SPIRITUALITY AND DEPRESSION: A QUALITATIVE APPROACH

by

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PROMOTER: PROF C MOORE

NOVEMBER 2006
I declare that

SPIRITUALITY AND DEPRESSION: A QUALITATIVE APPROACH

is my own work and that all the sources I have used or quoted have been indicated and acknowledged by means of complete references.

........................................  ........................................
SIGNATURE                        DATE
(REV AC ROBERTSON)
SUMMARY

Spirituality is a neglected dimension in psychology, but has recently been growing in importance. Depression is a widespread phenomenon, worldwide, although presenting differently in different cultures, including South Africa. The aim of this study was to give an opportunity to those who have experienced spirituality and depression to voice their experiences in their respective contexts.

The ontological framework was postmodernism and the guiding epistemology was social constructionism. Qualitative research was the method of research selected, because it suited the aims of the research. The specific method of analysis was a “categorical content analysis”. In depth interviews with eight participants from various faith backgrounds were conducted. The participants’ stories were interpreted by the researcher in the form of themes. Recurring and pertinent themes were compared and discussed with other voices in the field, such as the literature and societal and cultural discourses.

The study facilitated rich, detailed and complex descriptions of people’s experience of spirituality and depression. The researcher hopes the voice of this research will lead to new understandings of these phenomena in a South African context.

Key Terms

Spirituality; Depression; Loss; Anger; Relationships; Future story; Meaning; Subjugating discourses; Culture; Language; Religiousness; Prayer; Externalization; Openness to experience; Epistemology; Qualitative research; Postmodernism; Research methodology; Social constructionism; Categorical content analysis.
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CURRICULUM VITAE

Alan Robertson was educated at Christian Brothers’ College, Kimberley. He graduated from Rhodes University with a degree in theology and was a priest in full time ministry for the next twenty three years. In 1999 he completed an Honours degree in psychology through UNISA. He was accepted in 2000 for the Masters program in Clinical Psychology at Potchefstroom University. Since obtaining his qualification he has practised as a Clinical Psychologist in Kimberley, where he is also a self supporting Anglican priest. He is married to Denise, a school teacher and they have four children: Mary, Stephen, Debbie and Paul.
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CHAPTER ONE

INTRODUCTION: SPIRITUALITY AND DEPRESSION – A NEGLECTED DIMENSION

Doctor: This disease is beyond my practice…Infected minds
To their deaf pillows will discharge their secrets.
More needs she the divine than the physician.
William Shakespeare
(from Macbeth, Act 5, Scene 1)

What we need to do is to begin to expand our understanding
of science … to include methods and ways of looking at the
world which will not overlook the spiritual dimension of the
person.

John Swinton
(from Spirituality and mental health care: a forgotten dimension, 2001)

General Introduction
The excerpts quoted above draw attention to the possible importance of spirituality
with regard to mental health. However, spirituality cannot be said to be a dominant
theme in the literature. Indeed, for some researchers, it is not an appropriate theme
for study, because it cannot be proven empirically (Bartlett, Piedmont, Bilderback,
Swinton, 2001). For a minority, however, spirituality has been considered an
important aspect of psychology (Frankl, 1959; Karasu, 1999; Jung, 1933b; Peck,
1978).

Moreover, there has been increasing interest in spirituality in recent years in the
fields of psychotherapy, counselling, psychofortology, health education, quality of life
studies, and wellness in the workplace (Bartlett et al., 2003; Bensley, 1991; Karasu, 1999; Miller, 2002; Seaward, 1995; White, 2004). Swinton (2001) argues convincingly that, whilst on the surface there seems to be a decrease in the support of institutionalized religion in Western cultures, there has been in recent years a dramatic rise in a quest for spirituality in other forms, such as an interest in Eastern religion, transcendental meditation, new age literature and the like. His argument is supported in America by the research of Ai, Cascio, Santangelo and Evans-Campbell (2005) who have found a renewed upsurge of interest in spirituality by Americans since September 11, 2001.

Another reason for this renewal of interest in spirituality may be the rise of the movement called postmodernism, which inter alia, emphasizes that people construct their own realities which are valid for each individual, and which could include spiritual realities (Rapmund & Moore, 2000; Swinton, 2001).

Hence the spiritual experience of people as a psychological phenomenon needs to be taken seriously as an appropriate field of study in psychology (Cole, 2005; Lothane, 2004). Incidentally, Jung (1933b) articulated this postmodern principle way ahead of his time, suggesting that psychology should interpret the spiritual experience of people as valid expressions of their psyche.

In the light of these developments, it seems that spirituality is now an area of importance in psychology and psychotherapy, and merits urgent research.

Depression, the other key construct of this study, has been described as the common cold of mental illness, affecting millions throughout the world (Robertson, 2002). A review of the literature on depression reinforces the impression that depression is a highly complex phenomenon that transcends simplistic definitions.

In the Western world, depression is at present viewed largely through the lens of the medical model which tends to regard depression as an illness residing objectively within a person (Hussain & Cochrane, 2002; Lothane, 2004; Parker, Georgaca, Harper, McLaughlin & Stowell-Smith, 1995; White, 1995). In the light of the social
constructionist paradigm which informs this study, the assumption that depression is located “inside” a person is simply one of the many discourses, or ways of viewing reality, created by language as people interact (Burr, 2003). Linked to this is the notion that the way people understand, explain and even experience depression will change over time (Bullard, 2002; Burr, 2003), and will be viewed differently by different cultures. Hussain and Cochrane (2002), for example support this view in research among South Asian women which found that the criteria of the medical model as expressed in the DSM-IV was not helpful, because of the different cultural conceptualization of depression and its treatment.

Since the advent of postmodernism which argues, among other things, that there can be no ultimate truth or “grand narrative” that explains the nature of reality (Doan, 1997) and which also rejects the idea of hidden structures within people (Burr, 2003), depression as viewed by the medical model has come increasingly under attack (Parker et al., 1995; Robertson, Venter & Botha, 2005; Swinton, 2001).

Because of this, and because depression is experienced, in one form or another, by many people as maladaptive suffering, it would seem that there is a need for new ways of viewing and understanding this phenomenon. It is hoped that a study of the relationship between spirituality and depression may help to do this.

The context of the study is South Africa, a country in which spirituality/religion is clearly important in the light of the fact that seventy five percent of the population claim to be Christian, and twenty percent claim allegiance to other religions (De Gruchy, 2004). Moreover, Kourie and Kretzschmar (2000) draw attention to the renewed interest in spirituality in South Africa since the advent of democracy in 1994. South Africa is also a country where depression is an ever present phenomenon, presenting differently in different cultures (Ellis, 2003). There seems a need, therefore, for a study on spirituality and depression in a South African context.

**Definitions of Concepts**

In this section, the definitions of the main concepts of the study will be discussed, because these definitions provide the context of the research.
Spirituality

Spirituality is a slippery concept, very difficult to encapsulate in a single definition. Indeed, there are almost as many definitions as authors (Cole, 2005; Fowler & Hill, 2004; Plante & Sherman, 2001). However, there seems to be broad agreement that spirituality is linked primarily to inner experience and is concerned also with existential questions such as meaning and purpose in life (Nasser & Overholser, 2005; Swinton, 2001). Spirituality may include a relationship with the transcendent, but not necessarily so (Cole, 2005; Frankl, 1959; Simoni & Ortiz, 2003). Spirituality needs to be distinguished from religiousness, which refers to a commitment to a creed, and/or outward religious observance (McClain, Rosenfeld & Breitbart, 2003; Plante & Sherman, 2001; Swinton, 2001). Nevertheless, religiousness may include aspects of spirituality, for example when outward religious observance includes either inward experience or an existential dimension (Hill, Pargament, Swyers, Gorsuch, McCullough, Hood & Baumeister, 2001; Nasser & Overholser, 2005; Swinton, 2001).

In the light of the paradigm of social constructionism, which suggests that research should pay attention to the micro discourses of “ordinary people” (Burr, 2003; Liebrucks, 2001), there seems to be a need to hear the definitions of ordinary people regarding spirituality.

Depression

Depression has been defined generally as an affective condition, sometimes pathological, involving emotions of helplessness and hopelessness which can sometimes be overpowering and which is often accompanied by a general lowering of psychophysical activity (Rapmund & Moore, 2000). In the field of psychiatry, a loss of response to the pleasures of life has often been seen as the distinguishing feature of depression (McClain et al., 2003; Reber, 1985).

In Western culture, the diagnostic criteria of the DSM-IV (1994) are widely accepted as a reliable definition of depression (Hussain & Cochrane, 2002; Nasser & Overholser, 2005; Robertson et al., 2005). According to the DSM-IV, major depression presents itself either by depressed mood or loss of pleasure response for
a period of two weeks or more, accompanied by four or more of the following symptoms:

- insomnia
- sudden weight loss or weight gain
- psychomotor agitation or retardation
- fatigue
- guilt feelings
- a loss of self-worth
- lack of concentration
- suicidal ideation

The foregoing definitions tend to place depression within the inner psyche of the individual. In this study, depression is analyzed from a social constructionist viewpoint, which views depression as a phenomenon not residing objectively inside a person, but rather as a discursive phenomenon, created within a social context by language.

**Aim and Rationale of the Study**

The aim and rationale of the study will be better understood against the background of the current state of research on spirituality and depression in both the quantitative and qualitative research fields.

**Quantitative research**

A striking feature of recent research on spirituality and depression is the relatively large number of quantitative studies in a field involving a metaphysical variable that was once considered inappropriate for empirical study. A possible reason for this may be the renewed interest in spirituality in America since September 11, 2001 (Ai et al., 2005). Another possibility is the influence of Eastern perspectives in Western psychology, since spirituality is an important component of Eastern psychology (Viljoen, 2003b; Wolf & Abell, 2003).

Whatever the reason, the quantitative studies are analyzed in this section because they constitute a “voice” in the field, which needs to be heard (Gergen, 2006). The studies cluster around a number of themes, which are discussed below.
**Spirituality and/or religiousness as helpful or harmful**

The overall impression of the quantitative research in this area is that the evidence is conflicting:

- Some studies suggest that subjective, intrinsic, or existential spirituality helps people to cope with depression (Coleman, 2004; Hughes & Peake, 2002; Jones & Benda, 2004; McClain et al., 2003; Simoni & Ortiz, 2003; Young, Cashwell & Scherbakova, 2000).
- Other studies suggest that spirituality in the above sense is not helpful to depression (Bonner, Koven & Patrick, 2003; Fowler & Hill, 2004).
- Some studies suggest that religious beliefs and practices, in contrast to spirituality, help people to deal with depression (Gatz & Fiske, 2003; Pearce, Little & Perez, 2003; Wink, Dillon & Larson, 2005).
- Cole (2005) reframes the terms of the debate by differentiating between positive religious coping and negative religious coping. The former refers to surrendering control to God and turning to a religious group, while the latter refers to religious conflict and spiritual struggle. Cole (2005) found that positive religious coping helped people suffering from depression.
- Other studies have found that religious beliefs and practices were linked to the worsening of depression (Coleman, 2004; Larson & Larson, 2003;).

From a social constructionist perspective, the quantitative research may suggest that there are discourses in society regarding spirituality which people draw upon to assist them in their struggle with depression. The dominant discourse drawn upon seems to equate spirituality with religiousness, in the form of intellectual beliefs and public religious observance. However, the quantitative research suggests that there is another, alternative discourse available to depressed people regarding spirituality, namely that of spirituality as an inner, subjective, existential experience apart from religious structures. Furthermore, the work of Cole (2005) suggests that there is a new discourse emerging for depressed persons, one that fuses public religious observance and intellectual beliefs with an inward spirituality, the result perhaps of the former seemingly opposing discourses in dialogue with each other.
Cultural differences with regard to spirituality and depression
Quantitative research is to be commended in that it has conducted research on spirituality and depression in other cultures. In India, for example, Anjana and Raju (2003) found that the reciting of the Bhagavad Gita reduced levels of depression and other maladjustment variables in subjects. Research in the field has also been conducted *inter alia* among Puerto Rican women (Simoni & Ortez 2003), African American women (Fowler & Hill, 2004) and African American heterosexuals, in the context of HIV, depression and spirituality (Cohen, Magai, Yaffee & Walcott-Brown, 2005).

Quantitative research has done well to draw attention to the fact that spirituality and depression may be experienced differently in different cultures. Quantitative research in an eastern context has also drawn welcome attention to the different kinds of spirituality in different cultures (Anjana & Raju, 2003; Cirakoglu, Kokdemir & Demirutku, 2003; Wolf & Abell, 2003).

Definition of depression
In the quantitative research, depression is seen as a “fixed reality”, viewed through the lens of the medical model, either via the DSM-IV, or the Center for Epidemiological Studies Depression Scale, or the Hamilton Rating Scale for Depression (Bonner et al., 2003; Cohen et al., 2005; McClain et al., 2003; Nasser & Overholser, 2005; Simoni & Ortiz, 2003).

Social constructionists would have a problem in interpreting depression as a “fixed variable”. For social constructionists, depression is a discursive phenomenon that changes across time, contexts and cultures (Parker et al., 1995).

Strengths and weaknesses of the quantitative research in this field
The value of the quantitative research is that it highlights certain themes that need further research. However, the heavy reliance on psychometry in the quantitative research tends to stifle the voices of the research participants, and may not produce the richness, depth and complexity that qualitative methods might achieve by personal interviews. For this reason, namely, a desire to allow the “voices” of people
who experience spirituality and depression to be heard in a rich, detailed manner, qualitative research is the method chosen for this study.

**Qualitative Research**

It is puzzling that so little qualitative research has been conducted in this field, considering that spirituality is a phenomenon so closely associated with human experience, and so difficult to measure in quantitative terms. The little that has been done covers the following themes:

- spirituality helps people to cope with depression: Swinton (2001), for example, using a constructivist approach in which participants voiced the impact of depression upon their spirituality, found, *inter alia*, that spirituality imparted some hope to some participants in the midst of depression, and for some acted as a catalyst for new spiritual insight and fresh possibilities. In addition, Robertson et al. (2005), by analyzing the life narratives of depressed persons, found that spirituality functioned as a means of externalization for some participants, thus assisting them to deal with depression.

- depression has a spiritual dimension: Swinton (2001) for example, uncovered the following themes: depression robbed life of the meaning imparted by spirituality, depression initiated a questioning of faith, and a feeling of abandonment by God. Similarly, Robinson-Smith (2004), in a qualitative study in which she used content analysis of interviews as well as depression psychometric instruments, found that asking for spiritual help was a prominent theme in the interviews but was not a component in the depression instruments, suggesting that depression is an important, but neglected, component of depression. In similar fashion, MacKinlay (2002) found, in a qualitative study among depressed older people, that spirituality, in the sense of having meaning and purpose in life, was one of the main issues in the depression.

- definitions of depression and spirituality: some of the qualitative research allowed the participants themselves to voice definitions of depression. In MacKinlay (2002) the participants defined spirituality as a sense of having meaning and purpose in life. In the research of Robertson et al., (2005), the participants expressed spirituality as an inward, relationship with God.
The literature search by the author yielded only one study that concerned itself with spirituality and depression in a non-Christian, non-western context. Hussain and Cochrane (2002), using a qualitative, grounded theory approach within a constructivist paradigm, found that spirituality was linked to participants’ experiences of depression, as both a cause and a cure. Spirituality was expressed by participants as public religious observance.

A survey of the literature revealed, moreover, that no qualitative research of this nature has been conducted in a South African context. It seems evident that there is a need for qualitative research that allows persons to voice their experiences of spirituality and depression in a South African context. The aim of the research is to fulfill this need.

Within this general aim, the researcher, despite the unpredictable nature of qualitative research, hoped that the following research questions might be addressed. They are stated at the outset in the interests of transparency:

- does spirituality help or hinder people in their struggle against depression?
- what language do people use in their stories of spirituality and depression, and their relationship?
- what meanings do people attach to their experiences of spirituality and depression?
- how do ordinary people define the concepts of spirituality and depression?
- what subjugating voices are apparent in the stories of the participants?

It is hoped that the study will make a valuable contribution to research in the area of spirituality and depression in a South African context. It is hoped also that the study will contribute to new ways of understanding both spirituality and depression, and their relationship.

**Ontology, Epistemology and Methodology**

The guiding ontological framework for this study is that of postmodernism. Put simply, postmodernism rejects the notion of an overarching, ultimate truth as a way
of knowing and explaining the world (Burr, 2003; Doan, 1997). Linked to this, postmodernism suggests that there are multiple realities co-existing in the world in many social and cultural contexts (Bullard, 2002; Burr, 2003).

Within this framework, social constructionism is chosen as the epistemological paradigm that will guide the research, especially by means of the following principles:

- Social constructionism suggests a very critical and questioning stance towards normative discourses, i.e. current ways of understanding the world (Burr, 2003; Edley, 2001; Freedman & Combs, 1996; Venter, 2000).
- Social constructionism stresses the importance of lived experience, which is valid for the person concerned (Edley, 2001).
- It emphasizes that this lived experience, or construction of reality, is influenced by interaction with the particular social and cultural milieu in which the person lives (Burr, 2003; Moore, 2003a).
- Reality is not described by language, it is created by it (Burr, 2003; Edley, 2001).
- Psychological concepts are created by ordinary people using ordinary language in interaction with each other. It is therefore interested in the meaning ordinary people assign to the concepts of depression and spirituality (Liebrucks, 2001).
- Ways of viewing the world, or “discourses”, have a political dimension: certain discourses may marginalize and oppress people. Part of social constructionist research, therefore, is to generate alternative discourses which challenge normative discourses (Burr, 2003; Robertson et al., 2005).

Clearly, in the light of the foregoing, a qualitative research approach will be the most appropriate for this study. However, qualitative research itself is in a state of flux at the present time, and today’s qualitative researcher needs to explain where he or she is positioned within qualitative research (Denzin & Lincoln, 2003). The present researcher believes that qualitative research involves the following:

- Conducting interviews in a non-intrusive, non-directive way, allowing the person’s “voice” to be heard.
• Taking into account the principle of reflexivity; the researcher is a part of the process, as researcher and participant co-create a “new story”.

• Observing the principle of transparency in the research process. This means that the researcher needs to communicate clearly the epistemological framework guiding the research, the presuppositions brought to the study by the researcher, the means of evaluation, and the method of research. In short, the journey is now as important as the destination (Denzin & Lincoln, 2003; Lieblich, Tuval-Masiach & Zilber, 1998).

Design of the Study

Participants
Eight participants were selected by the researcher, on the basis of their potential for providing rich descriptions of their journeys with spirituality and depression. The researcher also made an attempt to include people of different faiths and cultures, because of the diversity of the South African context in which the study took place. The only other criterion was that the participants perceived themselves to have experienced spirituality and depression.

Method of gathering information
A popular method of qualitative research is to ask an unrestricted number of open-ended questions, in order to obtain depth and richness (Rapmund & Moore, 2000; Swinton, 2001). The disadvantage of this method is that the research can lose focus, and the researcher can therefore, quite unwittingly, nudge the participants’ stories in a particular direction. Moreover, in view of the need to be totally transparent about the process of research (Denzin & Lincoln, 2003) the researcher is sharing that, although he decided to ask the participants at least the following open-ended questions, he allowed the stories of the participants to unfold in an uninhibited way:
1. What is your understanding of depression?
2. What is your understanding of spirituality?
3. How does spirituality differ from religiousness?
4. What is the story of your spirituality?
5. What is the story of your depression?
6. How has your spirituality impacted upon your depression?
7. How has your depression impacted upon your spirituality?
8. How has spirituality helped you deal with depression?
9. How has spirituality hindered your struggle with depression?
10. Is there anything else you would like to share about spirituality and depression?

Analysis of Data
The researcher used a “categorical content” perspective adapted from the work of Lieblich (Lieblich et al., 1998) and Ryan and Bernard (2003). The process involved five stages:

- Largely on the basis of the questions used, the material from the interviews were placed into ‘sub-texts’.
- The sub-texts were explored as openly as possible for major themes (content categories). In this process, the following was taken into account: the amount of detail provided for each theme, the significance of the theme in the story as a whole, and the tone of voice and body language displayed by the participants in the interviews (Scheurich, 1997).
- The process was circular, with careful reading followed by sorting the sub-text into categories with subsequent further reading and rereading, with the possibility of the generation of new categories or the refinement of existing ones.
- Interpretations were made.
- The original interviews were read again, together with the interpretations, with the question constantly being asked: “Have I allowed the voice of these persons journeying with depression and spirituality to be heard?”

Reliability and Validity
In qualitative research, the terms reliability and validity are often replaced by the terms dependability and credibility, although the researcher agrees with the suggestion of Morrow (2005) that the term “trustworthiness” includes both dependability and credibility and is more in tune with the language of qualitative research. “Trustworthiness”, or dependability and credibility, was ensured principally
by allowing the participants to check my stories of their stories in feedback interviews.

The Researcher

The researcher brought his personal history to the research. I suffered from depression in my early twenties and again in my late thirties. In the first instance, a general practitioner prescribed mild anti-depressant medication, which seemed to help me to cope. In the second instance, a psychiatrist put me on to very large doses of anti-depressant medication. In sessions which seldom lasted more than fifteen minutes, I received very little psychotherapy. It was only in 1990 that I began to see a psychologist for intensive psychotherapy. I stopped all medication, and began to deal with some of the root causes of my depression. By 1991 I was able to cope with my depression, and I have kept it at bay ever since. I share these details to indicate to the reader that my experience has prejudiced me somewhat against the medical model.

Spirituality has been an important part of my life since I gave my life to Christ when I was fifteen years old. Most of my life I have been a priest in full-time ministry. Spirituality has sometimes helped me to deal with depression, especially a personal faith in a transcendent God whom I believe to be love, and who brings meaning through suffering, and who is with me in every situation. However, spirituality also often generated intense guilt feelings, as I judged myself harshly with the following kind of response: “If I am spiritual, I should not be depressed. Is there something wrong with my spirituality?”

In 1992 I began to study psychology. In that journey, I have developed the following: a commitment to postmodernism and narrative therapy; a suspicion of the medical model; a suspicion of quantitative research; a background in humanistic-existential psychology and family therapy; and a strengthening of my belief that spirituality is an important dimension of human existence. I did my best not to allow these assumptions to shout down the voices of the research participants.
The Layout of the Study

Gergen, who in some ways is the father of social constructionism, reminds us in a recent article that social constructionism does not aim to obliterate other perspectives, but rather to enrich them (Gergen, 2006). Hence the first part of this study will be a literature survey in order to hear the “voices” and “discourses” which are currently in the field. The second part of the study will be a practical component, consisting of qualitative research guided by the epistemology of social constructionism. Guided by the foregoing, the study will comprise the following:

- Chapter two will discuss spirituality.
- Chapter three will discuss depression.
- Chapter four will discuss social constructionism which is the epistemology informing this study.
- Chapter five will discuss the research methodology of the study.
- Chapter six will contain the main themes of each participant’s interview.
- Chapter seven will integrate and discuss the dominant, recurrent themes in the information gathered from the participants in the light of the other voices in the field.
- Chapter eight will conclude the study with an evaluation of the research and recommendations for future research.

Conclusion

Research on spirituality and depression has mainly been quantitative, focusing on definitions, components and measurement. There have been a few qualitative studies that allow people experiencing spirituality and depression to voice their unique experiences, but none of these in a South African context. This research aimed therefore at allowing people with spirituality and depression, in the South African context, and from different faiths, to tell their stories. The ontology is post-modernism, the guiding epistemology is social constructionism and the research paradigm is qualitative.
CHAPTER TWO

SPIRITUALITY: A FIELD OF GROWING IMPORTANCE IN PSYCHOLOGY

Spirituality is not a monolithic experience; it is extraordinarily complex, dynamic and multifaceted (Plante & Sherman, 2001, p. 382).

The spiritual dimension cannot be ignored, for it is what makes us human (Viktor Frankl, *The doctor and the soul*, p.x).

No matter what the world thinks about religious experience, the one who has it possesses the great treasure of a thing that has provided him with a source of life, meaning, beauty and that has given a new splendour to the world and to mankind (C G Jung, quoted in Jordaan & Jordaan, 1990, p. 828).

Gotta serve somebody (Bob Dylan, source unknown)

Introduction

The foregoing quotations, ranging from modern scholars like Thomas Plante and Allen Sherman, including magnificent theorists like Frankl and Jung, and extending to folk-rock icon Bob Dylan, illustrate the importance of spirituality and its relationship to the human condition.

Historically, spirituality and religion have been viewed by many cultures, both ancient and modern, as closely linked to health, both physical and psychological (Thoresen, Harris & Oman, 2001). In Western culture, however, the connection between spirituality and health was weakened by the dualism of the Enlightenment that viewed mind and body as distinct and separate spheres (Plante & Sherman, 2001). Psychology, driven by the Newtonian-Cartesian paradigm, by and large, neglected
spirituality as an appropriate field of study. One reason for this may have been the difficulty of defining spirituality as an empirical construct. As Plante and Sherman (2001, p. 2) express it: “How can one approach scientifically something so ineffable, intangible and mysterious?” A second reason may be that spirituality cannot be measured empirically, in contrast to the relative ease with which physical well-being can be measured (Fahlberg & Fahlberg, 1991; Seaward, 1995). Yet another reason may be the identification of spirituality with religion, in which spirituality is associated with the negative connotations of the latter (Baetz, Griffin, Bowen, Koenig & Marcoux, 2004; Plante & Sherman, 2001; Seaward, 1995; Swinton, 2001).

However, there are indications that the landscape is changing (Plante & Sherman, 2001). Spirituality seems to be gaining ground as an appropriate theme of study and interest among scholars and public alike. It seems significant that two of the major best-sellers in the past thirty years have been books in which spirituality is a major theme, namely Scott Peck’s The Road Less Travelled, and Stephen Covey’s The Seven Habits of Highly Successful People.

In the 1990's the tendency increased, with three spirituality focussed books featuring in the New York Times top ten list, namely Moore’s Care of the Soul (1994), Albom’s Tuesday’s with Morrie and Chopra’s How to Know God (1999) (Thoresen, Harris & Oman, 2001). In the late 90's, the American Psychological Association began publishing textbooks on religious and spiritual factors in psychological health (Thoresen et al., 2001) and in 1997 the York Templeton Foundation funded a series of conferences that reviewed the scientific evidence linking religion and spirituality to physical health, mental health, alcoholism and other addictive disorders (Thoresen et al., 2001; Swinton, 2001). Ai et al., (2005) have suggested that the tragic events of September 11, 2001 have been responsible for the upsurge of spirituality in the United States in the new millennium.

In the field of psychotherapy, spirituality is also becoming more prominent and Karasu (1999, p.144) argues that because modern psychotherapy has neglected a person’s soul and cut off spiritual connectedness, it is vitally important to develop a
“spiritual psychotherapy”. In similar vein Miller (2002) calls for spirituality and religious perspectives to be included in the training of psychotherapists.

Similarly, there has been renewed interest in the discipline of industrial psychology on wellness in the workplace. Seaward (1995), for example, suggests that employees in America are yearning for something that transcends the traditional work site health promotion programs which are dominated by physical and medical themes. In South Africa, there has been renewed interest in Christian spirituality since 1994 (Kourie & Kretzschmar, 2000).

It is clear that spirituality is now an appropriate theme in the field of psychology, and merits urgent research, because of its complex nature and because of its close relationship to human experience. In this section, an attempt will be made to highlight the most prominent themes, or “voices” in the field.

**The meaning of spirituality from different perspectives**

The postmodern ontological framework suggests that the meaning people ascribe to their experiences is important. It also suggests that there is no one infallible truth, but many truths, depending on perspectives. Applied to spirituality, this approach would suggest that the meaning of spirituality from different perspectives needs to be discussed

**Christian Perspectives**

For years, spirituality, in Christian circles, was associated with an ascetic lifestyle of withdrawal expressed in the phenomena of hermits and monastic communities (Kourie, 2000). The second half of the twentieth century, however, saw a decline in this interpretation, and efforts being made to interpret spirituality in a more contemporary context (Grenz, 2003).

Since then, Christian spirituality has become a vast field, difficult to summarise in a few paragraphs. Some of the dominant ascriptions of meaning, however, are as follows:
• A very broad definition: Swinton (2001) provides perhaps the broadest definition, anchoring his idea in postmodern thinking. He suggests that Christian spirituality is just one of the many ways people try to express the deep, inner yearnings of the human spirit, and will differ from person to person. He does concede that, for most Christians, this would involve some sort of connectedness to a transcendent being.

• Emphasis on the transcendent: some Christian writers believe that Christian spirituality necessarily involves a relationship with the transcendent (Berkhof, 1979). More recently, Hughes and Lowis (1995) in an article on music and spirituality, suggest that spirituality involves a relationship with a higher power, as does Hudson (2005) in his discussion of the principles of Alcoholics Anonymous.

• More specific: others are more specific, relating spirituality to God or Christ (Foster, 1992; Grenz, 2003; Hudson, 1995, 2001; Kelsey, 1980;). Hudson (1995, p15) for example, states: “Spirituality is being intentional about the development of those convictions, attitudes and actions through which the Christ-following life is shaped and given personal expression within our everyday lives.”

African Perspectives
Any South African study on spirituality needs to take into account African perspectives, simply because our context is African, and, secondly, because Africans tend to have a world view that is more spiritual than western perspectives. The African view of the person, for instance, is a holistic and anthropocentric world view, implying unity with God, others and nature (Pato, 2000; Viljoen, 2003c).

In African spirituality, the universe is divided into three sections. The division in which God is encountered is the macrocosmos, which becomes apparent in the religious existence that is part and parcel of the ordinary life of the traditional African (Viljoen, 2003c). In this sphere, God is transcendent, with the ancestors acting as mediators between human beings and God (Viljoen, 2003c). The ancestors are more prominent than God in the everyday life of traditional Africans. The spirits of the ancestors remain near their graves, exercising a benign influence on their
descendants, provided they are not forgotten. At regular intervals, therefore, animals are ritually slaughtered in a ceremony in which ancestors are called upon to bless their descendants (Knappert, 1990). The ancestors are a kind of collective unconsciousness, including mythical beings like river spirits, to whom the living are responsible for proper conduct (Beuster, 1997). God is detached from the universe, not concerning himself directly with the affairs of humankind. As is the case with some modern Christian writers on spirituality (Merton, 1976), in African spirituality there is no dichotomy between the sacred and the secular: all of life is religious. (Pato, 2000).

African spirituality is also concerned with community: humanness is derived from participation in the beliefs, ceremonies, rituals and festivals of the community (Beuster, 1997; Viljoen, 2003c). The mesocosmos is a kind of middle ground where coincidence, ancestors, evil spirits and sorcerers are dominant. This dimension is set in a world of individual and collective imagination, including ancestors, animals, humans, forests, bushes, trees and rivers. All conflicts, as well as illness, both physical, and mental, as well events such as death and tragedy, are placed in the context of this dimension (Beuster, 1997; Viljoen, 2003c). The mesocosmos is reminiscent of the notion of the cosmos as a battlefield between good and evil, although a bit more complex, with dialectical features. This world view, according to Viljoen (2003c) may contribute to an external locus of control among traditional Africans, because the microcosmos stresses that the individual is in the context of a collective existence that is influenced by the macrocosmos and the mesocosmos.

