things will come about the way they should.
If you search and pray and be believing,
All these things shall be for thy good."*

*And I know through faith I'll overcome Every challenge I encounter every day.
As Jesus died, then rose again,
I'll rise up too, as I look to Him in faith, As I look to Him in faith!*

*All things shall work together for my good,
All things will come about the way they should,
As I search and pray and be believing,
All these things shall be for my good.
All these things, even the hard ones,
Shall all work together for my good.
As I search and pray and be believing.*

Applying the Diamond: Identify, Replace, Assimilate

Brothers and sisters, we have a choice how we respond to every situation in our lives, even the most difficult ones. If we look at the Diamond as we've discussed it, I'm going to add three final steps for how we can use the concepts that we have talked about.

Again, when I use this with clients, what I suggest they do is that they go through those four elements. **Relationships** - to think about the things that have happened in their lives, those kind of triggers we talked about. **Thoughts** - to identify the kinds of negative thinking that has made that problem even more weighty, even heavier. And again, Burns' book, the *Feeling Good Handbook* is a finer, as I call it, "demon detection system," to identify those negative kinds of thoughts and perceptions than any other resource I've ever come across.

Next, to identify **Behavior** - negative behavior they may be engaging in, or positive things they've been neglecting, that they can start to do that contributes to the way that they feel, whether positive or negative. And then finally, **Spirituality** - how they allow this negative experience to impact their sense of connection to their Heavenly Father, to other people, their sense of mission in life, their sense of identity. And as a final element, how are they allowing all that to impact their relationships?

And then we go through each of those elements again in turn. **Relationships, Thoughts, Behavior, Spirituality**. And plan what they can do to **replace** the junk that they've identified.

If they have found, for example, that they expect themselves to be completely perfect in everything they do or they're a failure, that's a negative **thought**. We identify ways to replace that by helping them to give themselves credit for the things that they do do that are good.

If they realize that in terms of **behavior** they've just sort of been lying around on the couch, watching television, gaining more and more weight, feeling even worse about themselves, we get them up off the couch. We give them an exercise program, and talk to them about how they can manage their time in more effective, happy kinds of ways.

If they've been pulling away from Heavenly Father because they wonder how He could let this happen, we give them some of the kinds of insights we've talked about today - to transform their sense of **spirituality**, so they're no longer just whining at God for what's happened to them, but they know how to draw on the strength of God to get them through whatever it is they're experiencing.

And then finally, to be able to transform their **relationships** in happy, positive ways. Pulling towards those close to them - rather than snapping at them, or pulling away from them.

These things take time to learn, to integrate. People can identify the problems, learn to replace the problems, and then as a third step, have to practice them over and over until they become assimilated as the normal response to their adversity, their trials. But as people learn to do that - to **identify, replace, and assimilate** positive things, trading them for the negative things that otherwise maintain and perpetuate and escalate their depression - they feel better.

And they don't just feel better for a short period of time, they feel better *permanently*. They gain a sense of victory, of overcoming, of empowerment, of hope that is palpable and so joyful. A sense of hope that they are then able to pass on to those around them, that they are able to share these kinds of strategies for literally *replacing*, overcoming, these problems.

Conclusion: Drawing On the Savior's Power to Heal

Now as a final conclusion, I'd like to draw on one of my very, very favorite scriptures. I heard this scripture in a very personal way for the first time in the talk given by Sheri Dew at a funeral. She read this scripture and testified about it, and I pass on the testimony to you, that this is what our Savior Jesus Christ has promised to do for us. This is in Isaiah 61, starting with verse 1:

"THE Spirit of the Lord God is upon me; because the Lord hath anointed me to preach good tidings unto the meek; he hath sent me to bind up the brokenhearted, to proclaim liberty to the captives, and the opening of the prison to them that are bound... to comfort all that mourn;

"To appoint unto them that mourn in Zion, to give unto them beauty for ashes, the oil of joy for mourning, the garment of praise for the spirit of heaviness; that they might be called trees of righteousness, the planting of the LORD, that he might be glorified."

Brothers and sisters, I have learned for myself, personally and professionally, that the Lord means it when He says He can heal us. That He can help us to have a full and complete victory over the challenges of our lives.

We can learn to arm ourselves with power, to put on ourselves the armor of righteousness, the armor of hope and optimism, the armor of good works, the armor of self-reliance, that leads us with strength and boldness through the challenges of our lives. Armed with that power, we do not need to fear the future. We do not need to fear living in the latter days, with all of their unique challenges and heartbreaks and transitions. We can look upon these things with optimism, with joy, with strength, knowing that we and our children can handle them as we learn to think positively about them, as we learn to behave in a Christ-like way in the face of them. As we learn to look to our God for strength in the midst of them. As we learn to relate to others in a charitable, Christ-like way in the midst of them. Our Heavenly Father, our Savior, can literally arm us with power in each of these four dimensions, and in the process, heal us in a deep down, internally based, permanent way.

I am so grateful for our Savior. I am grateful to know that He passed through all sorrow, that anything that we go through is nothing compared to what He has borne for us, and what He therefore knows how to bear with us. He drank the bitter cup that was given to Him, and He rose, He overcame. *He can teach us to do the same*. That is my witness to you, in His holy name, even the name of Jesus Christ, amen.