African spirituality emphasises strongly the importance of right relationships. Personal ambition and the interests of the individual are secondary to the welfare of the family and the community. Linked to this is the importance given to sharing and generosity; competition is not a part of African spirituality, and neither is a spirit of hoarding or acquisitiveness (Pato, 2000). Rites of passage are similarly a part of African spirituality, especially circumcision, marriage and burial. Respect for others, especially one’s elders, is an integral part of African spirituality. So strong is the communal aspect of African spirituality that the very existence of a private faith or spiritually is questionable (Oosthuizen, 1995; Pato, 2000).
Complicating the meaning of African spirituality in an African context is that many Africans live with two kinds of spirituality, one western and one traditional, in a time of transition (Oosthuizen, 1995; Pato, 2000; Viljoen, 2003c). For example, most Africans have two wedding ceremonies, one in a Christian church, and one in a traditional context.

**Eastern Perspectives**

In recent years, western psychology has been increasingly open to ideas from the East including the spiritual ideas from these fields. Some western psychologists have been so open to these ideas, that they form a bridge between west and east. James Hillman is perhaps the most prominent of these. He incorporates ideas from eastern and African spirituality in his view that a soulful life, or true humanness, derives from interaction with one’s fellow human beings (Hillman, 1972; Viljoen, 2003b). He never actually uses the word spirituality, which he believed was the concern of theologians. Hillman’s views can nevertheless be seen to define spirituality because of his emphasis on spiritual concepts such as soul, wisdom, poetic thinking, finding meaning and purpose, love, death, the interconnectedness of humankind, and our ultimate destination (Viljoen, 2003b). Central to Hillman’s theory is his concept of soul, which embraces in its meaning the mysteries of human life, thus linking psychology to themes such as spirituality.

As Hillman perceived, any psychological study dealing with soul and spirituality needs to take eastern perspectives into account, because eastern psychology comes from a background of religion and metaphysics, and emphasizes spiritual themes such as the knowledge and liberation of the soul (Viljoen, 2003b). The field of eastern spirituality is a vast and complex one, but, put simply, eastern spirituality stresses the potential transcendence of the individual self, through identification with ultimate reality, which is usually the dynamic, perpetually moving cosmos (Atwood & Maltin, 1991; Viljoen, 2003b). In addition, eastern spirituality is concerned with the connectedness of persons to fellow human beings, society, nature and the cosmos (Bankart, 2003) In contrast to western psychology, where the idea of the individual self dominates, eastern psychology, drawing from its spiritual roots, posits a
contextualized self, a familial self, (stressing personal relationships) and a spiritual self, demonstrating itself in a relationship with the transcendent (Roland, 1988; Viljoen, 2003b). Eastern spirituality can therefore perhaps best be defined as a person finding meaning, or harmony, through the transcendence of the self, as in Hinduism, or through the abnegation of the self, as in Buddhism, and also finding meaning in recognizing the self’s connectedness to others (Bankart, 2003; Misra, Suvasini & Srivastava, 2000; Viljoen, 2003b). The similarities with Frankl, who suggests that meaning can be discovered by transcendence of the self through a task, a goal, or a loving action (Frankl, 1959) and with ecosystemic thinking, which regards the universe as interconnected, can clearly be discerned. The resemblance to the basic commandments of Christianity to love God and neighbour seems also apparent.

In order to give this definition of eastern spirituality more depth, a brief summary of Vedanta (representing Hinduism) and Buddhism follow. In Vedanta, Brahman is the equivalent of God in western theology (Viljoen, 2003b). Brahman can be known in two ways. The first consists of a transcognitive state of consciousness in which the transcendent, formless and featureless Brahman is experienced. The second is through the ordinary senses and consciousness through which we experience the world. In addition, Brahman, like the Christian God, has certain attributes, including Being, Consciousness and Bliss. The latter is the joyful state to which the spiritual must strive, although the cares of this world prevent most people from reaching Bliss (Viljoen, 2003b). Bliss can in fact only be discovered when the real self is attained in a transcognitive state (Paranjpe, 1984; Viljoen, 2003b). Vedanta teaches that the personality has two dimensions, the real self (or Atman) and the temporary, changing self, or jiva. The real self can only be reached by vedantic methods of self realisation, such as meditation.

Another important aspect of Vedantic Hinduism is the principle of karma, which teaches that all things, animate and inanimate, are subject to the moral principle of just rewards for actions (Misra et al., 2000). In this regard it is similar to the Christian principle of “reaping what you sow”. Karma is applied also to the doctrine of
incarnation, and, sadly, is used to justify the subjugating caste system in India (Viljoen, 2003b).

Buddhism has its origins in the philosophical, religious and psychological insights of Gautama the Buddha (563-483 B.C.) The chief purpose of Buddhism is to find an answer to the mystery of human suffering, which can be found in a state of total self-denial, a state of nirvana where the being is “empty”, i.e., free from all influences of the ego (Khong, 2003; Viljoen, 2003b).

It is difficult to summarize contemporary Buddhism, as there are many varieties such as Theravada Buddhism, Mahayana Buddhism, Vajrayana Buddhism, Lamaism and Zen Buddhism (Metz, 1984). Broadly speaking, however, the following elements are common to Buddhist spirituality (Drummond, 1984):

- **Karma**: The law of karma is relevant in both moral and physical dimensions of life. It is the same principle of rewards for actions found in Hinduism, which reminds us that Buddhism grew out of Hinduism.
- **Reincarnation**: Through reincarnation all human beings encounter rewards or punishments for their actions.
- **Liberation from the human condition**: By striving to obey this principle it is possible to begin a new process in life, and to build up ‘good karma’.
- **This liberation centres around belief in the four noble truths of Buddhism (the universal experience of suffering, the need for less material values, the possibility of transformation, and commitment to the eightfold path of obedience).**
- **The goal of life is nirvana**, which is not an annihilation of self, but a transformed mode of human consciousness. Dhama is the way to nirvana, a dynamic principle that gives inner power and quality to life.

**Islamic Perspectives**

It is very important to consider Islamic perspectives. Apart from the fact that Islam is now a major player in world politics (Armstrong, 2000) it is the second fastest growing religion in South Africa, second only to the African Independent Churches (de Gruchy, 2004).
Islamic spirituality is perhaps best summed up in the meaning of the word ‘islam’: the willing and active recognition of and submission to the command of the one Allah (Waines, 2001, p. 3). Kerr (1984) points out that there is no actual word in Islam for spirituality, which is too “inward” a term; Islam teaches that external acts of worship and internal intentions should be held in tension. According to Altares (1996) Muslims strive for God-consciousness in all spheres of life: behaviour, worship and business.

Waines (2001) and Jaoudi (1993) stress that Islamic spirituality centres around the five pillars of Islam:

- A commitment to obey God and follow the prophet Mohammed.
- A commitment to observe salat, the liturgical form of communal prayer, that all Muslims must observe at fixed hours.
- The observance of the zakat, i.e., giving to those less fortunate than oneself. The inward attitude of the giver is all important. The zakat is a mercy to the giver as much as the recipient.
- The fourth pillar of Islam is fasting (saum), prescribed during the month of Ramadaan, the ninth month of the Islamic calendar. During the hours from sunrise to sunset, those adults whose health permits are required to abstain from food, drink and sexual relations (Waines, 2001).
- The fifth of the fundamental duties of Islamic spirituality is the Hajj, or pilgrimage to Mecca and its vicinity, to be fulfilled once in a lifetime if possible.

**Frankl's view**

Within Western psychology, Viktor Frankl can be considered the father of spirituality (Shantall, 2003). He was the first to coin the specific term “spirituality” as a vital dimension of human functioning (Shantall, 2003, p. 434). Frankl defined spirituality in the context of the development of his theory of logotherapy, in which he distinguished three levels of functioning: the physical, the psychological and the spiritual (Frankl, 1969; Shantall, 2003). On the physical dimension, human beings resemble complex machines (Frankl, 1969). On the psychological dimension, people resemble animals, with needs and drives (Frankl, 1969). However, Frankl contended
that people are more than the sum of their parts, and when seen holistically, they have a spiritual dimension (Frankl, 1969). In “The Doctor and the Soul”, for example, Frankl defines logotherapy as a psychotherapy which not only recognizes man’s spirit, but actually starts from it. In this connection logos is intended to signify “the spiritual” and, beyond that, “the meaning” (Frankl, 1965, p. xi).

This spiritual dimension, for Frankl, is related to the “will to meaning”, which is the primary driving force in the life of a human being (Frankl, 1959, p.121). Frankl differentiated this will to meaning from Freud’s notion of a will to pleasure and Adler’s will to power (Shantall, 2003). By a “will to meaning” Frankl meant that people have an existential desire for a life that is as meaningful as possible. When this desire is thwarted, existential frustration arises, leading to what Frankl called noogenic neuroses, arising from spiritual emptiness (Frankl, 1959).

It can be seen that Frankl’s view of spirituality is firmly rooted in his philosophical framework of existentialism. He contends, for example, that human beings have lost the security of instinctual decision making (which was a feature of our animal past) as well as the security of our tried and trusted traditions, thus losing the sense of meaning that went with those (Frankl, 1959; Graber, 2005). In order to find meaning in life, therefore, human beings are thrown back on their spirituality, which Frankl describes as our personal responsibility, and the consequent freedom to choose (Frankl, 1959; Giovinco, 2005; Hutchinson & Chapman, 2005). Without the resolution of this existential crisis, neuroses arise, manifesting themselves in the mental illnesses of the twentieth century: boredom, the will to power (making money) or the will to pleasure (sexual hedonism) (Frankl, 1959). For Frankl, spirituality equates to the will to meaning, which in turn implies that people exercise their freedom to choose as meaningful an alternative as possible. As Frankl (1959, p.153) expressed it in Man’s Search for Meaning:

A human being is a finite thing, and his freedom is restricted. It is not freedom from conditions, but it is freedom to take a stand against the conditions

In the light of the definition of Christian spirituality outlined earlier, the question inevitably arises: did Frankl also believe that spirituality implies a relationship with a
transcendent other? Certainly for the religious person, Frankl (1965, p.xv) advocates a relationship with a transcendent God:

_The religious man differs from the irreligious man only by experiencing his existence not simply as a task, but as a mission. This means that he is also aware of a taskmaster, the source of his mission. For thousands of years that source has been called God._

On the other hand, Frankl believed that spirituality is possible for every person, even those who, paradoxically, denied the existence of God. In this way, his definition of spirituality is very flexible. He believed that people must be given the freedom to decide for themselves how to find meaning, “whether along the lines of religious or agnostic convictions” (Frankl, 1959, p. 132). His definition of spirituality is also very broad; he contends that spirituality manifests itself in countless unique ways, differing from person to person:

…”the meaning of life differs from man to man, from day to day, and from hour to hour. What matters therefore, is not the meaning of life in general, but rather the specific meaning of a person’s given life at a given moment (Frankl, 1959, p. 131).

In this multi perspective approach, Frankl can also be seen as a precursor of postmodernism. Spirituality, for him, was what brought meaning to a person’s life, and that clearly differed from person to person.

**Jung’s View**

Jung, in the context of western psychology, is perhaps, besides Frankl, the most influential therapist regarding spirituality and psychology. Whereas Freud viewed the instincts as the source of human problems, Jung found that his patients came to him more often with spiritual problems (Jung, 1933c). Like Frankl, Jung therefore gave much attention to spirituality as a psychological phenomenon.

Jung found the Freudian paradigm of repressed material in the unconscious helpful in the early stages of therapy, but when these presenting problems had been transcended, existential questions concerning guilt, new life and salvation came to
prominence (Bertine, 1967). Jung also came to reject Freud’s mechanistic views and what he saw as a preoccupation with human sexuality, and criticized Freud for not giving enough attention to religion, and specifically to the collective unconsciousness (Smith, 1990; Viljoen, 2003a).

Jung’s definition of spirituality is so complex that it needs to be placed within the context of his theory as a whole. Central to Jung’s view of the psyche is that it is essentially dialectical, in a dynamic process, struggling to evolve from the unconscious to a higher state through the creative resolution of opposing tendencies, a resolution which in turn sets up another dialectical process, in a constant and lifelong quest for wholeness (Clarke, 1992; Smith, 1990; Viljoen, 2003a). The psyche, which refers to the totality of all unconscious psychic processes, has the “self” as an important component (Jung, 1971; Viljoen, 2003a). The self functions as an archetype, which is a common symbol transmitted by the unconscious through centuries of human development (Jung, 1953).

Within this paradigm, Jung theorized that spirituality was an important, organic part of the human psyche (Bertine, 1967; Jung, 1955). It is located in the unconscious, and reveals itself in a person’s dreams (Jung, 1955). One of its functions is to impel the self towards psychic growth and to maintain psychic balance (Jung, 1933a; Viljoen, 2003a). Jung disagreed with Freud and science on this issue, contending that the religious symbols of the psyche were not gibberish, but important symbolic messages from the unconscious and therefore to be treated with the utmost seriousness (Bertine, 1967; Jung, 1933b). In this way, he paved the way for spirituality to be accepted as an appropriate subject for psychological investigation. However, Jung’s definition of spirituality is far from conventional. Unlike Christian writers, and Frankl (in certain circumstances) he did not postulate a transcendent God at all in his view on spirituality (Jung, 1933b). He believed that the existence of a metaphysical entity “out there” did not fall within the parameters of psychology. Nevertheless, he did accept that the self is capable of spirituality, and could be described as the “God within us” (Jung, 1953, p. 236; Viljoen, 2003a). This inner spirituality contains a dialectic principle: a wonderful propensity for spiritual growth, as well as potential for evil. For Jung, traditional Christianity had projected these
values of the unconscious onto an omnipotent gracious God and an evil devil. Jung (1933c) believed that true spirituality was expressed when these two were owned and integrated into the person’s conscious. This process, which Jung called the individuation of the self is the equivalent of becoming the ideal human being, or “finding God” (Smith, 1990, p.78).

Curiously, although Jung does not discuss the possibility of a transcendent God, he does seem to accept the existence of an afterlife, with the deceased surrounding us in the biblical idea of a cloud of witnesses, and contributing to the collective unconsciousness, which represents the accumulated psychic wish of the ages (Jung, 1933c).

Like Frankl, Jung's theory of spirituality takes seriously the problem of humankind’s sense of existential meaninglessness, which he believes is first and foremost a psychic problem. This underlying cause of meaninglessness is psychic fragmentation, which occurs when the individual is cut off from the unconscious and its archetypal images (Jung, 1933b). Since the problem is a psychic one, the cure is also a psychic one: through the awakening of the unconscious, a renewal of life can begin, and meaning and purpose can be found. It would be true to say that this potential awakening, is, for Jung, a definition of spirituality (Jung, 1933b; Smith, 1990).

In summary, individuation of the self, in Jung's theory, is the beginning of spirituality, which, in turn, is the ultimate goal of human life, and the source of ultimate meaning.

**Scott Peck's view**

In this discussion of the meaning of spirituality in western psychology, mention must be made of Scott Peck. One of the literary phenomena of the twentieth century took place when Scott Peck, a psychiatrist, wrote a book about psychotherapy that took seriously the spirituality of human beings. The book turned out to be one of the biggest sellers of the century. Some scholars may criticize the inclusion of Peck in this study on the grounds that he wrote for a popular market, and cannot be considered on the same level as intellectual giants like Frankl and Jung. While
acknowledging the truth of this assertion, it could also be argued that the importance of Peck lies precisely in the fact that he wrote for the popular market, thus legitimizing in the minds of ordinary people (among whom this qualitative study will take place) the link between psychology and spirituality. Most of the participants in this study, who view themselves as spiritual and have journeyed with depression, may never have heard of Frankl and Jung, but will probably recognize the name of Scott Peck.

Peck (1978) maintains that everyone has a spirituality of sorts (often confused with religion). This spirituality is linked to the ideas and beliefs, either implicit or explicit, that people hold about the nature of reality. This set of beliefs, or world view, is often at the root of people’s psychological problems. Mostly a person’s spirituality, which Peck (1978, p. 2) uses synonymously with world view is unconscious, or incompletely conscious, and is passed on to us by our parents:

Our first…notion of God’s nature is a simple extrapolation of our parents’ natures…if we have loving, forgiving parents, we are likely to believe in a loving and forgiving God…If our parents were harsh and punitive, we are likely to mature with a concept of a harsh, punitive monster-god. And if they failed to care for us, we will likely envision the universe as similarly uncaring.

Peck believes that this faulty spirituality needs to be modified. Such a process is accomplished by psychotherapy, in which the client’s understanding is constantly enlarged to include new knowledge of the wider world (Peck, 1978). True spirituality is a journey out of the microcosm into a macrocosm. In its earlier stage it is a journey “of knowledge, not of faith” (Peck, 1978, p.207). In a memorable phrase Peck states: “The path to holiness lies through questioning everything” (Peck, 1978, p. 207).

It can be seen that Peck, in his definition of spirituality, has rather skillfully integrated aspects of Frankl (a value system) Jung (the unconscious) and Christian spirituality (God as an external other). To these he adds his own idea of spirituality as a questioning attitude which grows in new knowledge and understanding.
Spirituality as an expression of the unconscious

Spirituality as an expression of the unconscious psyche is also a prominent theme in the literature. It is important to discuss it firstly because it is becoming more and more prominent in Christian spirituality. Hudson (1995, 2001) recommends that a pursuit of true spirituality will bring the “shadow selves” of the unconscious to God for transformation, and also that the recording and analysis of dreams should be practised, since God may be speaking to the individual via this method. Moreover, one of the recent suggestions on psychology and spirituality has been that the study of spirituality should move from attempts to define the “constructs” of spirituality to a view that equates the unconsciousness as an expression of spirituality (Fahlberg & Fahlberg, 1991). The following section will refer briefly to the main perspectives.

Jung's perspective

According to Jung, the modern era was characterized by the loss of the metaphysical certainty which had sustained past generations, a loss that was replaced by a search for a new spirituality that showed itself in a fresh interest in the unconscious (Jung, 1933b). Such spirituality is discovered by acknowledging the darkness of the unconscious, bringing its reality into the light, and striving to integrate the contradictions into our conscious living (Jung, 1933b). The archetypes in the unconscious serve as spiritual guides for the personality. The religious minded would call this guidance from God (Jung, 1933c).

Frank's perspective

Frankl (1978) also relates spirituality to the unconscious. In a sense, Frankl replaces Freud’s concept of the id with unconscious spirituality. Unconscious religiousness, or spirituality, is defined as humankind’s inherent and potential relationship to transcendence: “Man has always stood in an intentional relation to transcendence, even if only on an unconscious level” (Frankl, 1978, pp. 60 - 61). Frankl (1978) coins the phrase “the unconscious God” in order to describe this phenomenon (Frankl, 1978, p.62). This notion of the unconscious God must not be misinterpreted. It is not pantheistic, it is not occultic, nor omniscient, neither is it impersonal (Frankl, 1978). Instead, humankind’s unconscious relation to God is profoundly personal (Frankl, 1978). In this way, Frankl differentiates his view of man’s religiousness from that of
Jung. For Jung, religiousness was something instinctual; for Frankl, religiousness is something spiritual and existential, stemming from the personal core of the individual rather than from an impersonal collection of images shared by people (Frankl, 1978).

Frankl’s genius is to replace Freud’s therapeutic concept of uncovering the unconscious id with that of logotherapy: uncovering the patient’s unconscious spirituality. What is repressed, in Frankl’s thinking, is humankind’s capacity for spirituality and it is the task of the logotherapist to unlock this dimension of the person. This repressed transcendence is at the heart of neurosis, because although concealed in the transcendent unconscious, repressed transcendence makes itself apparent as “an unrest of the heart” (Frankl, 1978, p.66).

Scott Peck
Jung’s views of spirituality and the unconscious have been popularised by Scott Peck (1978). Peck describes Jung’s view of the collective unconsciousness, equates this to God, contrasts it to personal consciousness, and then argues that the personal unconsciousness is the struggle between these two realms, i.e., collective unconsciousness versus personal consciousness. Mental illness occurs when this “conscious will of the individual” deviates substantially from the will of God, which is the individual’s own unconscious will (Peck, 1978). The aim of the journey to spirituality is to develop a conscious ego that is more in tune with the unconscious, which for Peck, is finding the will of God. The similarities to Jung are obvious.

James Hillman
Jung’s influence can also be found in the work of Hillman, who uses Jung’s views on the unconscious as the basis for his own views, but then transcended them by viewing human behaviour not only in the light of archetypes, but also in the light of myths and gods (Hillman, 1996). People should get in touch with their unconscious by opening themselves to fantasy and imagination (Viljoen, 2003b). In this way, a soulful existence is possible (Hillman, 1972).
Other Perspectives
The unconscious is not an important element in Eastern spirituality. According to the Vedantic approach, the individual may be in one of four states of consciousness: wakefulness, dreaming, deep sleep or a trance state (Viljoen, 2003b). Truly spiritual people attain the trance-like state only by rigorous meditation. This fourth state is described as a conscious state, but it is in fact beyond consciousness, where the ego is swallowed up in the blissful contemplation of Brahm an. Yet one cannot really describe this state as unconscious, in the Jungian sense. It is rather a form of ecstasy, or intense mysticism (Flood, 1996).

Similarly, in Buddhism and Islam, the unconscious does not play a major role. Buddhism envisages a constant stream of states of consciousness that are constantly in motion, and which change continuously (Khong, 2003). Islam focusses very much on outward observance of religion, with an inward component, but which cannot be said to be related to unconscious (Waines, 2001).

The unconscious may be an avenue of study in African spirituality, where dreams and visions are seen as messages from the spiritual world, especially in the Africa Initiated Churches (Tshelane, 2000).

Spiritual growth

Spiritual growth as transcendence
Much of the material on spirituality in the literature includes suggestions for spiritual growth. Viktor Frankl, Christian writers on spirituality, and Eastern and African perspectives emphasize spiritual growth as a form of self transcendence. Frankl, for example, believes there is a reality “other” than oneself, his definition of this “other” is wider than God, although it could include belief and relationship with a transcendent God. He states:

…being human always points, and is directed to, something, or someone, other than oneself - be it a meaning to fulfil or another human being to encounter.
(Frankl, 1959, p.133).
This self-transcendence can be discovered in three possible ways: firstly, by creating a work or doing a deed, secondly, by experiencing something or encountering someone, and thirdly, by the attitude we take to unavoidable suffering (Frankl, 1978).

In these three points Frankl is close to modern writers on Christian spirituality who suggest that spiritual growth should issue outwardly in good works, that at the heart of spirituality is an encounter with God, and that suffering takes on new meaning in Christ (Foster, 1992; Hudson, 1995).

Eastern perspectives also resemble Frankl’s emphasis on growth through suffering. Vedantic Hinduism, for example, welcomes suffering as an aid to spiritual growth (Flood, 1996; Viljoen, 2003b), and Buddhism stresses the importance of finding meaning in and through suffering (Bankart, 2003; Ikeda, 1976; Ross, 1981). African perspectives, like Frankl, see spiritual growth as linked to increasing connectedness to others (Pato, 1997, 2000; Viljoen, 2003c).

**Growth toward a long term goal**

Sometimes finding meaning can result in an inner tension between one’s present context and the meaning that lies in the future. According to Frankl, such goal directedness gives meaning to life (Frankl, 1959). It can be safely assumed that Frankl believed goal directedness to be part of true spirituality. In this regard he echoes the exhortation of St Paul. “I run straight towards the goal in order to win the prize, which is God’s call through Jesus Christ to the life above” (Philippians 4:14). Striving to be like Christ and becoming aware of the motivating power of Heaven are likewise part of modern Christian spirituality (Berkhof, 1979; Grenz, 2003; Hudson, 1998; Robertson, 1986)  Hinduism is also goal directed, in that it teaches development towards a blissful state, although its doctrine of reincarnation imparts a gentle, cyclical nuance to its doctrine of growth (Flood, 1996; Viljoen, 2003b). In Buddhism, a long term goal is the attainment of the ideal state of Arafat, through many experiences of Nirvana (Bankart, 2003; Viljoen, 2003b). Buddhism, however, is also process orientated, with a cyclical pattern (Ikeda, 1976, p. 14):

> Birth and death, phenomena occurring everywhere, are only varying modes of universal life, which is eternal and
coexistent with the whole universe. The individual cannot be said to exist in any specific place after death. It is, however, part of universal, essential life and is awaiting remanifestation in the world of actuality.

African spirituality likewise cannot be said to be goal directed, believing in a lengthy past, a present, and virtually no future (Pato, 2000; Viljoen, 2003c).

For Jung, spirituality also has a future goal dimension. He believed, for example, that the symbols of the unconscious possessed teleological significance, representing an inner striving towards a goal. If the symbols were interpreted correctly, the message would impact meaning and purpose to a person’s life (Bertine, 1967; Jung, 1933b). Spiritual growth, for Jung (1933b) was to allow the archetypal symbols to launch one on a unique journey of integrated wholeness rather than towards moral perfection, as in Christian and Eastern perspectives. Moreover, for Jung, psychotherapy is the catalyst for this journey of spiritual growth. According to Jung, spiritual maturity is to become as conscious as possible, with the minimum of unconsciousness (Jung, 1933b; Smith, 1990).

Peck also equates spirituality to a journey, with a destination. Peck contends that by commitment to knowledge, it is possible to find a spiritual journey that leads first out of superstition towards agnosticism and then transcends agnosticism to discover an accurate knowledge of God. Such a journey is a difficult process, and faces the impediment of laziness, which for Peck is “original sin”. He interprets the Adam and Eve myth as humankind’s attempt to avoid the hard work of getting God’s side of the story, the hard work of listening to conscience, the God within us (Peck, 1978, p.293). Instead humankind takes short cuts and attempts to find knowledge not worked for (Peck, 1978). For Peck the process of psychotherapy is to assist the person to overcome this lazy part of human nature, and to co-operate with the ‘healthy’ side of human nature that prompts us toward growth (Peck, 1978, p.295).

All people are capable of commencing this journey of spiritual growth, which Peck also calls a response to ‘grace’. Why some do and some do not is a mystery. For Peck, psychotherapy is an indispensable ingredient of spiritual growth.
Stages of spiritual growth and their facilitation by spiritual disciplines

Stages of spiritual growth, and the disciplines associated with these are important, not only because they are an important theme in the literature on spirituality, but also because they provide a field where the various perspectives on spirituality have some common ground. For example, the disciplines of prayer and fasting are common to, *inter alia*, Christianity, Hinduism, Buddhism and Islam.

Some of the theorists on spirituality refer to stages of spiritual growth; others imply that spirituality is a kind of evolutionary process. Among the former is Scott Peck. In this regard, his theory on the four stages of spiritual growth removes him from the ranks of popular psychologists, and places him in the category of an original theorist, with something new to contribute to the fields of psychology and spirituality.

Peck states that there are four stages to spiritual growth (Peck, 1993). The first stage comprises a chaotic/antisocial phase, a stage of absent spirituality, characterized by unprincipled and self-serving behaviour (Peck, 1993). Sometimes people connect with this “chaotic” facet of their existence. If so, three possibilities are latent: suicide, or stoic endurance, or progression to stage two, the formal/institutional phase of spiritual growth, characterized by dependence on institutionalised religion to govern thinking and behaviour, and an attachment to the outward forms of worship. People in this phase conceive of God as an ‘external’ being (Peck, 1993, p.123). They have little understanding of the immanence of God, that is, that part of God which lives inside them (Peck, 1993, p.123). They generally have a picture of God as masculine, and while they believe in God’s love, they also believe in God’s propensity to punish those who step out of line. In Peck’s delightful phrase: “...it is a vision of God as a giant, benevolent cop in the sky” (Peck, 1993, p.123).

What Peck in fact seems to do is to adapt Kohlberg’s moral development model to spirituality. For example, Peck’s first stage, comprising a chaotic/antisocial phase, devoid of spirituality and characterised by unprincipled and self-serving behaviour, has affinities with Kohlberg’s preconventional moral level, in particular the “naïve
instrument orientation”, in which the individual’s needs are paramount (Murray-Thomas, 1996). The second stage, as outlined above, seems to be similar to Kohlberg’s conventional moral level, in which a person does the right thing either to earn the approval of others, or to observe ‘law and order’ for its own sake (Murray-Thomas, 1996).

Peck’s third stage of spiritual growth is described as a sceptical phase (Peck, 1993). People become disillusioned with institutional and outward forms of religion. They tend, as a result, to drop out of church, and may even call themselves atheists or agnostics. Nevertheless, according to Peck (1993) they are further along the road to true spirituality than those in phase two. These individuals, for example, are not antisocial. On the contrary, they are often deeply involved in society, are often loving parents, and are usually open-minded seekers after truth (Peck, 1993).

Often those in stage three, in their search for spiritual reality, move on to stage four, which Peck calls the mystical/communal phase (Peck, 1993) and which corresponds with Kohlberg’s postconventional level, especially stage 6, the universal ethical principle orientation, in which a person’s moral decisions are based on the universal principle of justice and on respect for the dignity of persons (Murray-Thomas, 1996; Muuss, 1996). In this stage of spirituality, people sense the interconnectedness of all things (including connectedness to the afterlife), become committed to unity and community in a common humanity, and are characterised by an awareness of paradox and mystery. They are comfortable with the complexity of existence, uneasy with cut and dried, simplistic solutions and are not afraid of saying: “I just don’t know” (Peck, 1993, pp. 69 - 70).

Peck (1993) stresses that his four stages are not cast in stone and that people can get stuck in a certain stage. They can manifest all four stages in their personality at the same time. They can regress to previous stages, and having reached stage four, they need humility: stage four is just the beginning of the spiritual journey (Peck, 1993).

Foster (1978) maintains that affluence and materialism have strangled true spirituality, especially in the Western world. The thirst of people for spiritual reality has not been met by the institutional church, with the result that many are turning to cults, eastern mysticism and the occult to satisfy this hunger. The real need today is for “deep people”, who acknowledge their spirituality and have the courage to explore it. One of the reasons for this is that people lack the skills. For while the “inner transformation” Foster speaks of is unattainable by self-effort, a judicious implementation of the classical spiritual disciplines opens the door to God’s transforming “inward grace” (Foster, 1978, p.5). Foster’s book outlines the following spiritual disciplines which he believes will enhance spirituality (Foster, 1978):

- **Meditation:** For Foster (1978) Christian meditation is similar to Eastern meditation in that it should include detachment from the world. However, it should go on to incorporate attachment to God and other people. Of interest is that meditation is now a technique used in wellness in the workplace programs, evidence of the growing importance of spirituality in different contexts (Bensley, 1991; Seaward, 1995).

- **Prayer:** For Foster, prayer is the means by which we change and become more Christ-like. Real prayer is something that involves lifelong learning. It is best learnt by beginning, and persevering (Foster, 1978). Prayer is a discipline common to all the religions in this study: Christianity, Hinduism, Islam and African spirituality. The commonalities in the practice may be an avenue of further research.

- **Fasting** is likewise a discipline that transcends religious barriers, and might repay further study. For Foster, fasting refers to the abstention from food (and sometimes water) for spiritual purposes. According to Foster (1978, p53): “Fasting can bring breakthroughs in the spiritual realm that could never be had in any other way”.

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The discipline of study is a means of transformation that begins cognitively, that is, what we think influences our feelings, attitudes and behaviour. In this regard he sounds remarkably similar to cognitive behavioural theorists (Corey, 1996; Hawton et al., 1989).

The fifth spiritual discipline is that of simplicity, which must begin in the inward recesses of the personality, and then work itself out in an simple lifestyle (Foster, 1978).

Solitude is distinguished from loneliness, but instead focuses on an inner solitude and silence that leads to a healthy balance between being with people and being alone (Foster, 1978).

Submission is the seventh guideline for spiritual growth. It involves the ability not to always get your own way, surrendering our rights where appropriate. Aware of possible criticism from feminists and human rights groups, Foster stresses that submission, if it is destructive, is not true to the ideal (Foster, 1978).

Linked to submission is the discipline of “service” (Foster, 1978, p110). People need to freely choose to be servants, which begins in an inward attitude of servanthood, often expressed in small acts of kindness.

Confession. By this Foster (1978) means confession to God, confession to others, and also the ability to forgive, which is a quality emphasized by other writers on spirituality such as Peck (1978) and Frankl (1959). Forgiveness, in recent years, has been suggested as an important factor in a healthy lifestyle, which forms another focal point where spirituality can contribute to other disciplines (Worthington, Berry & Parrott, 2001).

Worship is a uniquely religious and communal avenue to spirituality, and a way in which spirituality can be channelled into the renewal of institutional structures (Foster, 1978).

Celebration, which Foster links with an inward joy in the midst of suffering, which is enriched by corporate and familial expression, and which is linked to a sense of humour (Foster, 1978).

Foster’s thesis, that inner spirituality can be grown by the observance of outward disciplines, is echoed in many of the other perspectives mentioned in this study. For
example, in Hinduism, the Vedantic method of spiritual growth requires a preparation phase in which two disciplines have to be mastered: a recognition of the difference between the permanent spiritual values and transient values, as well as the ability to cultivate inner peace and tranquillity. After this, a journey to self-realisation needs to be embarked upon, utilising the following four disciplines (Bankart, 2003; McGee, 1996; Viljoen, 2003b):

- A careful reciting of and listening to the Vedantic texts, especially the Baghavad Gita.
- Constant reflection upon, and implementation of these texts.
- Complete absorption in the contemplation of Brahman.
- Enlisting the help of a guru, which is reminiscent of Jung’s and Peck’s stress on a therapist as vital for growth, although a guru is far more autocratic in approach than any Western therapist (Hammer, 1984; Viljoen, 2003b).

There seem, similarly, to be no stages in Buddhism, but rather a journey towards psychological growth that is rather similar to the views of Rogers (1961) and Maslow (Viljoen, 2003b). Humankind has the nature of Buddha within, as a seed, or spark, which needs to be realized in practicality:

*As the son in the parable of the Lotus Sutra was born rich, so mankind innately partakes of the Buddha nature. Man does not become a Buddha by being enlightened to the meaning of the Law, because in the depths of life force itself is the power to become a Buddha if the human being will but recall and realize it.* (Ikeda, 1976, p.17).

Such optimal development is attained by the experience of nirvana on many occasions, through meditation (Bankart, 2003; Ikeda, 1976; Viljoen, 2003b).

The presence of stages in African spirituality is difficult to assess, because as Pato (1997, 2000) rightly emphasizes, African spirituality is still in the process of disengaging itself from the influence of western missionary Christianity, and forming a separate identity and ethos. It can be safely said that African spirituality would stress evolutionary growth into connectedness with others (Pato, 1997, 2000), rather than stages of growth.
Acknowledging spirituality in psychotherapy

Spirituality and psychotherapy is another major theme in the literature. Karasu (1999), Miller (2002) and Swinton (2001), *inter alia*, have called for human spirituality to be taken into account in psychotherapy and counselling. Moreover, since South Africa has numerous spiritualities embraced by the majority of its people, it seems necessary to discuss the possibility of incorporating spirituality into the psychotherapeutic process in a South African context. Another challenge is to achieve this within the postmodern paradigm, which undergirds this study. In this section, I give a few modest suggestions regarding this topic, which I hope will contribute to further discussion.

**Interpretation of spirituality**

Spirituality needs to be interpreted in its widest sense. Frankl is helpful here, when he defines spirituality as that which gives meaning to our existence, i.e., the ultimate values and commitments upon which we base our lives (Frankl, 1959; Kourie, 2000). In this sense, one can be quite irreligious, or even an atheist, but still possess spirituality. If the therapist adopts this broad view, he or she will be less likely to impose his/her own discourses of spirituality upon the therapeutic process.

**Personal spiritual growth**

In order to incorporate spirituality into the therapeutic process, the therapist's task is to give attention to his/her own spiritual growth. It is the author's contention that underlying the therapeutic process are principles of existence: it is not so much what the therapist does, but who he/she is, in interaction with another person, that matters. The spiritual state of the therapist in action is partly expressed in Chopra’s law of least effort, an attitude characterised by few words and little action (Karasu, 1999). The similarities to client-centred therapy are obvious, underlying the need to rediscover the works of Carl Rogers in a postmodern context. Walker (2001), for example, has suggested that postmodern and Rogerian perspectives are supportive of each other. Snyder (2002) has argued that unconditional positive regard enhances the co-creation of meaning in therapy, and advocates that the Rogerian concept of empathy be expanded to include a mutuality of empathy, in which empathy becomes a two-way process. Bott (2002) adds to the debate by
postulating that the postmodern turn in family therapy is in essence a return to humanistic-existentialism in a new guise, incorporating needful aspects relating to the centrality of language. Bott (2002) rightly adds that the Rogerian concept of respect for the person can add an ethicality that is sometimes lacking in postmodern approaches.

A soulful and spiritual existence
Karasu (1999, p146) drawing from eastern perspectives, suggests helpfully that a therapist open to spirituality (what Karasu terms “the spiritual psychotherapist”) needs to develop a soulful and spiritual existence. By soul is meant that part of the self that is involved in the world and that is moved by human suffering, and by “spirit”, he refers to a relationship between the person and the universe. Karasu believes that the soul and the spirit are separate entities from the material and physical world, and that together these form a unity (Karasu, 1999, p146). The task of the spiritual psychotherapist is to awaken his/her own soulfulness and spirituality, in a way that is meaningful for him/her, and then to allow this into the therapeutic process, in the hope that in this reflexive interaction the client’s own soulfulness and spirituality will develop. Karasu’s spiritual psychotherapy may be criticised as being rather vague, yet on closer analysis he is basically suggesting that therapists grow in love and faith (common to all religions), and allow these into the therapeutic journey:

The way to soulfulness is achieved by transformation of the extraordinary to the ordinary - and its only required ingredient is love. Comparably, the way to spirituality is achieved by the transformation of the ordinary to the extraordinary and its only required ingredient is belief (Karasu, 1999, pp.146 - 147).

Having established the importance of the therapist’s own soulful and spiritual growth, the question needs to be asked: how can the therapist begin this journey, in practical ways? The answer is that growth in soulfulness and spirituality will mean different things to different people: for a Christian, it will mean an inner spirituality that is fed by the disciplines outlined by Foster; for the Hindu, it will mean a journey towards union with Brahman; for the Buddhist, growth into spiritual and psychological
maturity through Nirvana; for the African, an incorporation of Western and traditional values in a unique African spirituality; for the non-religious, an attempt to grow in sensitivity to self, to others, to creation and the universe (Eck, 2002; King, Speck & Thomas, 1994); and for others, a combination of the foregoing. Such spiritual growth will begin to be felt in the therapeutic process. Carl Rogers (quoted in Moore, 2003b, p. 387) puts it with inimitable insight, and in a manner, which, by suggesting a mutual transcendence of the relationship, anticipates postmodern thinking:

I find that when I am closest to my inner, intuitive self, when I am somehow in touch with the unknown in me, perhaps I am in a slightly altered state of consciousness, then whatever I do seems to be full of healing ... At those moments it seems that my inner spirit has reached out and touched the inner spirit of the other. Our relationship transcends itself, and has become a part of something larger. Profound growth and healing are present ... I am compelled to believe that I, like many others, have underestimated the importance of this mystical, spiritual dimension.

**Viewing clients as human beings with potential for spiritual growth**

A therapist attempting to incorporate spirituality into his/her therapy will not see the person as a client, but rather as a human being with potential for spiritual growth (Karasu, 1999). In this, the therapist’s attitude would resonate with postmodern principles that the patient is the expert. Dualistic categories need to be rejected in favour of the interconnectedness of all things. In a sense, Rogerianism needs to be rediscovered in a spiritual context. There is no sane-insane, no normal-abnormal – these categories are transcended by a journey of spiritual growth (which, as Frankl, reminds us, is different things to different people). This is particularly important in today’s prevailing climate, where growth tends to be discarded in favour of “brief”, results orientated therapy because of the powerful influence of medical aids (Parker et al., 1995).
Spirituality and training of psychotherapists
Miller (2002) correctly suggests that, if therapists are to incorporate spirituality into the therapeutic process, some exposure to spirituality and religions should be part of the training of psychotherapists.

Spirituality as part of the ecosystem
Ecosystemic thinking has been an important philosophical component of the postmodern movement. According to an ecosystemic approach, a person is viewed as a subsystem within a network of larger systems, such as the family and the wider community (Moore, 2003a). The person likewise consists of subsystems: physiology, emotions and intellect. Although there is not much at present in the literature about spirituality and ecosystemic thinking, it may be helpful in future research to view spirituality from this perspective, namely, as part of the system of the person, as well as part of the larger system such as the societal discourses regarding spirituality and institutional religion. Ecosystemic thinking also provides a framework for connecting the various spiritualities: these are all part of the larger system, but appearing in different forms and expressed in different language. This perspective also fits into the social constructionist-paradigm of the dissertation, because the individual is viewed as part of various connecting social and cultural systems.

Definitions of spirituality in recent quantitative research
According to Plante and Sherman (2001), after a century of research, there are still no widely accepted definitions of spirituality. The quantitative research bears out this difficulty in providing definitions for spirituality. However, it is possible to group the definitions under certain categories, as follows:

- spirituality is defined as “religious beliefs and practices”, involving churchgoing, praying and attending religious meetings (Baetz et al., 2004; Gatz & Fiske, 2003; Larson & Larson, 2003.)
- spirituality is equated to religious beliefs and practices which lead to behavioural change (Pearce, Little & Perez, 2003).
- spirituality is defined in terms of inward harmony and peace (McClain et al., 2003).
spirituality is defined very broadly in existential terms, as something that gives meaning and purpose to life (Ai et al., 2005; Coleman, 2004; Nelson, Rosenfeld, Breitbart & Galietta, 2002; Simoni & Ortiz, 2003).

spirituality is defined in existential terms, but linked to some sort of connection to a higher power (Coleman, 2004; Jones & Benda, 2004). Some theorists articulate more specifically the nature of this higher power as a compassionate, caring God (Simoni & Ortiz, 2003).

spirituality is defined as non-institutional religious beliefs and practices, such as personal meditation (Wink, Dillon & Larson, 2005).

spirituality is defined as an aspect of religiousness, i.e., the inner reality empowering the outward observances of public worship, prayer, and so on (Cole, 2005; Nelson et al., 2002).

spirituality is defined simply as “hope”, i.e., the belief that one has the means or ways to do what is required to realize one’s expectations and that one is able “to sustain movement along those selected pathways” (Ai et al., 2005, p. 256; Van Ness & Larson, 2002).

In quantitative research dealing with eastern perspectives, the following definitions emerge:

spirituality is defined as outward religious practices (Cirakoglu et al., 2003).

spirituality may be expressed by chanting the maha mantra on a regular basis (Wolf & Abell, 2003)

spirituality is a “philosophical doctrine that the ultimate reality of the universe is the nature of soul or spirit” (Anjana & Raju, 2003, p.27).

The many definitions highlight the challenge facing quantitative research in defining spirituality. Since quantitative research stands or falls by a definition of a variable around which there is a degree of consensus, it is the researcher’s opinion that quantitative research is doomed to fail in its efforts to define spirituality, a concept that is ultimately beyond empirical definition. Qualitative research that emphasizes the experience of people with regard to spirituality, seems a more promising way forward. Social constructionism in particular, which stresses the importance of the micro discourses of ordinary people, will allow ordinary people who perceive
themselves as ‘spiritual’ to voice their own definitions of these terms (Liebrucks, 2001).

Components of spirituality in recent quantitative research
Related to the attempt to define spirituality, quantitative research has given attention to the various components which go to make up the construct of spirituality. The following clusters of components are suggested:

- spirituality having three components: church attendance, self identification as religious, interpersonal religious experience (Gatz & Fiske, 2003)
- spirituality consisting of three dimensions: harmony, peace and the extent to which people are strengthened by their religious beliefs (McClain et al., 2003).
- spirituality comprising meditation and a sense of sacred connectedness to God or nature (Ai et al., 2005).
- spirituality consisting of a sense of mastery and self esteem (Simoni & Ortiz, 2003).
- spirituality possessing four ingredients: meaning in life, transcendent purpose, intrinsic values and spiritual community (Hodges, 2002).
- spirituality consisting of a sense of well-being and purpose, plus a sense of integration (Hughes & Peake, 2002).

Complicating the picture further is the fact that, besides these suggested ingredients of spirituality, there are also a host of hypothesized components for religiousness (Bonner et al., 2003; Bosworth, Park, McQuoid, Hays & Steffens, 2003; Larson & Larson, 2003).

The attempt to divide spirituality into various components is driven by the methodology of quantitative research, which needs defined, measurable constructs in order to achieve validity and reliability. The bewildering variety outlined above suggests that such a task is beyond quantitative methodology, and that a qualitative paradigm, such as social constructionism, would be more appropriate into research involving spirituality and depression. Such a paradigm would allow ordinary people to voice their rich and complex experiences of spirituality and depression in social
interaction, in a way that would throw more light onto these important human phenomena, and their mutual influence upon each other.

**Conclusion**

It can be seen that spirituality is a complex and burgeoning field, one that is beginning to spread its influence in various fields, including psychology.
CHAPTER THREE
DEPRESSION: A MULTI-FACETED PHENOMENON

…O God! O God!
How weary, stale, flat, and unprofitable
Seem to me all the uses of this world.
(William Shakespeare, Hamlet, Act 1, Scene 2)

Canst thou not minister to a mind diseas’d,
Pluck from the memory a rooted sorrow,
Raze out the written troubles of the brain,
And with some sweet oblivious antidote
Cleanse the stuff’d bosom of that perilous stuff
Which ways upon the heart?
(William Shakespeare, Macbeth, Act 5, Scene 3)

I never experience a moment of depression, because I know that my cause will triumph.
(Nelson Mandela, source unknown).

Introduction
A review of the literature reinforces the notion that depression is a highly complex phenomenon. This impression is confirmed by Rost and Smith (2001) who draw attention to the way depression impacts upon a person’s life on multiple levels. Depression has been defined generally as an affective condition, sometimes pathological, involving emotions of helplessness and hopelessness which can sometimes become overpowering, and which is often accompanied by a general lowering of psychophysical activity (Rapmund & Moore, 2000). In the field of psychiatry, a loss of response to the pleasures of life is often seen as the distinguishing feature of depression (Reber, 1985). According to the DSM-IV (1994), major depression presents itself by either depressed mood or loss of pleasure response for a period of two weeks or more, accompanied by four or more of the
following symptoms: insomnia, sudden weight loss or weight gain, psychomotor agitation, fatigue, guilt feelings, a loss of self-worth, lack of concentration and suicidal ideation.

However, the very use of the phrase *major depression* in the above paragraph draws attention to the divergent descriptions of depression in the literature. In order to do justice to this complexity, it will be helpful to discuss some of the kinds of depression and related issues mentioned in the literature, highlighting areas of debate. In order to narrow the vast field, this study will confine itself to unipolar depression, as opposed to bipolar mood disorder, in which the patient experiences swings of mood between major depression and intense euphoria.

**‘Normal’ depression**

‘Normal’ depression refers to the kinds of low feelings most people experience from time to time, which usually pass without causing significant disruption to the person’s functioning (Carson & Butcher, 1992; Fitzpatrick & Sharry, 2004; Lozano-Vranich & Petit, 2004; Swinton, 2001). Normal depression is almost always associated with stress (Carson & Butcher, 1992; Van Praag, De Kloet & Van Os, 2004). It is common after experiences of loss and may be part of the grieving process (Kubler-Ross, 1969; Swinton, 2001). According to the DSM-IV, if depression persists for more than a year after an experience of loss, it is no longer normal. Normal depression is also related to post-partum depression (which is associated with the months after having given birth) and with adjustments at college (Carson & Butcher, 1992; Timmermans, 2005).

An area of debate is how to decide when ‘normal’ depression becomes ‘abnormal’, requiring treatment by a professional (Fitzpatrick & Sharry, 2004). Recent research in the field of narrative therapy suggests that the voice of the person perceiving herself/himself as depressed needs to be taken seriously (Robertson et al., 2005). Rapmund & Moore (2000) argue that people’s experiences of depression need to be accepted as valid interpretations of their reality. Someone suffering from ‘normal depression’ might perceive the depression as ‘abnormal’ and this voice must not be rejected because of the rigidity of a classification system (Parker et al., 1995).
The study of normal depression is important because it can yield clues about which dimensions of normal depression lead to clinical depression at a later stage. In a study among young adults suffering from normal depression it was concluded that dependency and self-criticism were significant factors in normal depression, and therefore could function as predictors of clinically significant depression (Carson & Butcher, 1992). Parker (2004) writing from the perspective of the medical model, agrees that normal depression is important because the symptoms of normal depression so often intensify to become major depression.

**Adjustment disorder with depressed mood**

According to the DSM-IV (1994) this type of depression needs to be linked to an identifiable experience of stress which has occurred less than three months before the onset of depression. The predominant features are depressed mood, tearfulness and feelings of hopelessness, and impaired functioning at work or at home. Adjustment disorder with depressed mood, according to Kaplan and Sadock (1998) needs to be differentiated from major depression, dysthymia and uncomplicated bereavement. Identifying a stressful event in a person’s life is very subjective, and draws attention to the debates regarding the rigidity of DSM-IV classification, as well as to the fact that depression is highly complex, and differs from person to person (Carson & Butcher, 1992; Fitzpatrick & Sharry, 2004).

**Dysthymia**

Dysthymia is characterized by depressed mood for most of the day over a long period of time, lasting for at least two years (American Psychiatric Association, 1994). At least two of the following symptoms need to be present: poor appetite or overeating, insomnia or hypersomnia, low energy levels, poor self-esteem, lack of concentration, difficulty in decision-making and a sense of hopelessness (Lemelin, Hotz & Swenson, 1997; Webster, 1990). Dysthymia is identified by the steady presence of symptoms which are less severe than for major depressive disorder. (Kaplan & Sadock, 1998).

In the researcher’s opinion, dysthymia as a separate category needs to be seriously questioned. This is not to say that people do not suffer from moderate depression
for long periods of time, it is simply that people, in the researcher's experience, do not resonate to the description of dysthymia, but do identify with the description of long-term depression. Another difficulty with the DSM-IV definition is that it is too rigid. A person may have been depressed for one and half years and needs treatment, but does not receive treatment because she/he does not fit the strict diagnosis of dysthymia. Clearly the category of dysthymic disorder needs further vigorous debate. A possible solution would be to describe dysthymia as minor depression that in some cases develops into major depression (Carson & Butcher, 1992; Kaplan & Sadock, 1998).

**Major depression**

According to the DSM IV, major depression is characterized by sad feelings or loss of pleasure response, for a period of two weeks or more, accompanied by four or more of the following:

- Insomnia or hypersomnia
- Sudden weight loss or weight gain associated with appetite increase or decrease
- Psychomotor agitation or psychomotor retardation
- Fatigue
- Guilt feelings
- A loss of self-worth
- Loss of concentration
- Suicidal ideation

It is a common disorder, with a lifetime prevalence of 15% overall in men and women but as high as 25% or higher in women (Kaplan & Sadock, 1998).

**Factors related to depression**

**Hereditary factors**

The incidence of depression is significantly higher among blood relatives than the general population (Carson & Butcher, 1992). The adoption method of genetic research has confirmed this hypothesis: unipolar depression was eight times more likely to occur among the biological relatives of those who were depressed than in the case of adopted relatives. (Wender, Kety, Rosenthal, Schulsinger & Ortmann,
More recently, Collins, Katona and Orrell (1996) and Fitzpatrick and Sharry (2004) have indicated that what is inherited is not a single gene, but a genetic vulnerability that may be activated by environmental factors.

**Biochemical factors**

A growing body of evidence since the 1960’s strongly suggests that biochemical factors are a factor in depression (Mulder, Porter & Joyce, 2003). Neurotransmitters, in particular, which mediate the transfer of nerve impulses between neurons, seem to figure prominently (Stimmel & Aiso, 2005). The research in this area was sparked by the observation that certain medical interventions, such as electroconvulsive therapy, antidepressant drugs and lithium carbonate seemed to ameliorate depression by influencing the concentrations of neurotransmitter chemicals at the synapse (Carson & Butcher, 1992). It was also noted that depression possessed, in many cases, a biological component, such as insomnia, loss of appetite, fatigue, which lent credence to this hypothesis (Kaplan & Sadock, 1998). Although the field is highly complex, and the etiology of depression is multi-faceted, it is generally accepted in psychiatry today that biochemistry plays a significant role in major depressive disorder (Mulder et al., 2003). De Winter et al. (2003) for example, have suggested that there are various sub-types of depression, such as melancholic and anxious retarded, which need specific chemical treatments. Bullock (1996) and Stimmel and Aiso (2005) confirm the psychiatric view that biochemical factors, particularly the influence of neurotransmitters, are central to depression, with recent research focusing on the action of serotonin and dopamine, as well as norepinephrine.

**Neurophysiological and neuroendocrinal factors**

Thase, Frank and Kupfer (1985) contended that depression may be related to neurophysiological factors, such as disturbance in sleep rhythms. Rosenthal et al. (1984) argue that neurophysiological factors play a significant role in seasonal affective disorder, a depression related to the amount of light in the environment. The evidence for neurophysiological elements as a factor in the etiology of some depressions is compelling, and reminds us again of the holistic nature of people, which in turn determines that depression has physical, emotional and spiritual
correlates (Carson & Butcher, 1992).

With regard to neuroendocrinal factors, research has focused on the role of the hormone cortisol, because of the high levels of this substance in the blood plasma of people suffering from major depression (Carson & Butcher, 1992). Arana, Baldessarini and Ornstein (1985) suggested that nonsuppression of plasma cortisol may be related to depression. However, Thase et al. (1985) discovered that people with other disorders also presented with nonsuppression of cortisol, which has left research in this area in a state of flux. More recent studies have suggested that increased cortisol levels, probably caused by stressful life events, may themselves lead to a lowering of neurotransmitter levels, such as serotonin, which then leads to depression (Cowen, 2002; Garland, 2002; Gold, Drevets & Charney, 2002). Cowen (2002, p. 100) emphasizes a need in the research on cortisol which is pertinent: “We need a model integrating biological, personal and social factors.” Moore (2002) warns against viewing raised cortisol levels as a causative factor in depression, because there are exceptions, and on this basis encourages further research in the field.

Factors related to gender
Women are considered to be at greater risk for depression than men (Jack, 1991; Walters, 1993). The gender differences in prevalence have stimulated much theorizing and research, including the suggestion that biological factors such as hormones play a role (Ussher, 2002). Other hypotheses and research centre around social labeling, social inequalities and lack of social support as factors in women’s depression (Nolen-Hoeksema, 1987). It has also been suggested that women tend to ruminate about their depressed condition and its causes, which only exacerbates their condition. Men, on the other hand, perhaps because of socialization, tend to respond actively to a depressed mood by escapist behaviours (like playing sport) that tend to alleviate their depression (Nolen-Hoeksema, 1987). Du Plessis (2002) suggests that, in the South African context, men are socialized to believe that experiencing depression is unmanly, are therefore more reluctant than women to seek help, and that this may have skewed the statistics. Mothers of young children seem a particularly vulnerable group with regard to depression. Rapmund and Moore
(2000) draw attention to the no-win situation women find themselves in when they are pulled in many directions: by divided loyalties, failure to meet expectations, tension between external control and internal control, competence eclipsed by incompetence, a background containing mixed messages concerning love and rejection, a feeling of alienation from the world, ambivalence between confrontation and avoidance, and confusion with regard to sources of support. The overall feeling of being stuck perpetuated the depression. Webster (1990) suggested that depression needs to be reframed as a coping mechanism for women in a society that expects both self-sacrifice and self-actualization from women. Depression sublimates the ensuing rage. Walters (1993), in a stratified random sample of 365 Canadian women, found the following all to be pertinent in women’s depression: socio-economic status, ethnicity, family structure, the quality of family relationships, heavy workloads, society’s gender roles, issues of female identity and the nature of women’s participation in the labour market. In a phenomenological study, Hedelin and Strandmark (2001) found the following to be characteristic of depression in elderly women: re-experiencing a painful personal insult, a perception of greater vulnerability than previously, alienation, fear, meaninglessness and emptiness, self-searching and guilt, diminished vitality and physical pain, and a feeling of tension between various opposing demands. Srinivasan, Cohen, and Parikh (2003) found that women were more likely to attribute their depression to biological factors.

Women are also more likely to suffer relapse after recovering from an episode of major depression. This feature was among a number of factors uncovered in research by Lewinsohn, Zeiss and Duncan (1989). The other factors related to relapse were the number of previous episodes and the depression level at the time of the interview. Women who relapsed were also more likely than men to have more severe episodes (Lewinsohn et al., 1989). Booij, Van Der Does, Hoffmans, Spenhoven and McNally (2005) suggest that relapse in women is related to greater tryptophan depletion in women than men.

The high number of women who suffer from depression led to the postulation that the genes located in the X chromosome might be responsible for depression. Since males can only inherit the X-chromosome from the mother, it was reasoned that, if
depression was in fact located in this chromosome, there would be no incidence of depression passed on from father to son. Unfortunately subsequent research found apparent transmission of depression from father to son which has brought this hypothesis with regard to unipolar depression into question (Carson & Butcher, 1992; Sadock & Sadock, 2003).

Du Plessis (2002) has suggested that depression manifests differently in men than in women, namely by men isolating themselves and behaving aggressively. It could be also that traditional views about masculinity, such as independence, self-sufficiency and unexpressiveness, contribute to depression and suicide in men (Moller-Leimkuhler, 2003, Sadock & Sadock, 2003; Sinclair & Taylor, 2004).

**Psychosocial factors**

**Stress**

A large body of research has indicated that stress may lead to biochemical changes in the brain, which in turn induces depression (Akiskal, 1979; Barchas, Akil, Elliott, Hollman & Watson, 1978; Thase, Frank & Kupfer, 1985; Van Praag, De Kloet & Van Os, 2004). This phenomenon is particularly applicable to major depression (Carson & Butcher, 1992). Beck (1967), in his pioneering research, contended that stress of various kinds was related to all types of depression. The most frequent kinds of stress seemed to be: (a) situations that lower self-esteem (b) situations where a person is frustrated in the reaching of a certain goal (c) a physical disease or disability (d) any single stressor of overwhelming magnitude (e) multiple stressors (f) insidious stressors of which a person seems unaware, such as a member of the police who has grown hardened to traumatic situations (Beck, 1967; Paykel, 1982; Steger, 2003). In recent years, stress in the form of sexual abuse (past or present) and stress resulting from HIV/AIDS has been associated with depression (Coleman, 2004; Lewis, 2004; Simoni & Cooperman, 2000). In similar vein, stress from partner abuse has been associated with depression (Fowler & Hill, 2004) Stress in the form of strokes and rheumatoid-arthritis is also related to depression (Bartlett et al., 2003; Robinson-Smith, 2004).
Stress is also a factor in the over fifty five age group, particularly in the form of loss (of spouse or job), health problems and lack of social support (Phifer & Murrell, 1986; Wink, Dillon & Larsen, 2005; Wynchank, 2004). Ellermann and Reed (2001) note that the inability to transcend self is related to stress and depression in middle-age adults. These findings point to the subjectivity of stress: stress is different things to different people and can be related to factors such as values, needs, personality characteristics and life developmental stages. In addition, certain cognitive schemas predispose people to depression when encountering stress relevant to their self-schemas. For example people with dependency self schemas were prone to depression when encountering stressful interpersonal life events, such as loss, whereas people with self-critical self-schemas were vulnerable to stressful life events related to achievement issues (Hammen, Marks, Maylol & DeMayo, 1985; Kaplan & Sadock, 1998). Multiple stressors that feature most prominently in breakdowns are as follows: failure to meet male or female role demands, changes in marital relationships, relocation (often involving a change of job), facing a denied reality, physical illness, failure in job performance, failure of children to meet goals set by parents, increased responsibility, damage to social status and bereavement (Carson & Butcher, 1992). Recent research by Rost and Smith (2001) and Shapiro, Shapiro and Schwartz (2000) confirms the important relationship of stress to depression. In the South African context, Du Plessis (2002) suggests that up to eighty percent of all depression is stress related. Moller-Leimkuhler (2003) argues that depression is linked to changes in gender roles, postmodern individualism and stressfully rapid social change. In the light of this evidence, it seems that the definition of depression without a precipitating factor of some kind needs to be questioned. Even where there seems to be no preceding stress, it may be that the stressor was overlooked by the person and professional alike, although care must be taken not to deny the experience of the person, and the role of hereditary, biological, chemical and neurological factors as indicated previously.

More recently, Van Praag, De Kloet and Van Os (2004) have confirmed the stress model of depression, but emphasize that underlying anxiety and aggression have vital roles in stress-related depression. In addition, they highlight the complexity of depression, and suggest that much evidence is lost through the use of psychometric
tests and interviews (Kramer, 2005). Another recent development is the proliferation of stress management programs and the possibility that these reduce stress and anxiety (Shapiro et al., 2000).

Cognitive and personality vulnerability
Beck (1967), the pioneer of cognitive-behavioural therapy, maintained that stress produces depression only in people with negative views about self, the world and the future. People with this kind of cognitive disposition have often suffered parental loss through death or permanent separation (Beck, 1967). Studies by Barnes and Prosen (1985) and Roy (1985), and more recently, Kendler, Heltner, Bertsers, Gardner and Prescott (2003) provide support for this thesis.

Attempts to describe a certain personality type that is vulnerable to depression are made difficult by the complexity surrounding the whole idea of human personality. People who display the personality dimensions of dependency and self-criticism seem particularly vulnerable to depression and people who are both dependent and self-critical seem to experience very intense depressions (Blatt, Quinlan, Chevron, McDonald & Zuroff, 1982; Hammen et al., 1985). There seems to be a link between people with a tendency to anxiety, and depression (Kaplan & Sadock, 1998; Priest, 1988). People who tend to see problems as frustrations and not as challenges may also be candidates for depression (Hirschfeld et al., 1989). Blatt (1995) argued convincingly that intense perfectionism is a personality characteristic associated with depression and that more extensive therapy may be necessary for intensely perfectionist people. Van Praag, De Kloet and Van Os (2004) suggest that anxiety and aggression are related to depression. Burr (2003) from the social constructionist perspective argues that depression cannot be linked to personality at all, but needs to be re-interpreted from a societal level.

Feelings of helplessness and hopelessness
These feelings have been postulated by many theoretical paradigms as features of depression. Perhaps the best known comes from the behaviourist Seligman (1973), who experimented with dogs and electric shocks. Seligman (1973) found that when the dogs were not permitted to escape the shock, they became helpless and
hopeless, even when it became possible to escape the shocks. Seligman reasoned that people who see no way out of their difficulties will subside into similar helplessness and hopelessness. Seligman (1973) suggested that, since this condition is a learned one, it can also be unlearned. In more recent studies, Hedelin and Strandmark (2001) found hopelessness to be a feature of the depression of elderly women, and Breitbart et al. (2000) suggest that hopelessness is related to depression and desire for death in terminally ill cancer patients.

The psychoanalytic school held that depression is a result of the ego’s awareness of its helplessness (Carson & Butcher, 1992; Lothane, 2004). The narrative therapeutic approach has suggested that depression may be related to a future story that is without hope (Robertson et al., 2005).

The evidence from such divergent theoretical schools provides a strong case in favour of helplessness and hopelessness being an important feature of depression. It is the researcher’s view that these characteristics should be included in the DSM-IV.

**Interpersonal and systemic factors**

Because an individual is part of a system, whether that system be the family or work situation or both, the individual with depression will impact upon the system and vice versa (Haley, 1963; Jones, 2003). Systems theory suggests that depression is a part of the system in a recursory pattern, with “feedback loops” causing reciprocal influence. Depression often elicits a negative response from the system (Gurtman, 1986; Howes & Hokanson, 1979), which in turn exacerbates the depression (Meyer, Moore & Viljoen, 2003; Strack & Coyne, 1983). Simply being around someone who is depressed can stimulate depression in others (Howes, Hokanson, & Loewenstein, 1985; Kaplan & Sadock, 1998). Conversely, family and friends have been indicated as crucial factors in recovery from depression (Nasser & Overholser, 2005). Systemic factors as diverse as place and surrounding community have been suggested as possible factors in the depression of some people (Knox, Virginia & Lombardo, 2002).
Depression can be a factor in the games of power and control that people play (Carson & Butcher, 1992). In terms of narrative therapy the life stories of significant others can have a negative or positive influence on the life stories of individuals. In terms of this paradigm, dominating sociopolitical narratives (for example, that heterosexuality is a societal norm) also seem to be related to depression (Robertson, 2002). Depression may also sometimes be seen as a desperate way of trying to communicate, especially in intimate relationships (Carson & Butcher, 1992; Haley, 1963).

Barnett and Gotlib (1988) suggested that marital distress may be involved in the etiology of depression. For example, marital distress may be the “last straw” which triggers depression (Barnett & Gotlib, 1988). Interestingly enough, Paykel (1979) found that marital conflict was the most frequently reported life event among a group of female patients six months before the onset of depression, which supports Barnett and Gotlib’s hypothesis. Marital difficulties may also impact adversely upon the other sources of social support possessed by the person, thus increasing their sense of social isolation (Coyne & DeLongis, 1986; Santrock, 1995). Moreover, Nasser and Overholser (2005) found that support from spouse and family were significant factors in recovery from depression.

Cultural factors
The incidence of depression varies from culture to culture. In China, for example, depression is not a frequent phenomenon (compared to the West), and when it does occur, it often manifests psychosomatically (Kleinman, 1986). In parts of Africa that are relatively free of Western influence, depression is likewise an infrequent occurrence. The reason for this may be a sense of connectedness that frees the people in this culture from inordinate self-blame and individual responsibility (Carson & Butcher, 1992; Pato, 2000)). However, the more western these cultures become, the more depression as described by the DSM-IV begins to appear (Hussain & Cochrane, 2002; Meyer et al., 2003).

It is true that in some non-western countries depression is a common phenomenon, but the form it takes differs from the West. Feelings of guilt and self-blame, sad
feelings and suicidal ideation are replaced by sleep irregularities, diminished appetite, weight loss and loss of libido (Carson & Butcher, 1992). A recent study among Turkish university students revealed six factors related to their depression, namely: trauma, job-related problems, loss, disposition, intimacy, and isolation (Cirakoglu et al., 2003). Research conducted among Black African-Caribbean people found that the majority of the participants did not consider depression, in the Western sense, as an illness at all (Marwaha & Livingstone, 2002). A study among Asian women found that conflicting cultural expectations, psychosocial, spiritual, physical health problems and communication problems were pivotal in these women’s experience (Hussain & Cochrane, 2002).

In Western cultures, the following features seem pertinent. Firstly, certain sectors of society seem more at risk for depression, such as unemployed women with young children (Brooks, 1996; Carson & Butcher, 1992). Secondly, in western culture, depression is more common among people of high educational and occupational status (White, 1982). It has recently been suggested that the cultural picture in the west is far from homogeneous: In the United States, for example, Latinas conceive of depression differently than Anglo Saxon Americans (Koss-Chioino, 2004).

The last two decades have seen the growth of Transcultural Psychiatry, which aims to bring cultural factors into the clinical process. The Transcultural psychiatrists are critical of the medical model, but do not go as far as the relativism of the antipsychiatry movement. One of their aims is to develop a cultural axis for the DSM-IV’s multiaxial model (Moldavsky, 2003).

In the South African context, Ellis (2003) suggests that depression presents differently in people from African cultural backgrounds, namely in the form of psychosomatic symptoms, fatigue, dizziness and irritability. He adds that problematic relationships are almost always a factor in these cultures because of the importance of community. Traditional Africans tend also to describe their depression in picture language, and cultural factors, such as women feeling uncomfortable with a male doctor, often complicate depression and its diagnosis (Ellis, 2003).
Treatments and outcomes

Pharmacotherapy

People suffering from mild to moderate depression are more likely to benefit from psychotherapy than from pharmacotherapy (Beckham & Leber, 1985; Klerman & Schechter, 1982). However, there is a considerable body of research that antidepressant medication is effective as a treatment for major depression (Hollon & Beck, 1986; Mindham, 1982; Mulder et al., 2003; Noll, Davis, & DeLeon-Jones, 1985; White, 1982). John White (1982) suggests that there are some depressions that respond only to pharmacotherapy, but opponents of the medical model, such as Michael White would dispute this (White, 1995). Cowen (2002) rightly rejects dualistic categories, stressing that an integrated treatment of depression on all levels appears to be the most successful.

Antidepressant medication influences the concentration of neurotransmitters at the nerve synapses, and is available in a number of varieties (Kaplan & Sadock, 1998). Stimmel and Aiso (2005) give a helpful summary of the evolution of anti-depressant medication. The earlier tricyclic antidepressants were distinguished by their broad mechanism of action, but also by their many undesirable side-effects. The next phase was the development of selective serotonin re-uptake inhibitors that acted more specifically, had fewer undesirable side-effects and were not fatal in overdose. Concern was raised, however, that the fewer side effects went hand in hand with less clinical effectiveness. As a result, multiple mechanism antidepressant drugs were developed that acted upon two neurotransmitters at the same time. For example, venlafaxine inhibits serotonin and norepinephrine reuptake. By a different mechanism mirtazapine also acts on serotonin and norepinephrine and selectively inhibits certain postsynaptic serotonin receptor subtypes primarily responsible for the gastrointestinal side effects and sexual dysfunction associated with earlier selective serotonin reuptake inhibitors (Stimmel & Aiso, 2005). These advances suggest that this method of treating depression is a promising one. The day of effective antidepressant medication with no undesirable side effects may not be far off (Bullock, 1996; Stimmel & Aiso, 2005).

It is the researcher's view that anti-depressant medication, although helpful in many
instances, may be prescribed too easily, and that the hard work of psychological growth is therefore sometimes avoided. It is worth quoting from Carson and Butcher (1992, p.408): “…modest distress or unhappiness should not be an occasion for taking drugs but for rigorously examining one’s life”. Indeed one could argue convincingly that, whereas in the past depression has served a relatively positive function by encouraging people to restructure their lives, or turn to God, or to find healing in poetry or song, the practice of instant medication to alleviate sad feelings may prevent psychological growth (Bullard, 2002).

**Cognitive-behavioural therapy**

Cognitive-behavioural therapy has clearly been demonstrated to be an effective means of treatment for unipolar, non-psychotic depression (Hawton et al., 1989; Kaplan & Sadock, 1998). The treatment is based largely on the work of Beck and his colleagues (Beck, Rush, Shaw, & Emery, 1979) although there are other theorists in the field, such as Ellis and his rational-emotive approach (Ellis, 1973). Beck suggests that early human experience can lead to the formation of dysfunctional cognitions (Beck, 1967). In the face of stress, these cognitions are activated and in turn lead to what Beck calls “negative automatic thoughts”, negative in that they are unpleasant, automatic in that they race around a person’s mind in an uncontrollable manner. These uncontrolled thoughts lead to other symptoms of depression: behavioural symptoms (withdrawal, loss of energy), motivational symptoms (loss of interest), emotional symptoms (anxiety, guilt, feelings of worthlessness), cognitive symptoms (poor concentration, difficulty in making decisions) and physical symptoms (insomnia or hypersomnia, loss or increase of appetite). A vicious circle begins: more depression leads to more negative thoughts, which in turn lead to more depression (Beck, 1967; Hawton et al., 1989; Kendler et al., 2003).

The cognitive-behavioural therapist intervenes in the vicious circle by questioning automatic thoughts and challenging the assumptions on which these are founded. The more positive thinking pattern begins to lift the depressed feelings and a process of cognitive-behavioural restructuring takes place by education and the transferring of skills learned into the person’s environment through homework assignments (Beck, 1967).
The research shows as much support for the effectiveness of cognitive-behavioural therapy as for pharmacotherapy, especially for long-term follow up (Dobson, 1989; Kaplan & Sadock, 1998; Kendler et al., 2003). More recently, cognitive therapy produced a beneficial impact on the depression levels of rural, battered women (Zust, 2000). Over the last few decades, the cognitive component has virtually eclipsed the behavioural component, although recently there have been attempts to reinvigorate behaviourist therapy by a contextual examination of the external triggers of stress and the ineffectual coping methods used (Hollon, 2001).

Psychoanalytical therapy
The theory and practice of psychoanalytic therapy has developed in many divergent and complex ways since its advent over a century ago, which makes it difficult to comment on its use and effectiveness as a treatment for depression. Freud (1914) suggested helpfully that any therapeutic approach that has two main features, namely transference and resistance, can be seen as psychoanalytic. Transference can be defined as the distortion of significant others in current experience in order to fit personality patterns and expectations deriving from important individuals in past experience, while resistance is the attempt to block memories that cause psychic pain from reaching consciousness. Therapy therefore involves working through the resistances and uncovering transference in an attempt to make the unconscious conscious (Bemporad, 1992; Corey, 1996).

One of the problems of psychoanalytic therapy is its time-consuming nature. Rosenberg (1985), for example, in describing “brief” psychoanalytic therapy, suggests up to 40 sessions. This type of therapy also lacks research that is sufficiently large and objective to indicate long term effectiveness (Bemporad, 1992). Nevertheless, Kaplan & Sadock (1998) indicate that psychoanalytic therapy, while more time-consuming, is just as effective as cognitive-behavioural approaches in treating depression. More recently, Lothane (2004) has argued that psychoanalytical therapy still has an important contribution to make by using techniques of suggestion and influence. He also commends the Jungian technique of encouraging in clients the quality of creativity, by which he means the uncovering of the creative
unconscious as expressed by poets and artists down the ages.

**Interpersonal psychotherapy**
Clinical depression in Interpersonal Psychotherapy (IPT) is seen as involving three processes: symptom formation, social functioning, personality dimensions (Carson & Butcher, 1992). IPT focuses on the first two. It seeks to relieve depressive symptoms by helping people deal more effectively with current interpersonal problems that are related to the onset of depression. It explores the four problem areas commonly associated with depression: grief, role disputes, role transition and interpersonal deficits (Kaplan & Sadock, 1998; Klerman & Weissman, 1984).

**Systemic therapy**
Systemic therapy is an offshoot of systems theory, which postulates that every individual is inextricably a part of a system. Systemic therapy therefore treats depressed people in the context of their surrounding systems: the marriage, the family, friends, work and so on. Systemic therapy is sometimes called family therapy (Corey, 1996). Recent research suggested that systemic therapy compared favourably in effectiveness with pharmacotherapy and cognitive-behavioural therapy, especially with regard to fewer dropouts, improvement in levels of depression at the end of therapy and on follow up. It was also not more expensive than other therapies (Jones, 2003). The advantage of systemic therapy is that it is an approach, rather than a specific kind of therapy, that allows the use of many other therapies in an integrated way. Theorists such as Corey (1996) and Rost and Smith (2001) have suggested that future research should focus on an integrated approach in which the therapist has a repertoire of possibilities and uses that which fits in a particular context at a given time.

**Person-centred therapy**
Person centred therapy, or client-centred therapy, as it is sometimes called, originated with Carl Rogers in the 1960’s, and, although the method has undergone evolution over the years (for example, modern person-centred therapists are more confrontational and integrative than previously) the basic elements are still the same (Corey,1996). The basic elements of person-centred therapy still are:
• The client is central and must take responsibility for her or his own change (Corey, 1996; Moore, 2003b).

• The task of the therapist is to create a growth-facilitating climate that involves congruence (the therapist must be himself or herself, thus encouraging the same in the client) and unconditional acceptance and empathy, including a special kind of compassionate listening that communicates understanding and that picks up experiences just below conscious awareness (Kaplan & Sadock, 1998; Moore, 2003b).

• Later in his life Rogers advocated the importance of a mystical, spiritual dimension, where the “spirit” of the therapist reached out to touch the “spirit” of the client (Moore, 2003b).

With regard to depression, the person-centred therapist, by the application of the above principles and the development of a therapeutic relationship, will assist the depressed person to actualize, or grow, beyond depression (Corey, 1996). Recent research with regard to the effectiveness of person-centred therapy in treating depression is ambivalent. For example, Barbe, Bridge, Birhamer, Kolko and Brent (2005) found that cognitive-behavioural therapy achieved superior outcomes to person-centred therapy in the treatment of depressed adolescents with suicidal ideation. On the other hand, Teusch, Bohme, Finke, Gastpar and Sherra (2003) indicated that person-centred therapy proved as effective as antidepressant medication in treating a sample of adults with depression. In some respects, it seemed better than medication, leading to better problem clarification and insight. Pos, Greenberg, Goldman and Korman (2003) likewise found that sixteen to twenty sessions of person-centred therapy with thirty four clients led to significant decline in reported symptoms of depression as well as improved self-esteem and emotional-processing skills.

Psychotherapy and pharmacotherapy
There is considerable support for the thesis that a combination of psychotherapy and pharmacotherapy is the most effective means of treating depression. For example, Weissman (1979) found that combined therapy was superior to psychotherapy or pharmacotherapy alone. Luborsky, Singer and Luborsky (1975) in a comparative study of psychotherapies, concluded that combined therapy was more effective than
either component alone, and that psychotherapy was more effective than pharmacotherapy alone. Conte, Plutchik, Wild and Karasu (1986) developed a new statistical approach that was used to analyse all controlled studies of outpatients treated for unipolar depression reported between 1974 and 1984, and concluded that combined treatments were slightly superior to psychotherapy alone, or pharmacotherapy alone. More recently, Fainman (2005) Fitzpatrick and Sharry (2004) and Sadock and Sadock (2003) have confirmed the effectiveness of psychotherapy in conjunction with pharmacotherapy. Rost and Smith (2001) and Cowen (2002) have highlighted the need for a holistic treatment of depression: medication, cognitive therapy, family therapy, psychoeducation and using intrinsic spirituality.

The impact of postmodernism

The advent of postmodernist philosophy, as will be indicated more fully in the next chapter, has exerted a considerable influence on psychology. With regard to depression, it can be safely said that, in some circles, it has led to a paradigm shift in the way depression is viewed and treated.

Constructivism, as will be explained more fully in the following chapter, suggests that each person constructs personal reality in a unique way, in a manner that is valid for him or her. Constructivists, therefore, postulate that depression is a much more complex phenomenon than is at present described in the DSM-IV (Robertson et al., 2005). Constructivists urge therefore that the unique voices of people suffering from what they perceive as depression be taken seriously, both in diagnosis and therapy (Rapmund & Moore, 2000).

Social constructionism has contributed to the paradigm shift with regard to depression in that it postulates that depression is a discursive phenomenon that is socially constructed (Burr, 2003; Parker et al., 1995). The definitions of depression will therefore change over time (Robertson et al., 2005). In addition, individual experiences of depression, and the meaning attributed to these experiences, differ throughout history and across cultures (Bullard, 2002). In the eighteenth century, for example, the melancholic person was not labeled as depressed, but rather revered
as a divinely inspired source of poetic, artistic and philosophical creativity (Bullard, 2002). These socially constructed phenomena need to be taken into account by the therapeutic community. Social constructionism has also rightly pointed out that, while the helping professions may seem very altruistic and ethical on the outside, beneath the surface, this community is seething with issues of power, control and subjugation (Parker et al., 1995). The best example of this is the way the dominant medical model has political power which it uses to keep, for example, psychiatrists at the top of the pecking order in terms of prestige and remuneration. For this reason, proponents of the medical model may well be reluctant to view depression as anything other than a medical condition. In this way, social constructionism reminds us helpfully that depression is also a political issue.

That part of the postmodernist movement called the narrative therapeutic approach has also contributed to the paradigm shift on depression. The narrative therapeutic approach posits that people interpret their lives as stories, which is an important way of giving meaning to their experience (Morgan, 2000; White & Epston, 1990; Zimmerman & Dickerson, 1997). This approach brings postmodern philosophy into play by suggesting that these stories are not cast in stone, but can be re-interpreted in a psychologically healthy way (Venter, 2000). The approach also highlights issues such as the life-giving propensities of language, the impact of the life narratives of significant others, the presence of subjugating socio-political narratives and the importance of unique outcomes (moments of hope in the life story) and externalization: that problems have a story of their own, separate, albeit enmeshed, with the person’s life narrative (Carlson, 1998; Robertson et al., 2005).

There is some evidence for the effectiveness of the narrative therapeutic approach in treating depression (Walsh & Keenan, 1997). Crafford (1997) cites two case studies in which reinterpreting the stories of the families of origin were successful in alleviating depression. Laube and Trefz (1994) discovered that a narrative approach produced positive results in the context of group therapy. Johnson (1994) used a group model in which the narrative framework was applied in a helpful way to uncover issues of power, culture, context and gender that underlay the depression of the participants. Carlson (1998) and Fristad, Gavazzi and Soldano (1999) show in
case studies how externalizing the problem initiated significant improvement in clients suffering from depression. Robertson et al. (2005,) by analyzing the narratives of depressed participants, suggested that the technique of externalizing problems and working with unique outcomes seemed fruitful ways of helping people deal with depression.

It can be seen that the narrative therapeutic approach contributes to the paradigm shift on depression in particular by its assertion that depression is an external phenomenon, rather than an internal disease. Its diametric opposition to the medical model can be clearly seen.

**Conclusion**

It can be seen that depression is a highly complex phenomenon and that the research is in a state of dynamic flux at present. A lacuna in the literature seems to be the lack of attention to spirituality as a factor related to depression. This study will hopefully address this gap in the research.
CHAPTER FOUR

SOCIAL CONSTRUCTIONISM: PEOPLE INTERACTING IN CONTEXT THROUGH LANGUAGE

And what is truth? (from the Gospel of John, chapter 18, verse 38).

There’s no art
To find the mind’s construction in the face…
William Shakespeare
(from Macbeth, Act 1, Scene 4).

Absorbing laws, we learn to speak
While Grammar shapes the worlds we know,
Prescribes the answers we may seek
And regulates the status quo.
(from the poem Stative Verbs, by Andre de Villiers)

At the Methodist Mission
Out of My white suburb
In the Black Township
I spoke to My Colleague,
My Brother.
I Clasped His Hand
We Drank Tea
Laughed and Cried
Spoke about God, our Church, our Land.
His pain and
My guilt
Merged
Gently and Slowly.
Healed.
We Spoke as People, Friends, Family.
We forgot the division of Our Land.
Our People, Our Church, Ourselves.
We Shared Christ’s Way
Forward…

later
in town
i went to the platteland post office
saw the signs
hesitated
and used the white entrance.

(South Africa 1979, by Alan Robertson,
unpublished poem)

Introduction
The foregoing quotations illustrate some of the main principles of social constructionism, which is the guiding epistemological framework for this study. Pilate’s question from the Gospel of John highlights what is perhaps the central tenet of post-modernism, the ontology (nature of reality) on which social constructionism is based, namely that there is no single truth that explains all of reality; rather there are a plurality of truths and perspectives.

In the second quotation, Shakespeare, well ahead of his time, articulates another principle of social constructionism: that the ‘mind’, or ‘personality’ is not a fixed, inward entity, but is a ‘construction’, that is dependant upon the cultural and social ‘discourses’ (ways of seeing reality) of the time.
The third quotation expresses poetically the assertion of social constructionism that language does not only describe our realities, it creates them.

The fourth poem illustrates two other points of social constructionism:
- That people can behave very differently in different social contexts.
- That dominant social and political discourses (or ideologies) can radically shape an individual’s behaviour.

In the following chapter, these aspects of social constructionism, as well as others, will be fleshed out. A brief historical overview will be presented, followed by a discussion of the main aspects of social constructionism.

**Brief historical overview**

During the last two decades, social constructionism has emerged as an important epistemological framework in psychology, impacting not only on research but on a wide array of social practices, such as therapy, organizational development and education (Brinkmann, 2006).

While no scholar can deny its present influence, it is a much more difficult task to identify the origins and development of social constructionism. Despite this difficulty, it is important to attempt an historical overview because of social constructionism’s close relationship to other philosophical movements and paradigms, such as postmodernism, constructivism, radical constructivism and narrative therapies (Doan, 1997; Meyer et al., 2003).

What is beyond doubt is that the philosophical background from which social constructionism has emerged is usually referred to as postmodernism (Burr, 2003). However, postmodernism can best be understood in contrast to modernism (Burr, 2003; Doan, 1997; Travers, 2006) to which a brief introduction is now given, before moving on to postmodernism and social constructionism.
Modernism

Modernist epistemology can be traced back to early seventeenth century Europe, reaching its full expression in the Enlightenment of the mid-eighteenth century. It exerted enormous influence in virtually all fields of life and thought in subsequent centuries (Burr, 2003; Travers, 2006). Modernism was characterized chiefly by the belief that there are universal truths in knowledge and experience that need to be rigorously searched for by means of reason and logic (Burr, 2003; Doan, 1997). The researcher's first encounter with modernism occurred in the early 1970's, when my professor began his lecture with the words: “We are engaged, at University, in the rigorous pursuit of truth”.

A second related feature of modernism was that of the “grand narrative”, a belief that, when truth was discovered, it would totally explain reality, and would apply to all people, contexts and cultures (Doan, 1997; Jones, 2004; Travers, 2006). In terms of spirituality, this belief was epitomized by the western missionaries bringing to South Africa a brand of spirituality which they believed applied to all people and cultures. As a result of this world-view, the missionaries simply rejected indigenous cultural practices, such as initiation ceremonies and traditional healing, as being without truth, i.e. evil (Pato, 2000).

Another feature of modernism was the tendency to explain reality in terms of underlying structures. In the field of physics, for example, empirical research attempted to uncover the underlying features of the existing order. The goodness or otherwise of a theory was judged on how it explained underlying reality (Jones, 2004). In political theory this was exemplified by Marxism, which postulated structures in society and history, and in psychology by Freud, who divided human personality into underlying components (Burr, 2003).

Modernist epistemology is referred to in the literature as, inter alia, the logico-scientific mode of thought (White & Epston, 1990) or the Cartesian-Newtonian paradigm (Meyer et al., 2003), in that Descartes was the pioneer of rationalism and mind-body dualism, and Newton founded a physics based on linear causation.
It is fashionable today, in postmodern and social constructionist circles, to be critical of modernist ideas, forgetting how necessary a development modernism was historically (Westheafer, 2004). Modernism challenged the excessive claims of the church to absolute truth, and, in an effort to counter such excesses in the future, argued that truth could only have a basis in that which was observable and measurable by a community of scholars who agreed on the findings (Westheafer, 2004; Zhao, 2005).

A more balanced view of modernism today would see it as a valuable voice in the field of human knowledge and research. Criticism of the epistemology would then focus on its tendency to become a “totalizing discourse lethal to all competing traditions of intelligibility and value” (Gergen, 2006, p.189). Recently there have been encouraging trends in the literature calling for a rapprochement between aspects of modernism and postmodernism, for example a suggestion that social constructionism should incorporate aspects of empiricism into its paradigm (Addis & Cohane, 2005; Cromby, 2004; Jost & Kruglanski, 2002).

**Postmodernism**

The origins of postmodernism can be traced all the way back to the Enlightenment, in small beginnings, such as when Nietzsche argued that science and reason were becoming as dogmatic as their theistic predecessors, and contended that there was no such thing as universal truth (Burr, 2003).

However, postmodernism can best be understood as a gradual reaction to many of the tenets of modernism as outlined above. Perhaps the most important of these was the rejection of the grand narrative theory (Doan, 1997; McVinney, 2004). Fuelled, *inter alia*, by developments in physics, where Planck’s quantum theory suggested that scientific phenomena, like light, could be described in different ways, postmodernism argued that there were many truths, all meaningful to the people who hold them, and all culturally and historically situated (Burr, 2003; Doan, 1997; Jost & Kruglanski, 2002; Meyer et al., 2003).
Postmodernism also reacted against the modernist assertion that all reality could be boiled down to its basic characteristics, a world-view called reductionism or atomism (Meyer et al., 2003; Leitner, 2005). Influenced by the disciplines of physics and biology (Bateson, 1979; Wassenaar, 1987) postmodernism began to stress complexity, holism and interconnectedness (Burr, 2003; Gergen, 2002; Meyer et al., 2003).

Postmodernism reacted, thirdly, against modernism’s insistence on linear causality, which suggested that reality could be influenced by logical causation, in the sense of event A leading to B leading to C and so on (Meyer et al., 2003). Leitner (2005, p. 307) articulates instead the postmodern principle that in practice events are “co-created in interaction with the world”, rather than caused by a simple linear reaction. Developments in classical physics (light waves seemed to be multi-causal) linguistics (Derrida) and philosophy (Foucault, 1973) contributed to postmodernism’s perspectives in this regard (Lindgren, 2005). In literature this principle was reflected in works such as *The French Lieutenant's Woman* by John Fowles which, in order to demonstrate the unpredictability of existence, has two endings. Postmodern influence can also be detected in cinema, in films like Tarantino’s *Pulp Fiction*, and *Love Actually*, both of which reject linear stories in favour of parallel plot lines that merge at the end. In psychology, attention began to be given to circular theory and feedback loops (Bateson, 1979; Hoffman, 1985,1990; Lowe, 2005; Meyer et al., 2003). In psychotherapy, reflexivity and interactive process are today widely accepted in family therapy as important ingredients of the therapeutic conversation (Lowe, 2005).

Postmodernism reacted, fourthly, against modernism’s assumption of the neutrality of the observer. Postmodernism suggested rather that the observer was part of the system, and that there could therefore be no such thing as objective reality (Speer, 2005). This trend can perhaps be traced back to Einstein’s theory of relativity which claimed that the universe was in perpetual motion, therefore rendering the perspective of the observer crucial in describing phenomena (Gergen, 2002; Meyer et al., 2003;). These ideas were soon taken up in psychology by, *inter alia*, scholars such as Hoffman (1985, 1990), Coale (1994) and Michael White (1995) and became
apparent in the paradigms of constructivism, social constructionism and narrative therapy (Burr, 2003; Doan, 1997).

Some scholars believe we are currently living in the postmodern age (Kvale, 1992; Venter, 2000) while others suggest that our era is still very much modern (Westheafefer, 2004). The more likely scenario is put forward by Travers (2006) that we are in an epoch of transition between the two perspectives.

It can be seen that postmodernism is a major ontology that is exerting considerable influence in the arts, literature, the humanities and the social sciences, including psychology.

**The origins of social constructionism**
Influenced in general by postmodern ideas, the specific origins of social constructionism can be traced back to the sociology of knowledge (Burr, 2003; Lindgren, 2005). This field was concerned with how society and culture construct knowledge, and the kinds of knowledge that had been, and were being constructed (Burr, 2003; Young & Collin, 2004). These ideas began to filter through from sociology to other disciplines, including psychology and anthropology (Connell-Carrick & Scannapieco, 2004).

In psychology, the emergence of social constructionism is usually associated with Gergen’s article of 1973, entitled “Social psychology as history”, in which he contended that all knowledge, including psychological knowledge, is constructed in specific historical contexts and cultures, which are continually changing (Burr, 2003; Gergen, 1973). Since knowledge is of a particular time and context, Gergen called into question the very existence of objective knowledge, proposing instead that psychology, instead of trying to uncover fixed laws of psychological behaviour, should turn to the study of discursive practices by which reality is constructed (Burr, 2003; Gergen, 1973, 1985; Liebrucks, 2001).

In the United Kingdom, these ideas were taken up by Harre and Secord, among others, and used to oppose the positivist, experimental practices of mainstream
psychology (Burr, 2003). These scholars suggested that people were not “subjects”, in research, but active participants, with the capacity for being aware of how they were influencing and being influenced by others (Burr, 2003; Westheafer, 2004). Drawing from French intellectuals, such as Foucault and Derrida, who argued that language constituted reality, the turn to language in psychology began to take place, as social constructionists contended that language does not only describe reality, it creates it (Edley, 2001; Speer, 2005). This emphasis on language led in turn to the development of discursive psychology as a branch of social constructionism, in which psychologists study the way language is used to construct reality (Speer, 2005). Linked to this was the division of social constructionism into micro social constructionism, that is interested in the discourses, or way of seeing things, of ordinary people in interaction (Bailey, 2004), and macro social constructionism (sometimes called Foucauldian discourse analysis), that analyses the way political and social discourses shape our reality (Brinkmann, 2006; Burr, 2003; Liebrucks, 2001; White, 1995).

At present social constructionism is one of the most influential paradigms in postmodern psychology and is being used more and more in qualitative research (Brinkmann, 2006). The foregoing historical overview makes it clear that social constructionism has complex and diverse origins that make it more of a “family” of connected ideas. This feature will be taken up in the next section of this chapter.

**Social constructionism: a definition**

Reading the literature can be quite confusing, because social constructionism is referred to also as constructionism (Gergen 2006) and social constructivism (Lindgren, 2005, Lit & Shek, 2002). Social constructionism also needs to be distinguished from constructivism, which is closely related, but represents a different epistemology. Constructivism shares with social constructionism the belief that people experience realities that are “true” for themselves (Moore, 2003a) and which are co-created in interaction with others (Leitner, 2005). To this social constructionism adds the importance of social, cultural and linguistic influences in the co-creation of realities which all have a claim to “truth” (Dickins, 2004; Speer, 2005).
There is no one single definition of social constructionism. Rather, social constructionism comprises a ‘family’ of ideas (Burr, 2003; Cromby, 2004) the most important of which are the following:

- There is no fixed personality. This belief is linked to social constructionism’s conviction that there are no inner essentials within a person that define who they are (Burr, 2003). Identities are socially constructed, and are amenable to change depending on the social and cultural context (Dickins, 2004). Social constructionism would therefore caution against a blind acceptance of the medical model, which suggests, for example, that depression is “inside” a person, and then labels the person “depressive” which can have a major impact on the “depressive” person’s future (Swinton, 2001; Zhao, 2005).

- There is no fixed reality or ultimate truth. Social constructionism denies that knowledge can ever be an accurate description of reality, since reality is co-created by people in social and cultural contexts (Gergen, 2006). Moreover, all knowledge is arrived at by people who have different perspectives and different values, that crucially determine the kind of knowledge arrived at (Burr, 2003). In the light of this, there can never be “a grand narrative” or ultimate, timeless truth (Doan, 1997; Shotter, 2005). For example, I have a certain kind of spirituality that has been socially constructed by the church, family, friends, western culture, books I have read. My spirituality works for me, but I cannot impose it on my Hindu friend, whose spirituality, constructed in a different context, works for him. Psychological theories too are socially constructed. Once this premise of a plurality of perspectives is accepted, nothing in psychology can be seen as “cast in stone” (Westheafeer, 2004). Psychological theories, like everything else, are constantly changing over time. Moreover, western psychological theories are not to be viewed as automatically superior to theories of human nature in other cultures (Burr, 2003). Hussain & Cochrane (2002) for example, show how DSM-IV categories simply do not fit conceptualization of depression in Asia.

- Language is central to social constructionism. Social constructionism takes issue with the view of the world that assumes ‘reality’ is separate from language, which is viewed simply as a tool to put labels onto reality (Edley,
Social constructionism argues that reality is not reflected in language, but created by it (Edley, 2001; Speer 2005).

- Social constructionism focuses on ordinary people in interaction through discourses. Traditional psychology has hypothesized psychological phenomena as interior to a person, such as attitudes, motivations and so on (Burr, 2003). Social constructionism believes that these very concepts are socially constructed by ordinary people in interaction, and exist as “discourses” (ways of seeing reality) in societies and cultures (Speer, 2005). Psychological research, therefore, should concern itself with ordinary people and their use of language in constructing concepts (Liebrucks, 2001; Sinclair & Taylor, 2004; Speer, 2005). An attempt will be made to do this in this study on spirituality and depression.

- Some forms of social constructionism are interested in power and politics. The constructive power of language is related to social structures, political ideologies, institutionalized practices (Burr, 2003). The result is often the production of discourses which marginalize women, or gay people (Barker, 2005; Speer, 2005). These social constructionists are interested in issues of power and the resultant social inequality, with a view to confronting and dialoguing in their research and practice (Barker 2005; Burr 2003; Speer, 2005).

The foregoing ideas together form an important description of social constructionism, which is too complex to be encapsulated by a single definition.

**The family of ideas underlying social constructionism explored more fully**

**Social constructionism and personality**

Traditionally, psychology has treated the person as a self contained unit, with thoughts, feelings and so on, inside the ‘personality’. Social constructionism suggests, by contrast, that the personality, as such, does not exist. Depression, anger, compassion, love and so on, are not related to a ‘personality’, but are tactical, linguistic moves in regard to the moral complexities of society. They are ways, for example of justifying our actions, blaming others, achieving our goals, and so on, tools which we may use differently depending on the situation (Addis &
Cohane, 2005; Burr, 2003). This phenomenon explains why people tend to behave differently in different contexts: a man may get angry with his wife but behaves meekly towards his boss, despite intense provocation.

Harre (2002) suggests that the use of the personal pronoun ‘I’ has led Western culture to the concept of individual, separate personalities. He suggests that the ‘self’ is a linguistic phenomenon: people use words to achieve certain results which are beneficial for them, as they negotiate positions within a social context. Social constructionists do not deny that a self dominated by our bodily space does exist. It stresses however, that we experience this self differently depending upon the linguistic models available to us in our society (Speer, 2005). How the self will be experienced differs depending upon the context, culture and time. In South Africa, the sense of self of a Xhosa will be very much a self in community rather than the western individualised self of an English speaking South African.

Other social constructionists prefer to use the word ‘identity’ rather than personality, because ‘identity’ implies something that is formed by social interaction, rather than an inner essence (Burr, 2003; Speer, 2005). Our identities are socially constructed, a process in which we draw from the discourses that are socially available to us in our language interaction with others (Addis & Cohane, 2005; Burr, 2003; Speer, 2005). In this study the researcher will approach the research participants as “people in relation” (Gergen, 2006), in which they are greatly influenced by society, but retain personal agency.

**Social constructionism and reality**

There are three viewpoints on reality with regard to social constructionism at the present time. The first is that of relativism, which, broadly speaking, can be summarized by Foucault’s contention that “discourses form the objects of which they speak” (Foucault, 1973, p. 49). It is not that Foucault denies reality. He simply believes that, because we can never have direct access to it beyond language, the material existence or not of reality is irrelevant (Burr, 2003). Nevertheless, relativistic social constructionism has been criticized as implying that nothing, not even personal experience, or the mind is real (Edley, 2001; Shotter, 2005).
The second is that of critical realism, expressed in the work of Edley (2001) and Liebrucks (2001). Edley (2001) suggests that social constructionism should be understood in two ways: ontologically and epistemologically. Edley understands ontology to refer to the study of being and existence in the world, which, when applied to social constructionism, suggests that there is indeed a real world ‘out there’. However, with regard to epistemology (according to Edley, how we come to know things), social constructionism argues that the way language is used to describe the world, influences our understanding of the world (Edley, 2001).

For example, it is not denied that depression is an ontological phenomenon, which exists beyond its description, but the understanding of depression is dependent upon the language used to describe it. For instance, the language used by the DSM-IV to describe depression is quite different from the language, say, of narrative therapist Michael White. The end result may be a different definition of depression, as the competing discourses are negotiated and a new understanding of the phenomenon is arrived at.

Liebrucks (2001), in a similar view, argues that people see the same phenomena, but approach the phenomena from different perspectives, depending on their socialization, acculturation, training, gender, and other perspectives they bring with them to the phenomena, which will be reflected in the language used to describe the phenomena (Liebruchs, 2001; Scheurich, 1997). For this reason, it is possible for social constructionists to maintain a realist as distinct from a relativistic position, while accepting a plurality of perspectives (Liebrucks, 2001; Raskin & Bridges, 2004).

The third viewpoint is put forward by Burr (2003), who suggests that it is time to reframe the debate. She suggests that reality has often been mistakenly contrasted with social constructionism as “reality” versus “illusion”. She suggests that this dualistic way of thinking be replaced by a more holistic view which sees reality (as materiality) and social constructionism as two versions of the same reality (Burr, 2003; Potter 2002). Burkitt (2003) in a similar view suggests a move away from
either/or categories to a both/and category. He argues for a social constructionism that acknowledges both materiality and discourse. He makes the important point that people create material artefacts, which impact powerfully upon our social constructions of the world, the computer being a good example. Cromby (2004) similarly suggests that a further direction of social constructionist theory will be the integration and synthesis of social constructionism with other disciplines, including traditionally realist disciplines such as neuroscience. In this study the author will adopt a critical realist position similar to that of Edley (2001) and Liebrucks (2001).

Social constructionism and language
As has been indicated earlier, language is at the heart of social construction. Language itself constitutes realities, because it provides us with a way of structuring the world (Burr, 2003). Once this assumption is accepted, it has important implications for psychology:

- traditional concepts, such as personality emotions, cognition, and so on are not a fixed part of human nature – they become available to us, and their nature is determined by language.
- what we accept as our reality could have been structured very differently in a different context with a different use of language (Burr, 2003; Rasera, Vieira & Japur, 2004).

In this regard social constructionism has been greatly influenced by structuralism, in turn based upon Saussure’s contention that language does not reflect a social reality already in existence, but rather is an arbitrary assignation of words to objects, which find meaning by social consensus and the intersubjectivity of perception within a particular society (Burr, 2003; Speer, 2005). Social constructionism was influenced also by poststructuralism, which argued that the meanings society agrees to assign to objects are never fixed, but change over time (Rasera, Vieira & Japur, 2004). If so, language is crucial to the process of change in society and in individuals. A good recent example is the way language has been in the vanguard of the feminist movement. Apparently trivial battles, like referring to ‘mankind’ as ‘humankind’ have generated alternative discourses (Speer, 2005). In the field of spirituality, a description of spirituality which removes it from the traditional view of “religiousness”
is beginning to have an impact. In regard to depression, a description that locates depression in societal interaction rather than inside a person is slowly beginning to change the discourses in society regarding depression (Cromby, 2004).

Social constructionism is also interested in language as a means by which people legitimise their accounts of reality (Burr, 2003). It is interested in, not so much what language describes, but what it performs in social interaction. Some social constructionists have referred to how functional use of language is made possible by “interpretive repertoires”, a kind of linguistic tool kit used by certain societies and cultures, which is an important area for further study and research (Willig, 2001). Robertson et al., (2005)), for example, found that negative generalizations used in the stories of depressed people tended to perpetuate depression. When social constructionism analyzes the accounts of ordinary people in interaction, as above, it is referred to as micro social constructionism (Burr, 2003).

Language is also important on a macro-level. Language sustains social and political accounts of the world which can marginalize others (Barker, 2005). A good example is the way the South African government in the 1980’s referred to their policies as “separate development” whereas opponents of the policy used a different language and termed it “apartheid”. Language construction has also been a feature of the more liberal attitudes towards homosexuals, who have generated an alterative linguistic account of themselves as “gay”.

Traditionally, there has been a division between micro and macro social constructionism (Burr, 2003). Barker (2005) helpfully suggests that there is a need to integrate the two approaches, which this study will attempt to do.

**Social constructionism and “discourse”**

If all of our reality is constructed through language, the language “discourses” which are available to us socially and culturally, assume crucial importance. A discourse offers a way of interpreting reality and giving it meaning, by means of language. Every society and culture possesses competing discourses from which people draw to fashion an identity (Burr, 2003). In some areas of life there are many discourses
available, for example in the field of career guidance and selection. However, in other areas the number of discourses seems limited, as for example, in the process of finding a sexual identity (Speer, 2005). There would seem also to be a limited number of discourses available with regard to depression: the discourse of the medical model is dominant.

Despite the enormous power and influence of the discourses around us, it is possible, according to Burr (2003), drawing from Foucault, to resist discourses, and to generate alternative ones. A good example is the way narrative psychology has generated alternative discourses with regard to depression (White, 1995). In the field of spirituality, the “new age” idea of a broad, eclectic spirituality can be seen as an alternative discourse that may challenge the discourse of spirituality as religiousness.

A discourse, because it is so powerful, can lock people into its paradigm. Once this occurs the individual is in a “subject” position which gives him/her little option for changing position (Addis & Cohane, 2005; Speer 2005). Once, for example, the person labelled as “depressive” accepts that the depression is an inward illness that can only be cured by medical intervention, such as drug therapy or electroconvulsive therapy, the person can be subject, even captive, to that discourse for the rest of their lives.

In ordinary everyday interaction, there is a kind of jockeying for positioning, within discourses, taking place all the time (Burr, 2003; Gergen 2006). For example, a male colleague in the workplace may offer a female colleague a “position” of girlfriend, to which she responds by offering a counter “position” of “just a friend”. In my own experience, I moved from a “subject” position of being a “depressive” who needed psychiatric medication, to a new position, in which I drew upon available discourses in psychology. These interpreted my unhappiness as resulting from ineffectual coping techniques for stress and relational problems, instead of from an inner illness.
Discourses were a central aspect of this study, generating the research question: *what discourses do people draw upon in describing their experiences of spirituality and depression?*

**Social constructionism and ethics**

This section is included because ethics is an area of fierce current debate in social constructionism, and ethics is important in any research. Social constructionism has been challenged by humanist-existential thinkers as being, at worst, without ethics, or, at best, uncertain about an ethical basis. Bott (2002), for example, states that psychology, because it has traditionally been linked to helping people, risks losing all credibility if it loses its ethical basis which, he suggests, is not clearly articulated in social constructionism. He calls for a profound respect for the individual to be included in the social constructionist paradigm.

Likewise Brinkmann (2006, p.94) accuses social constructionism of promoting an “ethics of infinitude” because of its assertion that ethics, like everything else, changes all the time, thus rendering any set of ethics uncertain and transient. Brinkmann (2006) drawing from existentialist perspectives suggests that there are two aspects of life which are definitely not socially constructed, namely, human vulnerability and human interdependence. Vulnerability refers to the reality that people can be harmed, injured and will die. Dependency refers to the reality that people unavoidably influence each other, every day, for better or for worse. In the light of these inescapable facts, Brinkmann (2006) suggests that social constructionism, rather than perceiving social interaction as a space in which people compete for power and reframe descriptions from their own often selfish perspectives, should instead view social interaction as an arena where the non-constructed ethical demand of “caring for each other” should be played out.

The researcher believes that it is important for social constructionism to give attention to ethics as a vital component of its paradigm. The social constructionist principle of many perspectives, and different interpretations of reality, can be construed as allowing for an ‘anything goes’ mentality (Bott, 2002; Strong, 2005). Clearly, for instance, a husband who reframes violence towards his spouse as a
legitimate response to provocation is on shaky ethical ground. In this respect the critique of existential-humanistic theorists is welcome and timely.

However, the researcher believes that Brinkmann’s advocacy of caring for others, while well-intentioned, ignores the fact that there are many discourses in society and cultures regarding what caring for others actually means. By way of illustration, the psychiatrist who appropriates the medical model discourse in all likelihood believes that he/she is caring for others, while those who adopt a narrative therapy discourse will consider their rejection of the medical model as a way of caring for others.

The researcher therefore finds himself agreeing with Gergen (2006), who, in reply to Brinkmann, argues that the latter’s advocacy of a moral code is yet another constructed moral code laying claim to universalistic truth. Gergen (2006) reminds us that there are many ethical codes, or discourses in society jostling for attention. To give one such code primacy over others is inviting the possibility of oppression.

The researcher believes that the way forward may be for social constructionism to stress its ethical commitment by encouraging constant dialogue between various ethical codes in the hope that such dialogue will generate new, more appropriate ethical codes which will still, however, be characterized by the humble acknowledgement that none will ever contain the whole truth. In this respect a constant renewal of ethics, or an “ethics of infinitude”, is indeed a possibility (Gergen, 2006).

**Conclusion**

Social constructionism is no longer an epistemology on the fringe of psychology (Brinkmann, 2006; Burr, 2003). It is now a respected, much utilized paradigm in qualitative theory and research (Brinkmann, 2006; Doan, 1997; Freedman & Combs, 1996). With regard to spirituality and depression, both of which are greatly influenced by experience in social interaction, it would seem an appropriate paradigm. In the next chapter, on the research methodology for this study, the way the various
foregoing aspects of social constructionism relate to this research will be explained more fully.
CHAPTER FIVE

RESEARCH METHODOLOGY: THE JOURNEY IS AS IMPORTANT AS THE DESTINATION

Research based solely on qualitative accounts cannot build up a coherent body of findings in relation to a theory in a particular area, and remains at the level of a collection of anecdotes waiting to be transformed into testable hypotheses (John Archer, 2004)

If the scientist's or researcher's account of a phenomenon is seen as 'fact' as a result of the warranting voice of science, we must then acknowledge that other accounts, for example the accounts of respondents in interviews, must be equally valid in principle (Vivien Burr, 2003)

Introduction

These excerpts present two conflicting views with regard to research. The first, from the quantitative research paradigm, communicates an emphasis on experimentation, testing, compiling a body of findings seen as truth by the scientific community, and the tendency to minimize the importance of non-quantitative research. The second, from the perspective of qualitative research, argues that research based on hearing, in interviews, the lived experience of people in context, has as much claim to be the truth as the quantitative variety.

The debate reminds us of the importance of a research paradigm in any research project, and the importance of being aware of it and sharing it with readers of the research. It reminds us, furthermore, that the research paradigm reflects the researcher's views about the nature of reality, the relationship of the researcher to the area being researched, and the process of how the researcher goes about
exploring and discovering what can be known (Burr, 2003; Henning, 2005; Terre Blanche & Durrheim, 1999).

As indicated by the excerpts, there are, broadly, two basic research paradigms: quantitative and qualitative. The quantitative paradigm is associated with modernism: universal truths can be found in an objective manner by hypothesizing, experimenting and testing, and verifying measurable results which are presented as valid facts about reality. The researchers are the “experts” and the people experimented upon, the “subjects” (Archer, 2004; Burr, 2003; Scheurich, 1997).

Qualitative research, on the other hand, moves away from measurement and statistics, believing that the experience of people is too rich and complex to be reduced to numbers. It emphasizes hearing the lived experiences of people in their normal contexts. It focuses on understanding, interpreting, finding meaning, rather than predicting and generalizing (Denzin & Lincoln, 2003; Henning, 2005; Swinton, 2001).

Since it was the researcher’s purpose to allow people who experienced depression in the context of spirituality to voice their stories in a rich, detailed way in co-research with the author, the researcher chose qualitative research as a paradigm that would facilitate this purpose (Merchant, 1997). In addition, it seemed that qualitative research would fit better with the researcher’s chosen ontological and epistemological frameworks, namely postmodernism and social constructionism. Unlike some theorists, such as Huber (1995), the researcher does not reject quantitative research out of hand. The researcher believes quantitative research is an important voice in the field, providing another perspective on reality, and the researcher supports recent suggestions of reconciliation between the two paradigms (Dickins, 2004; Verduin & Efron, 2004). However, for this study, the qualitative paradigm fitted better with the aims of the research.

The Researcher’s Site Within Qualitative Research
Denzin and Lincoln (2003) point out that qualitative research has a long and complex history, and therefore tends to mean different things to different people. It may be
helpful to briefly sketch some of the main developments and features of qualitative research since its inception in the early 20th Century, and to locate the present study within this broad outline.

The first phase of qualitative research centred on field workers observing subjects in an objective, detached manner (Denzin & Lincoln, 2003). The context was mostly linked to colonialism: observing the alien, the heathen, the other (Geertz, 1983) and flourished in the early twentieth century. The second phase took up the criticisms of empirical quantitative research that qualitative research was unscientific, and resulted, by and large, in attempts to give qualitative research reliability and validity. This tendency was especially evident in attempts to provide the frequency with which phenomena occur, and the amassing of evidence to support “probabilities” (Becker, 1998; Denzin & Lincoln, 2003). This phase lasted approximately until the late 1960’s, although phases tended to merge into each other, and some qualitative research is still being conducted according to the modus operandi followed in the second phase and can cause some confusion (Denzin & Lincoln, 2003).

The next phase in the development of qualitative research occurred when postmodernism began to make an impact upon the field, especially in that the old paradigm of one truth was giving way to a more pluralistic, open-ended way of conducting research (Geertz, 1988). A call was made for “thick” descriptions, and complexity was taken seriously. Interpreting a local situation or context assumed more significance (Greenblatt, 1997).

The fourth phase reflected the full impact of postmodernism upon qualitative research. The researcher’s role in the research was no longer seen as independent, but reflexive and recursive. Linear causality was rejected in favour of pattern and process (Scheurich, 1997). It was alleged that it was in fact impossible to reproduce human experience. The very act of writing was re-creating the experience (Lieblich et al., 1998). The researcher was writing her/his story of the story. Feminist, linguistic, philosophical and literary theories began to impact upon research in the social sciences (Denzin & Lincoln, 2003). Issues of validity, reliability and generalizability were reinterpreted in the light of the multiverse of truths generated by postmodernism (Denzin & Lincoln, 2003). The evaluation of research came to be seen as a highly complex process, needing to be unique to the qualitative enterprise (Lieblich et al,
Research and therapy came to be seen as having a ‘political’ dimension, in that some political and social discourses were psychologically harmful (White, 1995).

In sum, qualitative research is in a state of flux and complexity at the present time. Adding to the confusion is the fact that past phases tend to extend their tentacles into subsequent phases. Hence, many recent qualitative studies have spent huge amounts of energy trying to justify themselves in the eyes of the quantitative community, in a modernist kind of way (Scheurich, 1997). It is therefore incumbent upon the researcher to communicate clearly his/her epistemological framework, the presuppositions prevailing in his/her “site” of research, the means of evaluation, and the method of research to be used. In short, the journey is now as important as the destination; process needs to be given detailed attention and description.

This study will place itself firmly in the fourth phase of qualitative research, embracing post-modern principles, and it will use a social constructionist epistemological framework as was explained in chapter four.

**Qualitative research as used in this study: main features**

In the introduction, some general comments were made about qualitative research. Because qualitative research is the researcher’s chosen paradigm, it is important to give some more detail about the role of qualitative research from a postmodernist perspective. The following are some of the main features of such a qualitative paradigm:

- Meaning is given to the data, not by measurement, but by interpretation (Swinton, 2001).
- Emphasis is placed on rich, thick descriptions of the phenomena being studied (Morgan, 2000).
- The research is viewed as a co-production of the researcher and the participant (Burr, 2003; Merchant, 1997). The task of the researcher is therefore to reveal his/her perspectives and assumptions, which impact reflexively in a kind of feedback loop upon the participant and researcher (Scheurich, 1997).
- Complexity, in contrast to reductionism, is stressed, in the belief that the
complexity of life, in the case of many human phenomena, is more likely to lead to understanding (Gehart, Ratliff, & Randall, 2001).

- Research is conducted in the participant’s normal environment, rather than removing the person from his/her context for an experiment (Sprenkle & Piercy, 2005).

- The research is viewed as a reflexive process: the researcher is also impacted by the process and needs to reflect upon the research’s impact upon him/herself (Burr, 2003; Robertson et al., 2005).

- The research is based on a not knowing attitude (Jankowski, Clark & Ivey, 2000). The researcher is not an expert, but in an attitude of humility, is open to learn from the participant (Arminio & Hultgren, 2002; White, 1995).

Social constructionism, qualitative research and the aims of this study

The basic tenets of social constructionism will serve as a guideline when conducting this research. This will be accomplished by, first of all, drawing on social constructionism in the formulation of research questions. It may be argued that such a procedure will militate against depth and complexity by restricting the scope of the research. However, as Burr (2003) has pointed out, even unstructured research is influenced by the implicit assumptions of the researcher. It may be better, therefore, to declare the research questions beforehand in a transparent manner. The following questions represent the main social constructionist principles that guided the researcher when (i) compiling the questions posed to the participants in the interviews; (ii) determining his role in the interviews; (iii) analyzing the data:

- How do the research participants voice their lived experience of spirituality and depression in their social context? What themes are present in their stories?

- Since spirituality and depression are discursive phenomena, what definitions do ordinary people give for spirituality and depression? In other words, what micro discourses are present in their stories?

- What language do the participants use in expressing their experiences of
spirituality and depression?

- What dominant discourses are present in the stories of spirituality and depression?
- What competing discourses are evident in the stories?

In addition, from the researcher’s perspective, the following question emerged from the literature:

- Do the stories indicate that the participants experience spirituality as helpful or harmful in dealing with depression? Such a question is also important in ensuring that the research is useful, which, according to Lieblich et al. (1998) is an important element of valuable research.

**Trustworthiness of the research (dependability and credibility)**

The researcher is deliberately avoiding reference to validity and reliability, because, as Morrow (2005) rightly points out, these terms belong to the language of quantitative research, and are out of place in the qualitative paradigm. Arminio and Hultgren (2002), in similar vein, suggest that a new language of evaluation needs to be developed for qualitative research. However, Terre Blanche and Durrheim (1999) have correctly drawn attention to the ethical responsibility of qualitative researchers to assess their research since it deals with the lived experience of people. Durrheim and Wassenaar (1999) suggest the terms dependability and credibility, instead of reliability and validity. Morrow (2005) believes these terms are too obviously an attempt to justify qualitative research in the eyes of the quantitative research community, and suggests that “trustworthiness” encapsulates the essence of dependability and credibility. The researcher is therefore adopting Morrow’s suggestion and is using “trustworthiness” as a way of language about the quality of this study (Morrow, 2005).

The trustworthiness of the research will be attended to by:

- Ensuring adequate data (Morrow, 2005; Lieblich et al., 1998), by conducting in-depth interviews with eight participants from four religions (Christianity, Hinduism, Islam, African traditional religion), who have experienced
spirituality and depression.

- Ensuring *adequate interpretation* (Morrow, 2005). This was facilitated by the researcher transcribing the interviews, interpreting the interviews through a categorical content analysis, and continually asking the question: Have I allowed the voices of these people, in their social context, to be heard? The researcher tried also to be as transparent as possible about the interpretive process. In addition, numerous quotations from the participants’ own words were given to ground interpretations (Sprenkle & Piercy, 2005). Furthermore, alternative explanations were discussed, to enhance the width and comprehensiveness of interpretation (Lieblich et al., 1998).

- **Reflexivity** was ensured by meeting with the participants after interpretations had been made, and asking them for feedback on these (Burr, 2003; Morrow, 2005).

- Describing the social and cultural *contexts* of the researcher and participants (Burr, 2003).

- Providing *coherence* by the use of research questions which gave the research a clear and coherent focus (Lieblich et al., 1998).

- Asking the following question regarding *insightfulness* after completion of the research: Has the research contributed to understanding and insight regarding spirituality and depression, as well as to the researcher’s own life? (Lieblich et al., 1998; Sprenkle & Piercy, 2005).

- Evaluating the *helpfulness* of the research findings by a comparative analysis of the research with the main themes uncovered by the literature search in conjunction with societal and cultural themes (Burr, 2003).

**Ethical considerations**

The current debate around ethics within social constructionism highlights the importance of ethics in research (Brinkmann, 2006; Gergen, 2006). If researchers are to be ethical, it is important at the very least to ensure that the research process is not harmful to participants (Durrheim & Wassenaar, 1999). The researcher will
endeavour to accomplish this by:

- Clearly explaining the purpose of the research to the participants.
- Obtaining written and verbal consent from the participants.
- Ensuring confidentiality by the use of pseudonyms.
- Enquiring about the participant’s well-being after the interview (immediately and a few weeks later) and arranging therapy for the participant if the participant expressed a need in this regard.

**Sampling and selection**

Sampling is basically the process whereby people are selected for a particular research study (Sprenkle & Piercy, 2005). Sampling is either random or purposive, the former referring to “chance” selection, the latter a deliberate, conscious selection of persons who are considered to have experienced the phenomena being studied and are able to articulate these in a rich, detailed manner (Denzin & Lincoln, 2003).

In this study, the following criteria were utilised in a purposive selection of a small sample (eight people) that would provide rich, in-depth information regarding the phenomena under consideration:

- Participants needed to have experienced spirituality and depression.
- Participants should preferably be drawn from different faiths, in order to provide complexity and diversity to the research.

The selection of participants from the Christian faith proved to be easy. Since the researcher is a self-supporting Anglican priest, and has regular involvement with the churches in Kimberley, he knew of four Christians who had experienced spirituality and depression and whom he felt would prove to be articulate participants. The researcher also has a friend who is a Hindu, who has experienced depression, and who agreed to participate. This friend put the researcher in touch with another Hindu participant. As far as the Muslim participant was concerned, the researcher made contact with the Muslim community in Kimberley, and eventually found a participant whom he felt would present rich experiences of the phenomena being studied, and who agreed to participate. The researcher had met the person with an African
traditionalist background the previous year on a few occasions, and she enthusiastically agreed to participate when approached.

Data collection

Data were gathered in the form of an interview with each participant. The interviews ranged from one hour to two hours. The interviews were structured around the following questions. However, as much detail as possible was sought, and many open-ended questions were asked in between categories. Moreover, if the participant went off on a tangent, this was allowed, and explored. In other words, the researcher tried to present a non-dominant research voice. The questions were:

- What is your understanding of spirituality?
- What is your understanding of depression?
- What is the story of your spirituality?
- What is the story of your depression?
- How has spirituality impacted upon your depression?
- How has depression impacted upon your spirituality?
- How has spirituality helped you in your struggle with depression?
- How has spirituality hindered you in your struggle with depression?
- What else would you like to say about your experiences with regard to spirituality and depression?

While these questions formed the basic framework of the interview, open-ended questions were asked in between, in order to obtain as much detail as possible. Once each interview had been analyzed, the researcher met again with each participant to share the findings and receive feedback.

Data analysis

The researcher, following a qualitative research methodology suggested by Ryan and Bernard (2003) and Lieblich et al. (1995) treated the transcribed text as a
window into human experience. In practice, this involved interpreting the “windowed” human experience, trying in this way to find the significant themes in the text. If the researcher is aware of his/her preconceptions, he/she can allow these to be challenged by the texts themselves (Scheurich, 1996) which the researcher tried to put into practice. Interpretation was influenced by the researcher’s chosen paradigm (Ryan & Bernard, 2003; Sprenkle & Piercy, 2005). For example, social constructionist data analysis focuses on interpreting the lived experience of people in context, so that the result is not only a trustworthy analysis of the evidence, but also the generation of alternative discourses on the phenomena being researched (Burr, 2003; Terre Blanche & Kelly, 1999). For this reason, the researcher was open to the ‘voice’ of society that spoke through the stories.

Crucial to this enterprise is a transparent, detailed description of the process of data analysis. In the data analysis for this study, the researcher adapted methods suggested by Lieblich et al. (1998) and Ryan and Bernard (2003) that focus on the content categories of the stories. This method involved five steps:

- Selection of sub-texts: on the basis of the research questions, all the relevant sections of the interviews were collected to form a sub-text. In addition, the researcher allowed other themes and sub-themes that “spoke” to him, or challenged his assumptions, to generate new sub-texts.

- Categories: the sub-texts were sorted into categories. This process was achieved by seeking commonalities in the subtexts. In practice, this proved to be a circular process: careful reading, finding sub-texts, putting sub-texts into content categories, followed by further careful reading. Sometimes a new idea was generated, which led to the adding of a category, or the refinement of an existing one, and so on. The content categories of each participant’s story were then written.

- The content categories of each participant’s story was then shared with the participant, and modified accordingly.

- The content categories were then compared across stories, for common themes, and these were compared and contrasted with other voices, for example, from the literature and from society.
The strengths and weaknesses of the study were discussed, and suggestions made for future research.

Conclusion

The aim of this chapter was an explanation and discussion of the research methodology followed in this study. Qualitative research was discussed, since it was the researcher’s chosen research paradigm. It was explained how social constructionism, the guiding epistemology of the study, influenced the qualitative research, specifically by generating the questions posed to the participants. The trustworthiness of the study was then discussed, followed by a discussion of ethical considerations, sampling and selection, data collection and data analysis.
CHAPTER SIX

MY STORIES OF THE PARTICIPANTS’ STORIES: ALLOWING THE VOICES OF ORDINARY (YET EXTRAORDINARY) PEOPLE TO BE HEARD

Introduction
Transcribed interviews can be obtained from the researcher on request. The participants’ interviews presented rich and insightful perspectives on the phenomena being studied. This quality will become clear from the extensive quotations from the interviews which will be used to substantiate the emerging themes in the researcher’s analysis of the stories. Pseudonyms are used throughout to protect the identities of the participants. The names of countries and places have also been changed to ensure confidentiality.

MY STORY OF JAMES’S STORY: LOOKING FOR UNIVERSALITY IN A WORLD OF CONTRADICTIONS

| Age:       | 25       |
| Gender:    | Male     |
| Marital status: | Unmarried |
| Faith:     | Hindu    |
| Number of interviews: | One |

JAMES’S STORY AS A WHOLE
James’s depression seemed to be related to three factors. The first was an abusive father, from whom James and his step-mother fled when he was seventeen years old. The second was being sent, at age fourteen, to an English speaking school, even though he was Afrikaans speaking, where the massive adjustment to a new
language, different social environment, and high school, triggered depression. The third was James’s attempt to establish independence by working as a waiter, where the intense demands, combined with his own high standards, led to severe depression. From the time James entered high school, with its major adjustments, he became aware of a protective spiritual presence in his life, which helped him to cope with depression. His biological mother was a Hindu Swami and when James began to spend time with her in school holidays, he was exposed to people who demonstrated for him genuine lived religious experience, as opposed to the external, ritualistic practices which he had encountered earlier in his life. James then developed, within the context of the Hindu faith, his experience of a protective spiritual presence, drawing from Hinduism in a way that worked for him, in his words:

\[
\text{in the same way as any person would use any religion to their advantage or interpret religion themselves.}
\]

Using prayer, meditation and yoga, as well as being open to experience, respecting all of life, and seeing God in everything, James developed his spirituality in the following years, so that it became a major factor in helping him deal with his depression.

THEMES EMERGING FROM JAMES’S STORY
The following themes emerged in the analysis of James’s story of spirituality and depression:

James’s personal understanding of depression
James offered the following personal understanding of depression:

- Impact on physical and psychological well-being

This theme was very prominent in James’s understanding of depression. For example, he stated:

\[
\text{Depression… is something which affects profoundly… your health. It definitely has an impact on your physical well-being.}
\]

Another example was as follows:

\[
\text{I think that it definitely hampers your performance in terms of being motivated for daily activities and that kind}
\]
of thing… It hampers one’s ability to interact with people, to a large degree, I think. And one’s self-esteem and all those things.

These excerpts seem to reflect a description of depression as something that affects physical health and energy levels, that produces feelings of worthlessness and that affects social and occupational functioning. Moreover themes of loss of appetite, loss of concentration and inappropriate guilt were also apparent in James’s account of his first experience of depression:

I couldn’t think properly. I couldn’t eat…I felt guilty for creating this problem.

- Depression robbed his world view of meaning

According to James:

Depression is something which profoundly affects your world view in a negative way.

If one accepts that a world view refers to one’s philosophical outlook, one’s way of making sense of life and the universe, James is not simply referring here to negative thinking, but is in fact raising the existential issue of meaning in life as relevant to depression. Depression impaired his capacity to find meaning in his philosophical outlook, or weltanschauung. James touched on this theme again, when describing his depression, he stated:

…it was so overwhelming that I think I became disjointed from that environment around me, and I needed to find something else that tied all of these things together and make the world make sense for me in some way.

Later he said:

At first I became very depressed about the way the rest of the world worked, and the way people treated one another, and then it became a case of coming to terms with it.

- Anger and depression

James linked his experience of depression to his anger:
I would just sometimes, very irrationally, get this [a calming presence] in situations where I was being mistreated, and I felt angry.

He also stated:

I was far too hard on myself for getting angry with situations…

suggesting that unaccepted anger was a feature of his depression.

• Positive versus negative effects of depression
Depression was not only a destructive experience for James. For example, James’s spirituality seemed to benefit from his depression. He said:

…there is a place for depression in the world. Depression almost is something that causes one to understand and reach out for spirituality more. It regenerates it in a sense, the same way in which winter allows plants to regenerate. It causes a complete blunting of them, it is actually a terrible thing for the plants, but it actually strengthens them, and allows them to rejuvenate themselves, become spring.

In similar vein, he remarked:

Depression often cut me off, but, later on when I realized what this was, it caused me to go back to it again. So while it blunts one’s ability to experience spirituality, I think it is also a very strong motivation to become spiritual again.

• Depression as a threat to identity
James’s interview revealed another theme with regard to depression, namely, loss of identity. For example, speaking about the depression he experienced as a waiter, James lamented:

Once again, I felt that this [depression] was totally transforming me, and just making me not the person
I was before. It was totally – um – (sighs) – it was becoming a threat to my identity, therefore I needed to get out of it.

- Depression as a feeling of being trapped
Working as a waiter, and wanting to go to university, but not having enough money, gave James a feeling of being trapped:

  I wanted to go to University but I just didn’t have money for a long time, you know. I felt like, oh well, you know, I’m kind of stuck here.

The same theme is evident in:

  I really just needed to find some way of getting out of it, but I couldn’t at that stage because I had no other option, you know, financially I didn’t have any training to do anything else.

- Depression removing a future story
When speaking of his experience of depression, James stated

  But it was as if I couldn’t see any further, like, I couldn’t imagine myself in a few months, let alone a few years you know, what I was going to be doing.

It was as if depression had removed a future story from his life.

**Metaphors James used to describe his depression**

Language, and how it is used, is important in the social constructionist paradigm. What was striking about James’s use of language was the number of times he resorted to figurative language to describe depression, as though ultimately this phenomenon was beyond the power of non-figurative language to communicate. James used four metaphors to describe depression:
• Depression as a zombie like state
James used this metaphor on three occasions in the interview:

I was very depressed…I remember very clearly being in a kind of zombie-like state… Depression seems to have this effect on me of almost turning me into a zombie…Because, while depression brings you into this state, well, brings me into this state of almost zombieness…

• Depression as a swamp
Sharing how difficult it was for him to actually know when he was depressed, and what he was depressed about, James compared depression to a swamp:

Because you’re depressed you often don’t realize what it is that’s actually depressing you, you know. Once you get into that intense state of depression, it becomes more than just – what caused it, it becomes an actual state you have now entered into, and that you actually can’t get beyond – it’s like a swamp!

It would be very difficult for non-figurative language to express the sense of overwhelming, unpleasant ‘lostness’ of this image.

• Depression as something that blunts
Depression seemed to blunt James’s ability to think clearly:

Depression seems to have this effect on me of blunting, I don’t know what effect it has on others, but it seems to have this effect on me of blunting my thinking.

Depression also blunted James’s spirituality:

So while it blunts one’s ability to experience spirituality…

• Depression as a seasonal or cyclical phenomenon
James’s imagery of depression as a seasonal or cyclical phenomenon was apparent in the following quotations:

Depression regenerates spirituality in a sense, the way in which winter allows plants to regenerate…While
depression cuts one off, it also gives one incentives to become spiritual again, I think. That’s my experience of it, almost cyclical.

**Spirituality versus religiousness**

James believed strongly that there was a clear difference between spirituality and religiousness. The differences clustered around the following dimensions:

- **Lived spirituality versus static religion**
  The spirituality of James was characterized by a living, dynamic everyday reality, as opposed to something fixed and static. For example, commenting on the role of the Hindu Scriptures, the Bhagavad Ghita, in his life, he responded:
  
  …when it comes to scripture, just seeing them in the abstract doesn’t really work for me…Because, I think it’s just maybe my orientation to be into, um, religion being lived all the time, as opposed to being static and fixed.

  On the same subject, he also commented:
  
  I’ve found some lines and aspects of the Bhagavad Ghita, like, informative, but I would not say that forms the basis and crux of my spiritual experience…I find seeing people, and seeing people in certain situations, and how they responded to those situations, real life interactions with people, as being far more inspirational, and having a far greater effect on me.

  On another occasion, describing his first experiences with Hinduism, he said:
  
  *Spirituality was living religion, as opposed to practising religion.*

- **Individual experience versus organized religion**
  The spirituality of James was a very personal thing, deriving from his experience:
  
  *Spirituality is an individual experience, of, not necessarily God – um – although a lot of people would interpret it as that, but – um, as seeing the world as – um – being not*
the sum of its parts, but there being something more that connects things…

When describing his first encounter with spirituality, he emphasized a gradual personal experience:

I became very aware of a kind of protective presence in my life – um – that was looking after me, and that I could trust. And about that stage, at about the age of fourteen, it started developing, but it wasn’t a sudden thing…I would say that it only manifested itself most obviously by the time I was seventeen.

On the other hand, religion, for James, was something simply organized on a social level:

I think that spirituality differs from religion, in that, when we talk about religion we are talking about organized religion, in terms of particular religious groups. I think that religion kind of functions on a social level whereas spirituality is an individual experience.

James did not find organized religion helpful, because it seemed to focus on outward ritual and routine practices, rather than personal experience and lived reality:

I would say my spirituality only began, um…at the age of about fourteen, um – um…Until that point I was just practicing religion in a kind of a formulaic, um, almost ritualistic way – I was part of the NG Church, and my stepmother would take me to the Anglican Church, so I would go to church and sing and go to Sunday School and all of that stuff. It didn’t really signify that much to me, those practices – It was more of a social activity that I engaged in, and that I saw a whole lot of people engaging in as well, just one of the things that people do.
• Holistic lifestyle versus compartmentalized lifestyle

What really upset James about “religious” people who followed organized religion was that they compartmentalized their observance to Sundays only:

…when I started seeing the way in which people around me, students and scholars, went to church on Sundays, but were totally, almost evil during the week, made me realize that the social, this religiousness, is a bad thing, and not to be trusted.

On the other hand, the spirituality that ultimately worked for James was a holistic attitude that incorporated all of life. When asked by the researcher whether he was saying spirituality was an approach to life, James replied:

To every second, every day, you know. That kind of thing. And an actual engagement with the world. Because it’s not like in this idea of spirituality that God is somewhere else. It’s like God is in everything and around everybody, so why not live life as spiritually as possible if everything is an expression of God?

And later he said:

Spirituality needs to be a constant awareness of what is going on around one, you know. And to establish that every time in every context one is in…

• Secular religion versus non-secular spirituality

When explaining his relationship to Hinduism, James distanced himself from secular Hinduism, which he defined as being oppressive towards people:

…where a bunch of actual physical practices dominate or domineer the way in which people live their lives, and actually cause depression. For instance, when, in Islam, women are forced to wear certain clothing, in secular Hinduism, the caste system, and the way the society is extremely patriarchal, and geared towards, um, arranged marriages where women are almost completely set aside,
whereas, true Hindu texts don’t advocate that kind of thing at all…”

By contrast, non-secular Hinduism was a non-judgmental, respectful attitude:

\[ I \text{ would say that it involves, more than anything else, an awareness of how you see life, and how you respect life, and how you contribute towards the world. } \]

The ingredients of James’s spirituality

The following “ingredients” emerged from James’s story:

- **Similarities at the core of spiritualities**

  Speaking about his journey from organized Christianity to aspects of Hinduism which he felt helpful to his experience of spirituality, James said:

  \[ I \text{ experienced them [Hindu practices] as positive, and having as positive an impact on the world as any other religion and I felt that – it was at that stage that I realized as well, that truth, you know, that truth is not objective, it is definitely something that has a lot to do with where you come from, and the way in which you experience life… seeing the way in which these people had so many similar ideas …} \]

- **Acceptance versus judgment/condemnation**

  What attracted James to Hinduism was the accepting lifestyle he sensed in the adherents:

  …seeing how they were so accepting of others, you know, was kind of the thing that led me to feel that, you know… God could surely not pick murderers above good people who do good deeds and try to make the world a better place…it was that that impressed me more than anything else.

  This experience contrasted with the judgmental attitude he had encountered in organized Christianity:
Whereas in the church you are told: “These are heathen practices,” and blahdiblah, and all the rest of it.

- A respectful attitude towards life versus religious practices
At the core of James’s spirituality was a respectful attitude towards life that he felt should guide everything else:

  I would say that spirituality involves, more than anything else, an awareness of how you see life, and how you respect life, and how you contribute towards the world.

This respectful attitude brought meaning to his life, in every context:

  ...it’s more an awareness than anything else – living spiritually, as opposed to praying, to meditating – just doing that...in performing activities where you see meaning in every action: non-abrasiveness, like, being gentle, and creating a positive atmosphere – um – for people to feed off and enjoy.

- Openness to experience
James deliberately refrained from committing himself too firmly to a set of views, so that he could remain open to experience:

  I’ve never kind of said that these are the ways in which life should work and I’m going to commit myself to these views, because I feel that would be closing the door, not only on one’s communication with – not only those around you, but with spirituality. Spirituality needs to be a constant awareness of what is going on around one, you know.

- God in everything
Related to openness to experience was James’s contention that God could be experienced in everything:

  To remain open to these things, to see more and more things as being expressions of God, as opposed to... this
is the bad and terrible world, you know, and the wonderfulness of life is somewhere else. Everything can be an expression of God. Every being, every person, every kind of living thing can be an expression of God…

• Congruence, especially with regard to anger
James believed anger was a major problem for people:

Because anger is everywhere around us most of the time, most of us get angry all the time, it’s probably our biggest problem, and we often feel so guilty about it…

Congruence was a helpful strategy for him:

And also never to be dishonest with yourself and like, if one is angry…it’s OK to be upset…there’s a reason we get upset. we need to get upset sometimes. As long as you don’t allow your getting upset to – um – negatively impact upon the well-being around you.

• Adversity interpreted as opportunities to learn
Speaking about the development of his spirituality during some difficult times, James commented:

I think that the social factors around me affected me in a way, and I did interpret them as being part of my learning, you know, about learning about what life is.

• Meditation, prayer and reading
Although these spiritual disciplines were secondary to a respectful attitude to life, they did play a role in James’s experience, particularly in his recovery from his first bout of depression. Describing this time, he related:

I think also the amount of time that that I spent at the yoga centre, at the Ashram, during that period – I stayed quite a lot. I meditated quite a lot, and prayed quite a lot during that particular period, and that would have
definitely facilitated this process. I read an autobiography of a Yogi…

- The role of music

Being guided by the protective bubble of his spirituality, James began listening to abstract, instrumental music as opposed to the raw music he had listened to before. The music functioned as a kind of escape to counter depression:

I also remember a distinct music change during this period of time…a lot more oriented towards beautiful music expressions, as opposed to the average r&b love songs, and grunge…I didn’t feel like raw emotions. So I would go for very abstract kinds of expressions of emotion – and often just a lot of instrumental music during that time.

- Small group meetings

While the experience of James was predominantly individualistic, he did mention that he sometimes found a small group helpful to his spiritual growth:

…there have been times when the presence of God has been most obvious in, um, small group meetings of certain people of my faith that get together, and, um...meditate, and experience…I’ve found those to be quite powerful, actually… the presence of God.

**Spirituality as a means of dealing with depression**

Spirituality was very helpful to James in his fight against depression, especially in the following ways:

- Spirituality as a means of identifying depression

For James, depression and spirituality were diametrically opposed to each other in such a way that the one facilitated recognition of the other:

Spirituality allows one to recognize depression, in a sense. It’s the, uh, it’s your kind of binary opposite, in a
sense, you know. It is your contrast that allows you to see depression more clearly.

In this quotation James seemed to indicate that without his experience of spirituality, he would not have been able to understand or describe his experience of depression as fully.

Another aspect of James’s experience of depression was that the depression was so overwhelming that it denied him the capacity of identifying what was happening to him. Spirituality, because it was the total opposite of depression, enabled James to identify his condition:

…depression doesn’t allow one to even experience it rationally, so that when that inspiration comes from being more spiritual, it allows one to look at it more objectively and to identify it for what it is. It’s like a litmus test, in a sense.

• Spirituality as a protecting, calming presence

When describing his experience of adolescent depression, James commented:

I don’t know if that awareness was created within me, or whether that awareness was just around me, but I became very aware of a kind of protective presence in my life, um, that was looking after me, and that I could trust.

Speaking about the anger dimension of his depression, he related:

…where I felt that I was being mistreated, and I felt angry, I suddenly just felt this very calming presence, you know, that allowed me to interact more easily with the world around me.

Later in his story, referring to the depression related to the abuse of himself and his stepmother by his father, he voiced a similar experience:

But anyway, I was depressed for a long period of time because of this…the best metaphor I can use is, like, this calming, protective bubble that I was in, that I was completely, um, taken away and removed from the
situation, and the bad, negative aspects of it, and allowed to see things very differently.

The calming, protective presence of spirituality seemed to give distance to the depression, in this way transforming James’s perception of it.

- Spirituality as inspiration

When speaking about his depression because of all the changes in his environment after entering a new school, James indicated that the inspirational quality of spirituality was helpful:

Sometimes I just felt that some of these ideas I had about the way things were working around me were not mine. It was a definite kind of inspiration that was not from me, you know, in terms of my understanding of what was going on with the people around me, um, with situations around me.

Elsewhere James referred to this idea as a kind of enlightenment:

I would be, like, I would be faced with a difficult problem or something, and I would feel frustrated, and suddenly the answer to what was going on, or how to deal with the situation would come to me, almost as a revelation.

A similar idea is expressed in the following, where James is describing the development of his spirituality:

By the time I was seventeen, I was a lot more decisive in the way I responded to situations around me – um – that, when I was affected negatively by certain problems or things, I definitely was a lot more sure about how to act, and to approach them, and to interpret them.

Spirituality seemed to give James enlightenment in the sense of showing the way, or guiding decisions, behaviour and attitudes toward the world.

At one juncture, when James found himself stuck in a demanding job that was contributing to his depression, this inspirational nature of spirituality proved to be the turning point:
And that’s where spirituality, once again, helped me out. A wonderful sense of calm, once again. Um – an ability to completely abstract myself from the situation. And I was able then to make more objective and better decisions about what I wanted to do.

As a result of this experience, James quit his job, took out a loan and began studying music at university.

- Spirituality as a stabilizing factor

Spirituality represented something that was a constant in James’s life, something that gave his life stability:

…but the decision to emotionally invest myself in this job caused me to become depressed, because, um, emotionally, I, like, I didn't have a stable centre anymore, and that’s really what spirituality lends one. It’s a stable centre that is rock solid.

This was in contrast with so much of the rest of James’s life experience:

It’s – it’s something you can always go back to, and that you can always relate your life experience to, that isn’t shifting. It’s a constant because it doesn’t exist in the world and it’s universal. Well, it does exist in the world, but not in any tangible way, not in the same way that all these other things do.

- Spirituality as a unifying force in the disconnection of depression

One of the ways James described his depression was a sense of disconnection from his environment. Spirituality was helpful to him as a kind of unifying influence, restoring unity between himself and his environment. For example, describing the origin of his spirituality, he said:

…because of the sudden impact of all these activities and all these changes in the environment…around me…I needed to find something else that tied all of these things together, and make the world make sense for me in some
way. So, basically looking for a type of universality with all these kinds of contradictions.

- Spirituality as a help in relationships that caused depression
James’s relationship with his father was a factor in his depression. The relationship broke down because of the father’s physical abuse of James, as well as the father’s destructive anger and his tendency to make those around him feel useless. Spirituality helped James to restore this relationship:

  I think spirituality has actually allowed me to have a relationship with my father, because I’ve been able to almost isolate him from his actions as a result of it, and realize that this is just a person who has not managed to master his anger, and is not in control of himself and I cannot judge him for that…It’s basically allowed me to extract myself from him…

- Spirituality as a means of dealing with the anger dimension of depression
As noted earlier, James often described his depression as being characterized by anger. Spirituality seemed to help him to deal with this aspect by giving him the ability to respect individuality and conceive of a higher level of functioning beyond biology and emotions:

  He completely lost control…and it made me angry…that I could share the same gene pool as somebody who could do this…In that sense I realized, you know, that, or maybe not realized but told myself, that it was…we’re more than the sum of our parts. We’re more than biology, you know. We have genes and everything, but there is something beyond that. Individuality counts for something.

Spirituality also helped James to offer a more controlled, less angry response to his father’s abusive way of treating him:

  …learning to extract myself from what he was doing, and how he was treating us, and to think how I was going to
respond to the situation, instead of letting the situation affect me...I realized the only way to deal with this, was to decide that I am in control of my response to the situation, and I don’t have to put up with it.

My experience in the interview with James

During the interview I was a little nervous, as I was anxious to ask the right questions, in order to facilitate a doctorate of quality. My nervousness soon turned to relief, and an inward expression of: “What a fantastic participant”. When I listened to the tape, I felt that, by and large, I had been a non-intrusive voice in the interview, although in places I felt I should have listened more, and spoken less, as when I asked a question about how old he was at the time, when James was in the midst of a rich description of the trapped feeling he had when he was having an experience of depression.

When I analyzed James’s interview I was struck by the fact that some of the descriptions used by James were clearly linked with the societal discourse of the DSM-IV, while alternative descriptions were based on personal experience. These ideas will be more fully explored in the next chapter. My experience of analyzing James’s interview also provided an example of receiving therapy from a participant, or, from my perspective, of God’s providence. In my opinion, one of my daughter’s teachers had treated her unfairly. My wife and I arranged an interview with this teacher, and I became very angry, destructively so. I went home and read these words of James:

It’s OK to be upset. There’s a reason we get upset. We need to get upset sometimes. As long as you don’t allow your getting upset to, um, negatively impact upon the well-being of those around you. And if it does, to have a genuine remorse about it, and to try and apologize, and to try to fix the situation as much as possible.

The next day, prompted by these words, I sought out the teacher and humbly apologized, as a result partially healing the relationship.
I was greatly challenged by James’s interview, because I identified with so much of what he said, even though we came from totally different religious traditions. I have since begun to think that spirituality may be a factor that can draw people together, across the barriers of the formal, organized religions.

Feedback from James

James, in typical fashion, wanted to read my story of his story in private, to enable him to really mull over it, and he gave me well thought out and well articulated feedback in writing. He said: “I really like the analysis”, implying that he found it trustworthy. However, he wanted to clarify his experience of music during his depression. He wrote:

> When I talk about beautiful music expression, I just need to clarify that I am not implying that there is any “objectively” beautiful music expression. What seemed beautiful to me when I was depressed was music that that did not fall into categories like “mainstream” or “angst rock”. These types of music did not exist in any objective realm, but were impressions or constructs of music genres that I had heard about. At the time I was looking for music without lyrics, to allow the melodies, harmonies and rhythms to take on their own subjective meanings as opposed to those meanings being dictated to me by another voice.

My experience when reading this was an impression that a study of depressed peoples’ experiences of music might be a useful research topic, and a feeling that somewhere James had been exposed to social constructionism.
ANGEL’S STORY AS A WHOLE
Angel’s depression was linked to the sexual abuse she had experienced as a child, as well as to the rejection she experienced from her mother and in her two marriages. She identified spirituality as a major factor in her overcoming the depression. She came from a Christian Science background, where the kindness of the people and her experience of spiritual healing made an impact upon her, although many of her questions went unanswered. When her second marriage became traumatic because her husband rejected her when she became pregnant, Angel turned desperately to Bible reading and prayer. She also began to attend the Anglican Church, but the turning point came when she attended a charismatic denomination and was filled with the Holy Spirit. Angel also attributed her recovery to seeking help, first from a psychiatrist and then from a psychologist with a Christian orientation. At the time of the interview Angel felt she had depression under control, but was still in a rather dysfunctional marriage, with her husband having another affair. Angel also had a close, but tumultuous relationship with her daughter, her only child.

THEMES EMERGING FROM ANGEL’S STORY

Angel’s personal understanding of depression

- Worthlessness and self-loathing

Angel’s story of her depression seemed to be dominated by feelings of worthlessness and self-loathing reflected in the following quotations:
Um, if I’ve got to put depression into words, um, firstly it’s, um, self-loathing...you just have no self-image left. When you look in the mirror, it’s like an anorexic person, she sees a fat person, and it’s like that with a depressed person. You look in the mirror and you say, “I’m so ugly! And I am so worthless!”

- **Tearfulness**
  The DSM-IV symptom of tearfulness was apparent in the following:
  
  *I never stopped crying. I used to cry in the shower, I used to cry when I woke up…*

- **Hypersomnia**
  The symptom of hypersomnia is evident in the following:
  
  *At 9 o’clock in the morning I would sleep until 12, make my husband’s lunch, I’d lie down and sleep until, like 5pm…*

- **Suicidal ideation**
  Suicidal ideation is clear in the following quote:
  
  *Then things really started falling apart with John (pseudonym) and I. His dad made a lot of trouble and I was really, really suicidal. When my daughter was about four or five, I remember sitting on my bed with a gun in my hand, wanting to blow my brains out.*

- **Depression as a loss of a sense of meaning.**
  When Angel discovered that her husband was having an affair, and her daughter left home for the first time, she described her life as meaningless:
  
  *...I had a pretty good idea that life was pretty meaningless for me.*
• In control versus out of control

It was clear that control featured prominently in Angel's story of depression. Her husband and daughter perceived her as controlling, although Angel interpreted this more as separation anxiety:

Well, he says I like to control him, you know. If he goes to Joburg and I'll say to him he really mustn't drive at night, because it's dangerous there. When I was sitting crying the other day, I said he and Gloria don't realize... it's not controlling, it's separation anxiety...

However, depression gave her the feeling that she was out of control, which Angel found intolerable. For example, explaining that prayer helped her to re-establish control, Angel said:

If you haven't been depressed, I don't think you'd understand, but you get the feeling sometimes, I'm going to lose control...it's a horrible, horrible feeling because you don't control yourself anymore.

In similar vein, when her husband ended his first affair, Angel, for a brief period of time, felt in control as she poured energy into her marriage, only to find that despite her efforts, her husband had begun another affair. This triggered another severe depression:

That was my worst depression, knowing that it doesn't matter what I do...there'll always be someone else.

Recalling an earlier experience of post-partum depression, Angel enunciated a similar feeling:

...I think I had some post natal depression then and I remember taking off in my car and going to the sea one night at 9 o’ clock and wanting to drown myself... and it spiraled out of control because things got worse and worse. They didn’t get better.
• Losing identity versus gaining identity

Linked to this alternative discourse of depression as related to control, was a discourse of depression as characterized by loss of identity. When speaking about loss of control, Angel connected it to her loss of identity:

…you get the feeling sometimes I’m going to lose control.
I don’t know what I’m going to do, but I’m not going to be me anymore. I…I’m just going to disappear …

Contrasted to this was Angel’s description of her recovery from depression, not in terms of the disappearance of symptoms, but as recovering a sense of identity, of “who she was”:

I was just saying to my daughter on the phone, you know, when I think back, when she left home I’d come to Kimberley and I wouldn’t have anyone with me, so I wouldn’t go and eat anything or have a cup of coffee. I didn’t like to walk into a place by myself. And now I do what I want to do, go where I want to go, talk to anybody I want to. No, I’m one hundred percent! I’m actually what I used to be – very loud, busybody, talk too much – Yes that’s me! I’m a good person basically.

In a similar vein, summarizing the results of her experience of psychotherapy, Angel linked her growth to her discovery of herself as a unique person:

My psychologist made me realize that I am a person. I don’t just work in someone’s home. I am a wife. I have rights, and I stand up for myself. Ja.

• Belonging versus Rejection

Angel’s life was characterized by painful rejection. She was rejected by her mother in favour of her brother:

My brother left home and she was very upset about that and we had a bit of an argument one day and – uh – she said to me, “You’ll never be your brother”, and I remember being very, very upset about it.
Her mother also did not allow a relationship with Angel’s father, a person who might have given Angel a sense of belonging:

You know that’s my big gripe with my mom. She did a very bad thing, um, my dad was a detective so he wasn’t at home a lot, and – um – she used to moan a lot about him and she actually put us against him. It’s really a very bad situation for me because I only realized after he died what a wonderful person he was.

As a result, Angel described her childhood in these poignant words:

Thinking to myself, I am sure I am an alien. I don’t belong on this planet, I don’t belong anywhere sort of thing.

Her sense of rejection was increased by the abuse she experienced from her first husband:

He used to threaten me with a knife if – he was very jealous. If he thought that someone was sort of flirting with me he would threaten me with a knife…And – uh – then I was miserable because it was a terrible marriage.

In her second marriage she was rejected by her father-in-law:

My father-in-law used to insult me and call me names in front of other people.

Her second husband also used the threat of rejection as a weapon:

My husband had told me that when our daughter finishes Matric he’s going to divorce me so I had this cloud hanging over my head of anxiousness, of what am I going to do…

Even Angel’s daughter seemed to periodically reject her:

I said…I’m a second class citizen in this house… I said to him that he and Gloria both speak to me like I’m a dog.

By contrast, the people in the churches which Angel attended gave her a sense of belonging, as evidenced by the following examples:
I did want to die, but...going to my church, going to the AGS church when we didn’t have church. I had people there that preached well, that gave me hope.

And when experiencing a particularly bad depression, Angel found that a sense of belonging experienced at the AGS church helped her:

And – uh – when we said good-bye to them at the door, she came up to me and hugged me. Then she put her mouth on my ear and she said, “God told me to give you a message. He said you were in a pit of depression, but He will get you out.” And I hung on to that.

- Depression as a negative phenomenon versus depression as a positive phenomenon

There seemed to be two competing themes in Angel's story of depression and spirituality. The one depicted depression as a very unpleasant phenomenon. For example, when she was feeling depressed about her marriage problems, she said:

...I was most unhappy, and I used to spend my days crying...this was misery for twenty years...

In addition, when experiencing depression as a result of her daughter leaving home, Angel said:

I never stopped crying. I used to cry in the shower, I used to cry when I woke up, I used to think, "Why am I getting up? What do I have to do today?"

On the other hand, Angel's story revealed a more positive theme regarding depression. In the following quote she refers to God using depression to help her accept her situation:

When I look back, I really feel that God works with broken vessels and He needed to break me completely to get to the place where I can accept what I am accepting.

In similar vein she commented:

I've now realized that it (depression) was a learning process. It was very difficult. I did want to die a couple of times, but through it I learnt a lot.
And when responding to the question, “So with hindsight you seem to find a reason for your depression”, she replied:

I honestly feel that way… I always say to people, “God loves me so much cause he gives me a good hiding, sometimes, whenever I am on the wrong road… He loves me a lot.”

In the two foregoing quotes Angel also seems to be implying that her spirituality and depression were closely linked. God used depression from time to time to deepen her spirituality and give her life direction.

- Anger versus inner peace
An important element in Angel’s story was the description of anger as a feature of her depression. In the following extract she mentions coming to terms with anger, and finding peace, as a part of her recovery from depression:

Now that I’m feeling better I’m not angry anymore, you know. I mean I was very angry at John, and I’m not angry at him anymore, I just want answers and peace and a closure.

- Future story versus no future story
Angel’s depression seemed related to her having a future story. Having recovered from depression she was interested to know the things God wanted to do through her in the future:

I’ve also said to God,” I want to work for you. I want to do things for you. I want to help people, show me the way…”
I’d really like to work for him, but I think that’ll come.

**Metaphors Angel used to describe depression**

- Depression as a pit
Angel used metaphors to describe depression. The first was that of a “pit”:

…when I was in the worst pit of my depression.
• Depression as a grey world
Angel also compared depression to a grey world:

You must remember when you are so depressed your world is grey. So there’s no joy, no laughter and the world, I’m telling you, is absolutely grey.

Spirituality versus religiousness
Angel defined her experience of religiousness as church attendance out of a sense of duty:

I would say religiousness is like when I go to church because I have to go to church. I’m expected to go to church, you know, I’ve got to do the flowers and this sort of thing and what would my mother-in-law say if I didn’t go?

In contrast, Angel experienced spirituality as God’s presence in daily life. She said:

…whereas before you could worship and ask God for things and pray and then it’s done, but with spirituality, for me, it’s that it becomes part of your life…

However, Angel’s experience offered an alternative theme of spirituality and religiousness as connected and complementary. Once she experienced spirituality, for example, Angel found that her spirituality enhanced her religiousness. She continued to attend church but found new meaning and inspiration in what she had previously experienced as boring:

…now with spirituality I go to church with expectation, and I always come away with something. So ja, before I used to go to church and come back empty.

The ingredients of Angel’s spirituality
Spirituality involved the following elements for Angel:

• The trustworthy presence of God
The first was a sense of God’s presence in which she could trust

…I don’t mean I can see Him or He appears to me or anything like that. He doesn’t even talk to me, except
through people, through books, but He’s there, I feel the presence now, ja.

Elaborating on her experience of this presence, she explained:

I don’t know how to explain it, it’s, um, a God you can’t see but got to trust. You’ve got to know He is there and accept it.

• A conversational relationship with God
Secondly, Angel seemed to conceive of her spirituality as a relationship with God, as evidenced by her practice of talking to God in an almost conversational manner, for example:

I speak directly to God, and as I say, he has never let me down.

• The Holy Spirit
The third aspect of Angel’s spirituality was her experience of the Holy Spirit. She described this as something that she had received:

That’s when I really started looking for spirituality, and, as I say, when I started going to the AGS church that was wonderful, because there I – um – received the Holy Spirit.

This experience added a realness and vitality to Angel’s spiritual experience:

I don’t know if it’s good or bad for me. It was wonderful…it helped me a lot…It made Him real, ja.

Spirituality as a means of dealing with depression

• Spirituality versus psychotherapy
A major turning point for Angel came when she found a psychologist who was able to incorporate Angel’s spirituality into her therapy:

I do think my psychologist who I see now is the one who has helped me the most, because he’s brought both of the things together, if you know what I mean, you know. He’s taught me religion and depression. The one can
heal the other. I don’t need people all the time. I’ve started leaning on God.

Commenting again on her experience of therapy, she said:

…I could speak freely about my religion, and not have someone say, “Yes, but what about your depression?” It went about everything for me, so that helped me a lot.

• Trust versus betrayal

Angel’s life was characterized by one betrayal after another. As a child, she was betrayed by people she trusted, namely her brother and cousin, who molested her. She experienced betrayal from her mother, who rejected her in favour of her brother. Her experience of marriage can also be described as a betrayal. Her first husband threatened her life, her second claimed he was not in love with her anymore, after their first child was born:

…when she was born John didn’t want anything to do with her, and has subsequently said to me that’s when he realized he wasn’t in love with me anymore. He’d made a mistake.

In her story of spirituality she encountered a God in whom she found the opposite of betrayal – here was someone she could trust:

I think this was the biggest thing about spirituality, um… it is the fact that you’ve just got to trust, and…um…spirituality is really leaving things in His hands with that trust, and that’s what I’ve learnt to do, so that’s wonderful for me. I pray every day, and I say to Him, “You know what? You’ve never let me down.”

This impression was reinforced when, in describing the impact of her spirituality upon her depression, Angel stated:

I could not have got through my depression without spirituality…the spirituality being the realization of God being real, um, I wouldn’t have got through it, because there is still nobody that I can depend on…
• Prayer and Bible reading
Angel sometimes mentioned these disciplines as a means of dealing with depression. For example, when her first husband began an affair, she became depressed, but related:

_He had an affair, and then I really started questioning myself, and being depressed and thinking, "I brought this upon myself, it’s all my fault, I’m not a good person", and um – started reading everything I could lay my hands on, started praying a lot, going back to my Bible and so on…_

Speaking about depression related to her father-in-law, she said:

_in desperation I started saying, “You know I’m sure you’re there, God, cause then I’d pray”._

In another depression she explained:

…I went for a walk with my dog and he rode past and I was really crying. And I was talking to God.

On another occasion, when she was depressed because her husband didn’t want the baby she described how she coped:

...when I was pregnant with Gloria – um – I was alone all day, and I started studying my Bible and praying a lot and that sort of thing…I was very depressed then as well because John didn’t want the baby…

• Spirituality as a means of externalization
Angel believed her separation anxiety, especially when it came to her daughter, was a factor in her depression. Recently she had been coping by handing the problem over to God, which could be seen as a means of externalization:

…so I thought OK, it’s her journey, and I have got to now let go. As much as we worry there’s nothing we can do, I have to give it over to God.

• Forgiveness versus revenge
There were times in her experience when Angel felt an intense desire for revenge. For example, regarding her father-in-law, she stated:
...when I was really angry with my father-in-law I would say to God, “You know, I really want to murder this man...”

Her spirituality helped her to forgive. In the foregoing excerpt she went on:

Please God, it’s up to you, cause vengeance is yours.

Speaking about one of the people who had abused her as a child, and her daughter's suggestion that she should confront him, she responded:

He’s a sickly old man with heart problems and we’ve just got to the stage now where we get on with life. I said to her I had forgiven him. It’s gone. It’s finished. I’ve worked through it.

Other themes

- Questioning versus non-questioning attitude

Angel described herself as a person with a questioning attitude:

I didn’t have much spirituality or anything in my life, but I always had questions, I was always wondering.

This may have been true with regard to spirituality, but it seemed missing in other parts of Angie’s life. For example, she seemed to accept unquestioningly the reality of an abusive marriage:

I got involved with this guy that I was to marry, and – uh – he was a very abusive person, but I thought it was normal.

And when her husband had an affair, instead of questioning his behaviour, she questioned herself:

...then we had a very dysfunctional marriage – um – he had an affair, and then I really started questioning myself and being depressed...

However, there were some examples of recent questioning of the status quo in her marriage:

So I’ve said to him, “She can go down with him with pleasure, but she flies back or she busses back or comes
back by herself, but she is NOT going all over with him and that’s it!"

- Psychology versus psychiatry
Angel benefited from seeing a psychiatrist. Speaking about her experience of her psychiatrist, she commented:

_He wasn’t really a counsellor. He was really more there for the medication and he specializes in eating disorders, but…um…he did put me on the right road. He was good and made me realize that I needed more help, and he gave me some books to read and so on_

Angel believed too that she had really benefited from psychiatric medication:

_Nuzac is what I’m on now and I find it’s absolutely wonderful._

However, it was when Angel began long-term therapy with a psychologist who accepted and used her spirituality in the therapy that she started to grow as a person, and transcended her depression. On this experience she claimed:

_The psychologist really made me realize that I am a person, I don’t just work in someone’s home. I am a wife. I have rights, and I stand up for myself, ja._

- Taking responsibility versus abdicating responsibility
In many ways Angel’s recovery can be attributed to her taking responsibility for her psychological health. She visited a psychiatrist, she scoured the Yellow Pages to find a psychologist with a Christian orientation, and she visited a different church in order to deepen her spirituality. She seemed to be taking responsibility for her continuing growth:

_A lot of people have said to me I take offence too easily. I do, and I’m working on that as well._

Moreover, when she recalled a healing experience she had undergone, she stressed her responsibility in the process:

_And that’s another thing I’ve realized – you’ve got to take your healing. You’ve got to take it for yourself._
However, it was of concern to the researcher to hear her say the following:

**Angel:** I'm quite happy to move if he wants me to.

**Researcher:** If he wants you to?

**Angel:** Yes, yes I know I said that but it’s true. You see, I wouldn't mind getting old with him. It’s just...you know...I'm nearly sixty.

**Researcher:** And what happens if he doesn’t give you an answer?

**Angel:** Um...I don’t know.

In the above extract, it seemed that Angel was quite content to leave her fate in her husband’s hands, even though he was still having an affair. In this way she was abdicating responsibility. A more charitable interpretation would be that she was taking responsibility within the limits imposed by her financial, and to some extent, emotional dependence upon her husband.

- **Being abused versus being boosted**

Being abused had led to a loss of self-esteem and a feeling of guilt. Angel, in response to a question about the role of abuse in her depression, replied:

...not so much to my depression but to my low self-esteem... and I was always guilty that it was my fault

On the other hand, Angel seemed to thrive when she was boosted. For example, when she attended the charismatic church, she felt boosted by the pastor's wife who hugged her and told her God was going to get her out of the pit of depression. She also said:

...you've got to have people around you that are sincere friends or good friends and family that can boost you a bit.

**My experience in the interview with Angel**

Both in the interview, and in the subsequent analysis, the researcher's predominant experience was a feeling of deep admiration for Angel, especially for the immense courage shown in the face of adversity. She had survived one obstacle after another – and had not only survived, but had reached a point where she was growing as a
person, thus transcending her depression, despite the intense suffering her life’s story had brought her. The researcher felt also encouraged in his work as a psychotherapist. Angel’s experience seemed to confirm that the process of therapy can work. Her story challenged the researcher to be more holistic in his therapeutic approach, incorporating aspects of the medical model and spirituality into his own therapeutic style. The researcher was struck by the many negative generalizations used by Angel. For example: “...he’s all I’ve got”; “My mom didn’t like me”; “I wasn’t good enough”; “I never stopped crying”; “She always blamed me”; “I suppose if I wasn’t a depressive person it wouldn’t have worried me so much”. The frequency of generalizations in Angel’s story made the researcher wonder if generalized language is not a feature of depression. The researcher experienced Angel’s metaphors for depression as very powerful. The image of being in a pit gave a picture of lostness, being trapped, helplessness, hopelessness, despair, horror. The picture of a grey world communicated that depression robbed life of meaning, pleasure, joy, laughter, colour and variety.

The researcher, who is sympathetic to the narrative therapy approach that views the person, not the therapist as the expert, was delighted to hear Angel’s story regarding her psychiatrist. The first medication she received from her psychiatrist, Luvox, helped her for about a year, and then she began to feel depressed again. She described how she became the expert in the following quote:

I was just so depressed. I was back to normal, where I was crying all the time. And I said to him if he didn't increase the dosage, then there is something wrong, and he said, “No, no, you've got to stay like this”, and I thought, “No”. So a couple of months after that I – um – spoke to my local doctor – and I got some advice from another psychologist and between us we decided we would try something else, and I'm so grateful.

She switched to Nuzac and described it as “wonderful”.
While I was transcribing the interview, I noticed that when Angel introduced the topic of sexual molestation, I ended the interview rather abruptly. With hindsight, I should have allowed her to speak some more, if she had felt comfortable doing so.

Finally, I was challenged by the way Angel had forgiven those who had inflicted suffering upon her.

Feedback from Angel

Angel felt my interpretation of her story was trustworthy. She was in fact delighted with it. She commented:

*That’s my story in a nutshell. It’s so beautiful. I see my life flash before me when I read this.*

She added that seeing depression in a positive light was the only way, from her perspective, that a person could come to terms with it. She agreed that she tended to use generalizations and she assured me that she was working on the problem. She laughed uproariously when she saw her many "ums" and "ja’s" in print. Responding to my comment that I was challenged by her ability to forgive, she said that it had *“taken a long time to get there.”* She requested a copy of my story of her story.
MY STORY OF MARION’S STORY: THE LORD IS MY LIGHT AND MY SALVATION, I WILL FEAR NO ONE

Age: 59
Gender: Female
Marital status: Widow
Faith: Christian
Number of interviews: Two

MARION’S STORY AS A WHOLE
Marion never experienced depression until age forty. She began her journey of depression when she lost her brother because of cancer. Her depression lasted a long time, and was made worse by further loss in the next fifteen years: her father, her mother, her mother-in-law and her husband. Another factor in her depression was the gradual deterioration of the family business, which, after her husband’s death, she had to run on her own. Marion was able to apply her spirituality within church structures, eventually becoming a priest. Whilst her spirituality helped her to keep going, lack of commitment and support from people in the church seemed also to contribute to ongoing depression. At the time of the interview, Marion described herself as moderately depressed.

THEMES EMERGING FROM MARION’S STORY

Marion’s personal understanding of depression
Marion’s story was characterized by the following personal understandings of depression:

- Sad feelings

When asked to share her understanding of depression, she simply replied: “Feelings of sadness”. Later, when describing her first bout of depression, she included “sad feelings” as one of a number of emotions she was experiencing:
I had this sort of…that’s…that…helpless, hopeless, sad, negative feeling.

- Helplessness and hopelessness
  Speaking about her experience just after the loss of her brother, Marion said:
  
  I might have felt helpless and hopeless, but I never, ever stopped believing.

  Elaborating on this experience in a second interview, she explained:
  
  …there was nothing we could do. I had this sort of – that’s – that – helpless, hopeless, sad, negative feeling.
  There was nothing I could do for him.

  And after her father’s death, having then also to look after her mother, she commented:

  And nothing was happening…and…and again I felt this hopeless, helpless state.

- Anger
  Although only mentioned once, it seemed that anger was a part of Marion’s depression. Defining her understanding of depression, she said:

  Feelings of sadness – um – feelings of hopelessness – um (long pause) – anger.

- Feelings of loss
  Marion once described her depression as a sense of loss. When the researcher asked her if anything else besides sad feelings characterized her experience of depression, she responded: “Feelings of loss.” Describing the beginning of her depression, she stated: “And it began with all the loss.” Later, she described her experience of loss in more detail:

  So…in fifteen years, in all the midst of all that joy of being ordained, and whatever, whatever, whatever – was this tremendous loss – as well.
• Depression as never-ending versus a future story

Another theme emerging from Marion’s story was the feeling that depression was a never-ending experience. Replying to the researcher’s question about how long she had been depressed, she replied:

I think – it just went on and on. It might have lightened that I wasn’t even aware of it, but it just went on and on – it just seemed to go on and on and on.

In the second interview she lamented:

For forty maybe plus years, I never knew what depression actually was…Then it seems like the last twenty years, it’s been nothing but in and out, in and out, in and out.

This never-ending nature of depression seemed to affect Marion’s future story. She did not seem to have much of a future story, other than the certainty of God’s presence. For example, when responding to the researcher’s question in this regard, she replied:

I don’t know. It will...it will just…I might lose faith in people, but I will never lose faith in God. I believe He’s brought me this far…and…He’s certainly not going to leave me now. He’s going to be there in the future. That I know for sure. Never a doubt.

Of course, it may be argued that for someone struggling with depression, the certainty of God’s presence in the future is a positive future story.

• Depression as negative versus depression as positive

Not only by her words, but in her body language, pauses and many sighs, Marion communicated that depression was a negative experience. In describing her understanding of depression, she described it as negative: “Feelings of sadness – anger – (long pause). All of those negative things.”

At another point in her story she described depression as a “sad, negative feeling”. However, in the context of depression, she was also able to say:

I think…growing ever stronger. Because, because – I mean, you know, the business had to be sold, the house
had to be sold, there was no money. But ever stronger was this feeling that I could…it’s only God, it’s only God.

Marion seems to be implying that depression had contributed in a positive way to her growth, and helped her to get closer to God.

- Depression versus spirituality
In Marion’s experience, depression and spirituality seemed to be inextricably linked. She began her spiritual journey in the context of depression:

_I got into a depression…I was in hospital, and had an op. and came home, and it was fine, but then…I dunno…I had this feeling I’m going to die at any time and what will happen to my children, and who will look after them, I won’t go out because I’m afraid…I’m going to die in the car and all that. And then I listened to Dr Reg Barrett, on the radio. And …he said, “Today if you are really feeling down and depressed, take the Bible, don’t open it to any specific thing, but take some paper, and write down in that paper all the negative things you are feeling, and put it anywhere in the Bible. Then, like, tomorrow, go and open the Bible and see what sort of stands out for you, do you see any passage there.” And, of course, that’s where I found Psalm 27._

Marion subsequently read and re-read this passage, and interpreted this experience not only as the beginning of her spirituality, but as the beginning of her coping with what she perceived as depression. As she read and re-read the passage, she claimed:

_I read it and I read it again, and I thought, If I believe in God and Jesus and I go to church, then why am I feeling the way I am feeling? Why am I so afraid? And, then I thought, you know, well, Jesus, this is over to you – and slowly, slowly it got better and better. I wasn’t so afraid any more, and I wasn’t so nervous…_
The above quotes are significant for the following reasons. First, Marion would never have become spiritual, if it hadn’t been for depression. And the rest of her spiritual experience had depression as a constant backdrop:

*I might have felt helpless and hopeless, but I never stopped believing. Whatever the reasons were, God was in it. You know. Like – sometimes, you – sometimes you just drift along, but God carries us to the end – Otherwise I wouldn’t have come this far…and in the midst of all that joy of being ordained… and whatever, whatever, whatever – was this tremendous loss as well…Ja, I was going to church, and I was ministering, and I was doing… but it was heavy going. It was heavy going.*

- **Support versus lack of support**
Marion chose to live out her spirituality within church structures, trying to allow her spirituality to breathe new life into these structures. She subsequently felt let down by the attitude of many people within the church. To her they often seemed unsupportive as they simply went through the motions in a lethargic fashion. When asked by the researcher about the negative attitudes she experienced, she said:

*Just a general, lethargic feeling…we’re not just here for – just to go through the motions every Sunday. I mean, let’s get some sort of spirit going here…*

When asked whether she felt rejected by many people in the church, she replied: “Not so much rejected, as – let down, not supported.” However, she did receive some support from what Marion described as “…Very good friends, very good spiritual friends…who journeyed along with me for quite a while.”

**Metaphors Marion used to describe depression**

- **Wanting to hide from the pain**
Marion used the following image to describe her depression:
It was like I wanted to go and sit in the corner, and cover myself up, and say, “Let it go away…and when it’s over, I’ll come back into the room (long pause)…”

The researcher’s experience of this description was that it conveyed more powerfully than anything else Marion said the unbearable pain of her depression and her desire to escape it.

**Spirituality versus religiousness**

- **Knowing God versus knowing about God**
  Marion believed that religiousness involved knowing about God:
  
  ...I suppose being religious is – you can go to church, and be part of the devotions and the prayers and Sunday by Sunday worship – adoration – whatever, whatever – but that doesn’t mean you’re a Christian, necessarily.

  In contrast to religiousness she defined spirituality as knowing God:

  Spirituality is more like – having a personal relationship with Jesus. Perhaps – like I've always said, knowing – knowing God, not just knowing about God. That is it, for me – the knowing, and the knowing about. Two different things.

  Illustrating her definitions from her own experience, Marion recalled her first steps on the journey of spirituality:

  ...I came to the knowledge that I wouldn’t know only about Him. I knew about Jesus, and all the stories, and all of those kinds of things, but I didn’t have a personal relationship with Jesus.

- **Lived daily spirituality versus external religious practices**

  Marion seemed to give beliefs an important role in her spirituality, but beliefs for her did not simply mean mental assent to a set of principles, but rather beliefs that were translated into a lived spirituality. Defining spirituality, she stated:

  *Spirituality is – maybe – trying to live out those things which I believe in and are convinced about. Intentionally*
trying to live them out and expressing them in my own personal life, and – expressing them in – a Christ-like life.

She contrasted this with her early experience of religiousness, which involved the observance of outward practices only, without inward understanding:

I knew about Jesus, from the Bible. About all the stories, all of those things were taught to me…actually I never understood a thing…I know we had to learn the “Our Father”, we had to learn the creed off by heart. But you know, actually, real in-depth understanding about it – I think many young people don’t understand it.

A decisive moment seemed to come for her when she moved from this external practice of religion to an experience of Christ which she tried to translate into lived daily experience:

I knew I had to have Jesus in my life – not just on a Sunday in church, to hear the stories, I had to have him in my life every single day.

This lived daily experience seemed to be based on an inward sense of a personal relationship with God. This aspect was clear when Marion related her experience of being called to the priesthood. Describing her response to a reading from Isaiah chapter six, Marion said:

When I read that…I knew with absolute – knowledge – here, in my heart. I knew, as I said it, God was speaking.
I said, “Here I am, Lord. Send me. I will go.” That was scary. I was nervous. But I did say to the Lord, “Send me. I will go.” And I meant it.

- Spirituality breathing new life into religiousness

Marion’s story contained a discourse of spirituality and religiousness as not opposing each other, but complementing each other. As we have seen, she initially experienced religiousness as observing outward practices without life. However, once she experienced spirituality, she did not abandon these outward practices. She continued to observe them, but her spirituality helped her to
observe them with new life and energy. A good example of this was her conviction that she should stay within the structures of the church, but bring new life:

\[ I \text{ said, yes Lord, I hear what you are saying: "Blossom where you are planted. I planted you in this church. Blossom there." } \]

Ingredients of Marion’s spirituality

- Courage versus fear
This was a recurring theme in Marion’s story. Her spirituality began when she read and re-read Psalm 27. The first result seemed to be a movement from fear to courage:

\[ \text{And slowly, slowly it got better and better. I wasn’t so afraid any more, and I wasn’t so nervous…} \]

Soon afterwards, she was asked to lead the Bible Study that was held in her home. At first, she seemed afraid to do it, but eventually she found the courage and ran it successfully. Reflecting on her response when the priest asked her to lead the study, she said:

\[ \text{…the priest came along for a while and he did it, and then he said, “No. I want you to do it”, and I said, “No. I can’t do it.” He said, “Yes. You can….I’ll give you a commentary that you can use.” And that Bible study group went on for ten years.} \]

A similar theme occurred when Marion felt a calling to be a priest. Her first response was one of fear: “That was scary. I was nervous.” But she continued with the process. Her apprehension seemed related to her conception of how weighty a responsibility the priesthood was. She referred to the ordination service for priests:

\[ \text{…it says there, this is a weighty responsibility, not to be taken lightly. I thought, “This is too much for me. I can’t do this thing.” I didn’t feel like I had the knowledge enough to be a priest.} \]

However, encouraged by a mentor priest, who assured her that God was not looking for knowledge, but rather a willingness to obey the calling, she continued.
A few weeks before her ordination, she had a picture in her mind of herself on a cliff, looking down on a valley filled with mist. The picture at first filled her with fear:

I thought, if I step off here, into whatever, I am going to be so enveloped in this mist that I am not going to be me any more.

However, she simultaneously experienced God saying to her:

You can’t see here, at the bottom of this valley, but I want you to step off that cliff, because I am going to be there with you, because I am there.

This experience gave her the courage to continue with ordination. And soon after her ordination, Marion remembered:

And after I was ordained, that – that whole picture disappeared. But it hovered for weeks! It troubled me terribly!

The story of Marion’s conducting of church services showed a similar pattern. At first, she was terrified, but she found the courage to carry on, eventually making a success of it:

Scary stuff, ja. Celebrating mass and the Holy Communion and all of those things. I just found it terrible. It was frightening! ...but it eventually got better – and the preaching was OK – and there were times when my jaw just didn’t want to move… but it was better, because I knew, I’m not standing here alone. In fact, the Holy Spirit is with me. I have no need to be afraid.

The Bible

The role of the Bible in Marion’s spirituality was crucial. The reading and re-reading of Psalm 27 marked the beginning of her spirituality, and the beginning of coping with depression. The following statement by Marion amounted to giving herself cognitive therapy, using the Bible:
...I am going to try to read that (Psalm 27) every day, to make it really a part of me...and slowly it got better and better...

Furthermore, she began to express her spirituality in the church through leading a Bible Study in her home, and it was when reading aloud in church from Isaiah 6 that she experienced God calling her to the priesthood.

- Going to church and singing
Once Marion experienced spirituality, churchgoing took on new meaning, and she particularly enjoyed the singing. Responding to the researcher’s question about how spirituality had helped her deal with depression, she mentioned both:


Spirituality as a means of dealing with depression
There is some overlap here. The following material could also be described as ingredients of Marion’s spirituality:

- Spirituality as a way of coping with life’s challenges
Marion was very emphatic that spirituality had helped her in her struggle against depression:

  I just know – if it wasn’t for my spirituality, I would never have coped with everything that had happened in my life. I would never, never have coped. I would have been either a mental wreck, or an emotional wreck, or – I would have fallen to pieces.

- Trusting in God’s presence
Describing her fear of being ordained as a priest, and how God helped her to overcome that fear, Marion used the metaphor of stepping off a cliff:

  Then I thought, OK, maybe God is saying, “You can’t see here, to the bottom of the valley – but I want you to step off that cliff, because I am going to be with you, because I am there.”
This image communicated very powerfully Marion’s conception of the faith aspect of spirituality, which involved belief and action.

- God carrying her

Marion believed that God had carried her through the long journey of depression:

*I might have felt helpless and hopeless, but I never stopped believing. Whatever the reasons were, God was in it. You know. Like...sometimes you just drift along, but God carries us to the end. You know “footprints in the sand” – remember that? At those times, I believe God just carries you through. Otherwise I wouldn’t have come this far.*

- Spirituality as an anchor giving stability in the midst of depression

Marion, in describing how spirituality had helped her to cope, used the metaphor of spirituality as an anchor:

*But I always had this feeling that in the middle of this (depression) – how can I put it – there was, like, all this storm going on around me – this tossing about, not knowing where and how. But in the middle of that storm was the anchor to which I kept – I maybe was on a line, and I’d go out and there on this line and it’s tossing and turning, and pain, and sorrow, but I know I’m attached to this...*(long pause).*

The image of an anchor in a storm seems to communicate a sense of stability that spirituality imparted to Marion in her struggle against depression.

**A destructive discourse about spirituality**

For Marion, spirituality was not purely a helpful experience. The spiritual belief suggesting that to struggle with depression was unspiritual produced a lot of guilt in her experience. She said:

*...when I was depressed and negative, I had a guilty feeling because – um – I am a child of God, and I say all*
these things and I believe in Him, and I knew He was there, and I still feel this way. So it gave me a bit of a guilty feeling.

And a little later she added:

Ja, because I felt that, maybe, I was letting God down, you know.

My experience in the interview with Marion

I really identified with Marion’s story, because some of it was similar to my own story. I also chose to exercise my spirituality through religious structures; I also experienced disappointment from some church members. I too had found inestimable support from “spiritual friends”. Reading of the Bible had also played a role in my spirituality. My spirituality had helped me in my struggle against depression, and I shared Marion’s experience of guilt, because as a spiritual person, I felt that I should not have had depression. As far as the interview process was concerned, I sensed that there were times in the interview when Marion felt uncomfortable sharing further details, which I respected. I admired the way Marion constantly managed to move from fear to courage. I felt concerned that Marion did not seem to have much of a future story, but glad that she was able to place her uncertain future in God’s hands.

Feedback from Marion

Marion felt that my interpretation of her story was trustworthy. She did say that my reference to her being called to the priesthood was too strong a term. It was more a case of God slowly nudging a very reluctant and anxious Marion in that direction. She also made an observation about “Marion’s story as a whole”, namely that I had not mentioned her becoming a priest, which for her was a vital part of her story. As a result, I then incorporated this information into that section.
SIMON’S STORY AS A WHOLE
Simon grew up in America, and after studying at Seminary, and serving for several years as a pastor in the United States, he decided to become a missionary in Africa, first in Zambia and then in South Africa. His struggle with depression began during his closing years in Zambia, and was related to his perceived experience of rejection and persecution as well as difficulties in working with people of a different culture. His depression continued when he and his family came to South Africa, but in this context seemed more related to the intense demands of missionary work, and his tendency to set his own agenda in coping, instead of allowing God to set a more balanced and healthy agenda in facing incredible stress. His spirituality centred on what he described as friendship with God, and was a major factor in helping him to deal with depression, although he experienced certain attitudes regarding spirituality as unhelpful, such as simplistic solutions regarding depression and worry. At the time of the interview he was still depressed, but looking forward to some much needed furlough.

THEMES EMERGING FROM SIMON’S STORY

Simon’s personal understanding of depression

• Physical and emotional dimensions

Simon seemed to draw from the medical model to describe his experience of depression:
The physiological situation is a depletion of the serotonin in the synapses of the brain. It becomes – it slowly becomes lower, and then, it basically – uh – the transmission emissions in the brain – they’re exhausted.

However, Simon balanced this view by drawing from the societal discourse of the emotional model:

But it also has a clear-cut connection with your personal problems, your life stressors.

He was able, furthermore to articulate a holistic view where physiological and the emotional were seen as connected, with a kind of reciprocal action upon each other. Speaking of these two dimensions, he said:

I understand depression to be a – um – both a physiological and emotional situation…which one’s the cause and which one’s the effect is unclear – perhaps its cycle cause and effect – but they work on each other, though.

Simon’s later behaviour suggested the emotional model was more influential for him: I started taking the medication, but I didn’t find it helping me very much, and I eventually stopped it. I’m very contrary - I know it helps some people.

- Insomnia and restlessness

Insomnia was a very prominent theme in Simon’s description of depression: I was kind of not sleeping – uh –and then I would nod off in meetings.

An example of insomnia and restlessness occurred during a time of terrible stress that was compounded by Simon breaking his foot: Well, I wasn’t sleeping nights. I woke up every night at three o’ clock in the morning. And I would walk around restlessly until the morning…
• Obsessive behaviour
The theme of obsessive behaviour was also prominent in Simon’s story. Describing
his depression at the close of his work in Zambia, he said:

   So it got quite depressing at that point. And it showed in
   me in terms of really obsessive behaviour. These guys
   would write to me, and I would immediately respond to
   the criticism in detail, line by line, and – uh – it was quite
   stressful.

When the depression continued on his arrival in South Africa, the obsessive thinking
continued to be the worst manifestation of his depression. Referring to a difficult time
when he suddenly realized he needed help, he said:

   I would walk around restlessly…with all this stuff on my
   mind that I had experienced during the day. That was the
   worst thing for me – the obsessive thoughts. It was the
   worst symptom I had.

• Irritability and anger
In places in the interview Simon seemed to hint that irritability and anger were part of
the repertoire of emotions making up his experience of depression. For example, in
describing symptoms of his depression experienced as he and his wife adjusted to
the demands of a new appointment in South Africa, he included irritability together
with the symptom of insomnia:

   I was kind of not sleeping…I was getting irritable …

And when referring to some negative responses received from the Christian
community to his depression, he seemed to imply anger was a factor in his
depression. Giving the interviewer an example of an unhelpful response, he spoke
intensely:

   Yeah – uh – it’s illegal for a Christian to be angry. OK.
   And I get angry – I get so seething sometimes! But it’s not
   right for a Christian to get angry!
• Connection versus disconnection

In Zambia, Simon had experienced at first, connection with fellow missionaries, regardless of denomination, which seemed to be linked to the time before he experienced depression. He spoke warmly of that initial connection:

*And I was working…none of the co-workers were with my denomination, but there were a dozen or so American families. They were all missionaries. We got very close to each other. We needed each other! (Laughs). We really needed each other! So, the unity that I think is supposed to characterize the church, but very rarely does, was – was really experienced in that situation.*

However, Simon experienced disconnection with the local church leaders, in that there seemed to be little common ground between him and them:

*It wasn’t a personal issue, it was nothing personal to them. We were just not valuable people, according to them. It was simple. We were enemies. We were always going to be enemies.*

From the researcher’s perspective, it seemed that there may have been cultural and political issues at play here. For example, Simon may have been viewed through a colonialist lens. Nevertheless, whatever the reason, Simon experienced severe disconnection with people that he was trying to reach out to:

*And that was pretty hurtful, because it seemed like, in terms of mission, it was very difficult. It’s easy to recruit people for the church – it’s hard to convert people to be friends of Jesus.*

And it seemed that this disconnection was part of Simon’s depression, because he spoke of the beginning of his depression in this way:

*I suspect that my depression really got going in the closing years of our time in Zambia.*

He then went on to mention aspects of this disconnection: the leaders beginning to control his appointments, rumours being spread about him and his wife, a slaughtered chicken being found on their front garden, and the receipt of many
written criticisms. It was at this time he began to have the obsessive thoughts. He concluded:

So by the time we came down here...we were in pretty bad shape.

By contrast, Simon made more of a connection with his missionary congregation in South Africa. Although his depression continued, because there were many other factors involved, he did feel encouraged by the fruitful connection experienced in South Africa:

I found I was making that kind of connection (as opposed to Zambia) with some of them – not all of them – but a lot more than in Zambia... here I did find genuine Christian influence, and I did feel more part of the Christian family, and that was very encouraging.

- Personal agenda versus God’s agenda

Simon seemed to show great insight. He believed that setting his own personal agenda before God’s agenda was at the heart of his depression. On two occasions in the interviews he referred to this tendency of his. On the first, he went off at a tangent when talking about his spirituality, and said:

I've got my agenda, and I want God to bless my agenda. And I find that for a great deal of the time the things I think are God's will are pretty soon my agenda and I'm asking God to bless my agenda rather than His...

On the second occasion, he linked the question of agendas specifically to his depression:

...because one of the things that causes my depression for me is that I have this agenda of things I gotta get done. I got a million things I gotta get done! I have my agenda, and – and – they gotta get done! I have to work! And, in most cases, ministry isn't like that. If you think that ministry means you gotta push harder and harder, that's when you get depressed.
In theory, then, the solution to Simon’s depression seemed simple: just put God’s agenda first. In practice, Simon seemed to find this very difficult to do, as evidenced by the fact that depression had been his constant companion since 1995 to the present time.

- Depression versus spirituality
The question of agendas is closely linked to the phenomenon that Simon’s depression was inextricably bound up with his spirituality. It was when he placed his own agenda before that of God that he felt depression most severely. Every time he managed to implement what for him was true spirituality, namely, focusing on God and His agenda, the depression receded, only to return when Simon’s own agenda, in response to the innumerable demands, began to push God’s to the side. Then, in a kind of cyclical feedback loop, the depression would reach a point where only spirituality, in the sense of focusing on God’s agenda, could give relief. This pattern can be seen in the following quote:

\[
\text{I think that spirituality and depression are related.}
\]
\[
\text{Depression has forced me, - or – or – pushed me – to get}
\]
\[
\text{closer and closer to God and to rely more on Him.}
\]

Yet Simon’s experience at the time of the interview illustrated how insidiously his own depression-inducing agendas could return:

\[
\text{Right now I’m out of focus (laughs) but the more I can make God central to my life, the more focused I am on Him, the happier I am.}
\]

- Depression as a positive phenomenon versus depression as a negative phenomenon
Simon often experienced depression as a negative phenomenon. He was very troubled, as we have seen, by the obsessive thoughts accompanying depression. He also said:

\[
\text{…I was making it a lot worse, by obsessing over it.}
\]

Moreover, referring to the period from the time he arrived in South Africa to the present, he said:
Since 1996 we’ve had a string of issues, events, that have been emotionally draining.

His body language during the interview, especially the number of sighs when mentioning depression, also indicated that he perceived depression as negative. However, he was emphatic that depression could also be viewed as a positive experience, because it promoted spiritual growth. His most striking expression occurred in the following quote:

I think that there’s a positive connection between spirituality and depression - um - not being able to handle your own problems, and – um – (long pause) – and being willing to get closer and closer to God…It’s the deep times, it’s the hard times that makes somebody thrive.

And adding a thought at the end of the interview, he said:

Yeah – I guess the other thing – I think that people who don’t go through difficulties – real difficulties – probably don’t develop –uh – as much as other people who go through real difficulties. The folks who have really developed in their relationship with the Lord have been those who have responded to stress and depression – who have allowed these to push them in a new direction.

He supported his opinion from the Bible:

So I would say that depression is part of spiritual growth. I would say that people in the Bible teach us that lesson: Elijah on Sinai, and Paul and Timothy, because, whatever that was, he really was stressed out! (Laughs). I find that very comforting.

• Depression linked to childhood influences

Simon felt that his depression could be traced back to his childhood. He had grown up in a family of five children, in which there had been intense sibling rivalry. In particular, he believed that he had been continually competing with his elder brother, who was very gifted and good looking. Simon suggested that this background
explained his tendency to place unrealistic expectations upon himself, which led to depression:

*I was always in the shadow of my brother. He was very gifted, very good looking…I think that that background has had some impact on me – in the sense that I have to drive on to – uh – achieve something spectacular.*

- **Intact boundaries versus broken boundaries**
  In Simon's experience of depression, it seemed that broken boundaries played a role. Speaking about how depression seemed to have sapped his resilience, he attributed this to his allowing people to cross his boundaries, and his inability to put them back in place:

*Part of it has been allowing the boundaries to fall. I've allowed people to batter the boundaries down…I haven't backed people off when I'm feeling down. I've let them prevent myself from ever relaxing.*

**Spirituality versus religiousness**
Simon believed strongly that there was a clear cut difference between spirituality and religiousness. The differences clustered around the following dimensions:

- **Lived spirituality versus static religiousness**
  True spirituality was defined by Simon as something that affected one’s daily life as one prepared for an eternity with God:

*My understanding of spirituality is that- uh – we, as human beings were created with an animal body but with a spirit personality that is eternal and god-like. And that spirituality is the recognition of that god-like, eternal personality and how that is developed and how that, by living close to God, is prepared for an eternity with God.*

Religiousness, on the other hand, involved ritual and sameness:

*It’s quite possible to be religious in terms of taking part in a ritual…that doesn’t particularly change.*
• Relationship versus social habit
Simon spoke of spirituality as “a relationship with the Father”. Contrasted to this was religiousness which was simply a social habit to make one feel better:

You can use religion as a medicine, as magic, to make thing better for yourself – um – or it can be simply a social habit from the family or community

• Animal versus eternal
Simon seemed to divide human experience into two components, animal and eternal. Religiousness involved the animal dimension of our natures, spirituality the eternal:

And I would say that the vast majority of religious people are not really focused on their eternal relationship with the Lord. Their focus is on their animal life here and now.

• Obedience versus manipulation
For Simon, true spirituality involved willing obedience to God:

This is my understanding – my growing understanding of Him, my obedience to Him, my walking in his will.

Opposed to this was religiousness, which was a manipulation of God. Even though Simon rejected religiousness in favour of spirituality, he clearly experienced religiousness in his life:

religiousness is my – very often – my efforts to manipulate God for my benefit. I’ve got my agenda, and I want God, you know, to bless my agenda.

• Friendship with God versus paying one’s dues.
Simon expressed his own spirituality thus:

Spirituality – for me – this is my friendship with God.

Religiousness did not involve this close connection to God, but rather an outward observance in order to win God’s favour:
Religion pays –uh – well, your dues are paid. It’s sort of like an insurance policy for an eternity.

**Negative views regarding spirituality**

Whilst Simon contrasted positive spirituality against negative religiousness, he seemed to encounter the following negative experiences regarding spirituality:

- **Authenticity versus denial**

  The evidence of Simon’s interview indicated that he was a very authentic person. He enjoyed working with young people because he appreciated their authenticity:

  > I went there and they asked me to work with the youth.
  > But I have found I have always liked that age group because they are very responsive. They respond to authenticity.

  Later, when faced with a large number of church meetings, he possessed the congruence to recognize that this was not for him:

  > …a large amount of it was church meetings. And I finally decided that that was just not what I wanted to do.

  He also seemed aware of his gifts and how he wanted to use them:

  > …I wanted to help other people. I've always had this feeling that I was a pastor, a shepherd of God rather than a religious teacher.

  In the light of this authenticity, it can be better understood how frustrated Simon felt when he encountered a spiritual discourse of denial:

  > I think that spirituality – that spiritual answers that these other people give you that you don’t own yourself – are a form of denial. You’re denying what you really feel, you’re denying where you’re really at.

  Simon felt that this unhelpful spiritual attitude made itself apparent in simplistic responses to his depression, such as the following:

  > I have come across – kind of pat – pat answers that I don’t really own….that when I cry, I’m told we don’t worry about this because of such and such…I don’t own that
truth. It's not my truth…and that kind of thinking doesn't help in really dealing with the real problems…

Another example was as follows:

*If someone is worried, telling them not to worry doesn’t help them at all. Maybe you don’t know how to help them but it definitely doesn’t help them to tell them not to worry.*

**Ingredients of spirituality**

- Growth

Growth was a prominent theme in Simon’s story. At first his spirituality, by his own admission, was a bit superficial:

*Well, I think that – uh – very often I saw myself as – uh – working for God, an employee of God, you know. I don’t know how very personal it was at that stage. But, you know, I thought I was a very important member of his team. But very often I didn’t relate to Him. That’s a growing thing.*

And Simon felt he had grown a lot since those early experiences:

*It’s grown a lot more since then. In fact it’s grown a lot in the last ten years.*

Simon attributed this growth to adversity:

**Simon:** In 1997 we opened the Bible School, and that was a very stressful time. And then I broke my foot in four places, and my wife was very sick. And those were important things in my personal relationship with God. Very special.

**Researcher:** What made those things so special?

**Simon:** They were special because I saw how much more I needed the Lord …

At the time of the interview Simon described himself as still a member of God’s team but with the added dimension of a deep, personal relationship:

*I still am – uh – uh – a co-worker with the Lord. A member of the team, and, uh – I’m still working for Him.*
And I feel my relationship with Him is deeper and more personal…

- Prayer as monologue versus prayer as dialogue
  At one point, Simon made this startling statement:
  
  *I don’t pray any more. I talk to God.*

  He explained that he had grown in his understanding of prayer, moving from prayer as a monologue to prayer as a dialogue, where God did most of the talking:

  *Prayer, generally, is a – a – monologue with God – to God – and what is necessary is dialogue with God in which we are mainly silent, and God does the talking.*

- Reading: facts versus a relationship
  The researcher met with Simon in his home. The walls were lined with literally hundreds of books, so the researcher was not surprised to hear Simon say that one of the ways he grew spiritually was through reading. This discipline had also undergone a growth process over the years, moving from an emphasis on facts to an emphasis on Simon’s relationship with God. He said:

  *…as a young man, um – I was interested in the facts, and I filled my library with reference books…I’ve found, as I’ve grown older – the facts – once you’ve mastered most of them – then – what do you do then? As I’ve grown older, I found that the real important thing is your relationship with the Lord. And so now I find that books that were of no value to me when I was twenty five – like books on prayer – are now real helpful.*

- Quality versus quantity
  Simon came to a realization that he could not read everything, so he moved from reading many books to reading a few quality books well:

  *I’ve now found that I can’t read everything, so I go for quality and what will help me in my relationship with the Lord. And some books I now read twice.*
Spirituality as a means of dealing with depression

- Journeying with God versus journeying on one’s own
Simon found his spirituality, in the sense of a close relationship with God, very helpful to him in dealing with adversity, including depression. He expressed this as a sense of God journeying with him through the situation:

*I think that I saw that the Lord was never going to let anything happen that He wouldn’t help us with, and some of it was really tough…but we came through it! And it was we (the Lord and myself) coming through it, not just me.*

- Experience versus theory
Simon felt that experienced spirituality, as opposed to theoretical spirituality, was helpful to him in dealing with depression. Simon emphasized experience as an aspect of his spirituality from an early age:

*I was very active in various portions of the local church. Um – and experiencing, I think, experiencing a reality about God since I was a child. That He did exist. That he loves me.*

And towards the end of the interview he articulated the principle very clearly:

*I think that spirituality is helpful only as you experience it yourself. It only becomes spiritual growth when it’s your own experience with the Lord. I don’t think we can receive this kind of experience second hand from someone else …until you’ve experienced it yourself it remains in the realm of theory.*

- Salvation by faith versus unrealistic expectations
It seemed that one of the main causes in Simon’s depression was the unrealistic expectations placed upon him by others and himself. He articulated it in this way:

*…depressed persons are down on themselves…they are down on themselves because they have… a ridiculous estimation of what they’re supposed to accomplish.*
These unrealistic attitudes set up a vicious circle:

And they’re down on themselves, because the more depressed the less efficient their energy levels. The more depressed I get the less efficient I get – I’m hopeless …and then I get down on myself.

When Simon felt himself in this position, he found his spirituality helpful:

…one of the most important truths of spirituality and depression is that it teaches you you don’t have to be good to earn God’s grace – for me to be worthy of God I don’t have to be good. Salvation is totally by faith – I don’t have to do anything. And that’s the good news a depressed person needs – they don’t need to be anything or do anything.

- Spirituality as a means of externalization

Speaking about the impact of his spirituality on his depression, Simon seemed to imply externalization in the following excerpt:

I think that the other thing that has happened is that as I am able to hand over more and more the problems to the Lord…I am then able to prioritize my week.

**My experience in the interview with Simon**

I was quite concerned about this interview, because I had interacted with Simon before, and experienced him as having a keen intellect and a questioning mind. I had visions of him questioning me about my questions. I need not have worried. He participated enthusiastically in the interview, and seemed to enjoy the process. He gave me quality information, although he did not give as much detail as some of the other participants. I felt deep admiration for him and his wife, in that they had sacrificed so much to become missionaries. I also experienced some concern for him, because he seemed to have so much insight into the causes of his depression, and how to deal with them, but seemed not able to put this into practice. I found what he said about focusing on God’s agenda, rather than his own, helpful in my own busy schedule.
Feedback from Simon

Simon felt that my story of his story was trustworthy. He did feel uncomfortable with my referring to politics and colonialism in regard to his experience in Zambia, believing that the rejection he had experienced there was more due to cultural factors and the lack of previous Christian influence.
MY STORY OF CATHERINE’S STORY: SINGING PRAISES FROM A WHEELCHAIR

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CATHERINE’S STORY AS A WHOLE
Catherine was a person living with disability who had experienced spirituality and depression. She had contracted polio when only a few months old, which left her permanently disabled. Despite her disability, she experienced a happy childhood with parents who treated her ‘normally’. Her depression began when her brother died tragically, and was compounded by her coming to the realisation that the opposite sex, generally, did not find her attractive because of her disability. Since then, depression had been a constant presence in her life. She had coped by means of medication, psychotherapy and spirituality. Catherine had worked at a local hospital, and had then become an influential activist on behalf of people living with disability, with national and international responsibilities. At the time of the interview, she described herself as going through a tough time.

THEMES EMERGING FROM CATHERINE’S STORY

Catherine’s personal understanding of depression
The following themes seemed prominent in Catherine’s personal understanding of depression:

- Medical diagnosis

Catherine resonated with a doctor friend’s opinion that her depression was related to post polio syndrome. Catherine found that this diagnosis assisted her to cope with depression, because she experienced it as helpful to know the cause:
Now, post polio syndrome happens thirty to forty years after you contracted polio...that was the cause of not being able to do what I could do – um – the increasing weight, things like bowels, the atrophy, the – um – body pain or skeletal pain – resulting in depressions...Those were the kinds of things that happened. Once I knew what the cause was, I was able to handle the situation better.

At times Catherine seemed to conceive of her depression purely as an inward condition, related to a chemical imbalance, about which there was nothing much she could do:

And, I mean, if it’s a chemical imbalance, it’s a chemical imbalance. Period. There’s nothing you can do about it. Other than be on the medication.

Related to this was a sense of the doctors as the experts. Relating how her depression seemed to recur every time she was off medication, she described her experience of the doctor thus:

The doctor then, after a considerable evaluation of this, stated that it would be better for me to stay on a mild anti-depressant for the rest of my life.

Later in the interview, when discussing whether her medication had been helpful, she said:

And the doctors have decided it’s best for me to keep on it. Because I do tend to go into the pit. I don’t want to take the medication, but it is better than to try get me out of it.

- Pressures of life

At one point Catherine seemed to contradict this view of depression as simply related to a chemical imbalance, when she referred to the pressures of her life:

Because the pressure I was enduring in my disability, my work – um – my family situation – um – is of such a level that the serotonin levels in my brain were going down too much to be able to cope – um – and produce its own.
Another example occurred in the following quote:

…people do go through depressive states. And very often it’s the environment, or the condition of where you are, at that stage, which causes depression.

- Talking versus medication
In similar vein, Catherine indicated that it was not only medication which had helped her when she replied to the researcher’s question regarding the helpfulness of medication:

I find medication helpful. And I also have a psychologist here in town, that, when things get a bit much for me, I can speak to her.

She also found it helpful to talk to her friends. Describing the way she had dealt with the anger dimension of her depression she said:

I shared it with one or two friends of mine, who were extremely close to me, that this was where I am. And they helped me, in a very non-judgmental way.

- Loss of energy and social withdrawal
Loss of energy levels and social withdrawal were evident in the following description:

…your emotional and psychological way of trying to cope with…even the mundane things of life, becomes a much – such a battle, that sometimes you feel like, I would rather just lie in my bed, and not face the world.

- Suicidal feelings
The theme of suicidal feelings occurred when Catherine was describing how, driving along the side of the road in her battery wheelchair, she was tempted to steer in front of an oncoming vehicle:

…it would be so easy if I could just pull my wheelchair in front of him now, because there’s no ways he can stop it.
• Sad feelings and tearfulness
The theme of sad feelings and tearfulness is perhaps apparent in the following quote:

*I realised one day, when I was saying grace at the table, and I started crying, that here was something – very wrong, Um – and also that I just couldn’t stop crying.*

• Anger
For Catherine, anger was closely related to her depression. She mentioned it a number of times. While her first depression was characterised by sadness, fatigue and withdrawal, her more recent experience at the beginning of 2006 had been marked by anger as well:

*It was a feeling of – I don’t want to get up in the morning. This is just too much for me. I cannot cope with it. And there was also deep anger towards my father…I hated him for what he had done to my mother…after he had Alzheimer’s. I mean, it was not his fault…I was angry about all these things.*

She also experienced anger because of the regression in her body preventing her from doing the little things that make life meaningful, like reading in bed:

*I would always lie and read in my bed, but the regression in my body is such now that I can’t do that anymore. So, I was angry about that.*

Distinguishing this depression from previous depressions, she said:

*I didn’t have that feeling of being in the pit, again. I was more angry and aggressive.*

• Hatred versus love
Hatred seemed closely related to the anger and depression experienced by Catherine. Catherine’s father developed Alzheimer’s and underwent a complete personality change, characterised by physical abuse towards Catherine and her mother, and placing excessive, selfish demands on her mother. This behaviour led to a feeling of hatred:
I hated him for what he had done to my mother. Um – his demands on my mother.

However, this hatred clashed with the love that she felt for her father at the same time:

I felt – heartbroken, and disillusioned with myself that I had so much hatred towards my father – who I loved very much.

This inner fierce contradiction seemed to be a major factor in this experience of depression which she concluded describing in the following way:

And that is why the wheels came off.

- Depression versus spirituality

Catherine’s experience of depression and spirituality was almost cyclical. The depression sometimes pushed spirituality out of focus by clouding her vision. For example, commenting upon the impact of depression upon her spirituality, Catherine said:

Depression takes my focus away – it takes my focus away. Because it, it – it clouds so much of my vision that I can only see the situation. I can’t see more.

However, spirituality did give Catherine a glimmer of hope:

Spirituality…has given me, in the darkness, the glimmer of hope, when I’ve not been able to see. To get me through – that tunnel.

Once through the tunnel, her focus would be right, until depression would cloud her vision again, and the process would repeat itself:

That is where the spirituality impacts again. There’s the sunbeam – the hope that is there.

- Unrealistic demands versus ‘me time’

Catherine’s depression seemed to be related to demands. She referred to two kinds of demands. First, the demands of others, especially with regard to her work for the disabled:
And also with the disability work that I've got to do. Even if I don’t feel like sitting down at the computer...I’ve got go and sit down and do it. I’ve got a responsibility...because I sit on the board of directors of the health and welfare centre. I’ve got to do my responsibility there.

She conceded that these demands prevented her from re-charging her batteries:

I was...like a rat in a cage. I just went round and round and round this wheel. Because I was doing things I had to do. I was doing all my disability work I had to do. But there was no ‘me’ time.

Secondly, Catherine admitted that she placed too many demands upon herself. Aware of what other people expected her to be, she placed excessive demands on herself:

Demands, not only made by others, but demands made by yourself, on yourself. Because you feel you must be what the outside world thinks you should be. Or wants you to be.

It seemed that Catherine was trying to compensate for her disability by becoming the hard-working champion of the cause of people living with disability. However, this led in turn to “others” placing too many demands on her, which she internalised, resulting in her placing unrealistic expectations on herself, which led in turn to depression.

- Family support versus family pressure

Catherine experienced her family as incredibly supportive. During her childhood they had accepted her disability, and more importantly, treated her as “normal”. They had also ensured what they considered the best possible education for her. Her brother also had been very supportive of her. Recalling her brother, she said:

He used to, just help me in a very special way to regain my confidence. And I always knew that – if Mom and them weren’t there, John was there. And he would take care.
She also attributed the support of her family as one of the factors keeping her from committing suicide:

...the quality that your friends or family have in your life at that moment to keep you from doing stupid things.

Paradoxically, the stories of her significant others also placed incredible pressure on her. Her brother’s death sparked her first depression. Her father developed Alzheimer’s, during which he would physically attack Catherine and her mother. Her mother had a heart attack, and developed Parkinson’s. In the following description, which the researcher found quite heart-rending, Catherine described the incredible stress placed upon her by her significant others:

My mother came home and...I had to see to it that she was bathed, she had to be helped to be dressed...And she didn’t talk. She would just stare at me. Um – she was in a very deep depression also. Um – it was a very difficult time. And my father became aggressive. He attacked me on numerous occasions. He was now a completely different person. I mean, I had been his little angel. And, here he was, hitting the daylights out of me. It was a very difficult time.

Little wonder that soon after this Catherine fell into a depression.

• Future story of hope versus future story of hopelessness

Catherine’s future story seemed to be linked to her experience of depression. Sometimes Catherine’s context seemed so stressful that it blotted out her future story:

Because it’s when our eyes go on the stormy seas that we sink. So, when my focus isn’t right, I battle to get through.

However, even when she was depressed, she was able to hold on to a future story, in the form of the sunbeam of hope. Another good example occurred at the time of the interview, when, even though she described herself as going through a tough time, she was able to say:
One of the things that I hope to do in the future – is the connection between the Old and the New testament.

And towards the end of the interview, she was able to give a very positive story of her future:

…it is right that I am here. But I think there is so much of his word that I must still learn. Of His glory. Of His power. Of His just wonderful provision for us. That I must still learn. That I still want to learn. So I think that I’m going to be here for quite some time.

It may be that Catherine’s undoubted resilience was linked to this hopeful future story that she hung on to, even in the darkest moments.

- Rejection versus acceptance
Catherine’s rejection seemed to be bound up with some societal stereotypes. The first was that disability equated to being unattractive:

…my body is not a number ten! It’s completely the opposite of a number ten! Maybe if I looked good, maybe if I was not disabled, I would be – acceptable to the opposite sex.

As a result of this hurtful perception Catherine experienced a great deal of rejection from men. She also pointed out accurately that this perspective was not restricted to men:

…even females, you know, look at you and say, “But, you know, what’s your problem? You are disabled, after all. So – how can you think men will be interested?”

Catherine believed that these perceptions were perpetuated by the media:

…if you look at television, if you look at advertisements, if you look at…brochures that companies give out. Who do you see in those brochures? Well-groomed, respectable men and women. You don’t see – there, the lawyer, or whatever, that sits in a wheelchair.

And later in the interview she linked this view specifically with depression:
...the media is one of the hardest things to counteract if you're in a depressive state. Because you are constantly bombarded with a world of perfection. And we don't live in a perfect world...it's so hard to cope.

The second stereotype which Catherine experienced and that made her feel rejected was the belief that, for a woman, marriage was the norm:

...in my relationship with God I realised that, to be married or to have a relationship with a man was not the be-all and end-all of life.

Juxtaposed to this rejection was the acceptance Catherine received from her parents and her brother:

I was his sister, and he was proud of me. Um – my parents were all proud of me.

Another source of acceptance for Catherine was God:

I can get on God’s lap. And I find comfort.

And last, but possibly not least, she felt acceptance from her pet, a little Chihuahua dog, who was present throughout the interview:

This is my first pet. I would lie in bed, crying. And he would lick my tears...He just takes. He just loves.

- Depression and loss
Depression, in Catherine’s experience, was closely connected with loss. Indeed loss was a constantly recurring theme throughout the interview. For example, her first experience of depression was linked to the growing realization of what she had lost through disability, and the kind of impact her dependency was going to have on the rest of her life:

...when I started analyzing certain aspects of my life, and looking at my life, how my life was leading, to what extent my dependency was there – um – the demands of it all on my life – um – I realized, or – the pressure just got too much to cope with.

Later in the interview she returned to this moment of loss, and as she described her journey of recovery she may almost have been describing grief, although she
believed it was depression. For instance, she described the shock she felt when the realisation of her loss first hit her:

...for the first time I realised that this wasn’t going to change. Disability was going to stay. And this was horrible.

She recalled many times when she had bargained with God:

And then I started on a two year – on a two year walk through the wilderness – with God. I fought with him. I screamed at him. I ignored him. I begged him. I pleaded. I even went so far as bargaining with him.

Later she experienced the acceptance that is often characteristic of grief. As she spoke to God about the situation, she found acceptance:

“I don't want to be disabled. So you've got to help me. But if this is what you want, I'll come to accept it.” And as the years went on, I accepted it.

Later, the loss of her father had contributed to her most recent depression. She also indicated that, because of the slow regression of her condition, life was a constant adjustment to, and acceptance of, a series of losses. For example, referring to the malfunctioning of her hand, she said:

Um – I might have to accept that my hand's not going to work again. And with disability, with every stage of regression, you've got to accept again – and again. And before that acceptance comes, you go through a stage of battle – of inward struggle.

Catherine’s experience suggested that loss was as significant a factor in depression as in grief.

- Depression as positive versus depression as negative

Catherine seemed quite ambivalent about this alternative discourse. At one amusing moment in the interview, the following exchange occurred:

**Researcher**: So it sounds like depression has been a companion of yours since your early twenties.

**Catherine**: Oo, companion! (Laugh together).
Researcher: More like an enemy, probably? How would you describe it?

Catherine: Definitely not a companion! And I don’t think an enemy, either. I think that it’s just been a condition that I’ve had to accept.

In this extract, Catherine does not seem to view depression in a positive light at all. However, towards the end of the interview, Catherine seemed to find a positive role for all the adversity she had experienced, including depression:

…if we go to nature, the best way for any plant to grow, is if you’ve pruned it. And if I look back on my life…the times I’ve grown the most is when I’ve been through the mill.

She also indicated that all her adversity, including depression, had been used by God to help her to grow spiritually:

…God has given me – in cutting away those big vines that have not been bearing fruit for him…I’ve been able to – to grow the most, spiritually. And even in taking away more of my physical abilities, it has helped me.

Metaphors Catherine used to describe depression

Catherine used the following imagery to describe depression:

- A battle from which she wanted to escape

Explaining her understanding of depression, Catherine said:

One of the things is, your emotional and psychological way of trying to cope with merely even the mundane things of life, becomes a much – such a battle…I would rather just lie on my bed and cover my head, and not face the world.

The image conveys a sense of struggle, but against an enemy that is external.

- Depression as a dark pit

Again, elaborating on a definition of depression, Catherine compared it to a pit:
It’s very dark. It is a pit, where the top of the pit is just out of your finger’s reach.

When referring to the doctor’s prescription of medication, she explained it thus:

…it’s best for me to keep on it. Because I do tend to go into the pit.

This image communicates powerfully how horribly she experienced depression (darkness) and how trapped she felt by it (stuck in a pit with no escape).

- **Sneaky depression**

  Catherine, while explaining that she experienced depression as a slow process, used the following picture:

  You know, I find it difficult to give a timeline to depression. Um – because it is something that sneaks up on you, without you realising it.

- **Engulfing depression**

  In the same explanation, Catherine explained that once the depression had sneaked up on her, it tended to take total control:

  It’s a slow process, and it starts engulfing you.

  ‘Engulf’ has connotations of being immersed or swallowed up. This vivid picture communicated far more powerfully than non-figurative language the way depression overwhelmed Catherine.

- **Enveloping depression**

  Describing her first depression, Catherine said:

  And this feeling of being not able to cope even emotionally, started enveloping me.

  This image conveys the idea of being wrapped up, or enclosed in something, and therefore articulates something of the claustrophobic, trapped feeling that depression gave Catherine.
Depression as a forest

When Catherine was relating her realization that disability was a permanent part of her life and that the doctor’s could do nothing for her, she described how she prayed:

…I can’t find the way. Here is just a blur. It’s a forest where there’s no path.

Being lost in a forest gives a sense of confusion, fear, no direction.

Depression as a cloud

Catherine compared depression to a cloud that was obscuring her vision on three occasions. The best example was perhaps the following, which occurred when Catherine was explaining the impact of depression on her spirituality:

…it clouds so much of my vision that I can only see the situation. I can’t see more.

Clouded vision implies an inability to see other perspectives, or perhaps a spiritual blindness, since Catherine was talking in the context of spirituality.

Spirituality versus religiousness

Catherine believed firmly that these were two very different phenomena. The differences can be summarised under the following dimensions:

Relationship versus rituals

Catherine felt that her spirituality involved a personal relationship with God:

I understand spirituality – um – with significance to the Christian faith, of a relationship with the Father, Son and Holy Spirit.

This relationship involved all of her being:

…your heart is filled, your soul is filled, your body is filled, your mind is filled um – with the relationship with God the Father, God the Son and God the Holy Spirit.

It was also a very personal experience for her, as she explained in this striking illustration:

And I go to God my Father, and I say, “I don’t want to speak. I want to get on your lap and I want to put my
head against your chest, and I want you just to hold me.”
And I promise you, I can feel his arms around me.

She contrasted this with religiousness, which she defined in the following way:

Religiousness is an act. It’s a – uh – it is the complete opposite of a relationship. It is doing things. It’s an automatic doing things. I go to church. I go to the synagogue. I go to the mosque. I go kneel before Buddha.

In this quote she seems to be equating religiousness with outward rituals.

• Loving relationship versus fear

Spirituality was described by Catherine as a love relationship with God, which contrasted to religiousness that was based on fear. The contrast is very clear in the following quote:

...religiousness is based on fear, and a must do.

Spirituality is a relationship. It is a love relationship.

• Loving relationship versus observing the script

The fact that spirituality as a loving relationship with God was very important became clear through the many times that she mentioned it. She mentioned it again when she developed her definition of religiousness as observing a script:

There’s a script. And you do the script. You write the drama. You are playing the part of – whatever is there.

On the other hand, spirituality was a love relationship involving one’s whole being:

Spirituality is a love relationship. Um – your whole heart…I want to let the Father’s face smile on me.

• Lived spirituality versus practised religion

Catherine drew on a discourse that conceived of spirituality involving the whole of life, instead of something practised in an outward manner, just going through the motions. The contrast can be clearly seen in the following extract:

Jesus is our husband. What we do, in the – in the – as man and woman, we want to please the one whom we
have fallen in love with. And to do nice things to be a partner. And to share. And to love. Now God shares with us, through the Scriptures. And we share by studying, by living, by being his witnesses...that’s the difference I see. The one is playing a part...that – you’re not loving. You’re doing it because you’re doing it.

Catherine’s story indeed demonstrated that her spirituality was something affecting the whole of her life. She constantly spoke to God about her disability, for instance:

Saying to Him that, He can take my legs away, but He must give me my arms.

Another example occurred as she sought for purpose and meaning in the midst of her disability:

And I said to God, fine. If this is what you want for me… Then you must show me how to live.

She also experienced God constantly at work in her life, preparing her and guiding her:

And it was ten years before I came into the disability sector. Which I believe God was – was maturing me, in my disability.

**The ingredients of Catherine’s spirituality**

- Prayer as constant communication with God

Catherine found prayer in the form of continuous communication helpful to her in her spirituality. She shared:

Um – you know, there are...very few set times, but there is more continuous prayer. One of the nicest times that I pray is when I take my dog for a walk. I – I do a lot of praying then. And also when I’m riding in my wheelchair to go and shop, or go to the hospital...I’m always talking to God in that time. There is a continuous communication.
- **Bible reading**  
  Catherine referred constantly to the Bible in her story. For example, as indicated earlier, when she had felt suicidal, it was reading the Bible (Philippians, chapter one) that convinced her that God wanted her to live so that she could fulfil a task for Him. Bible Study was one of the things linked to a hopeful future story:

  
  *One of the things I want to do in the future – is the connection between the Old and the New Testament…*

  The biblical image of the rainbow had helped her in her struggles:

  *Um – I’ve got a deep passion for the rainbow, and every time I see it, I just rejoice at this rainbow. Because it just declares physically, I will never leave you. I will never leave you in harm’s way.*

  The Bible also assisted her in grasping that it was not “abnormal” for a Christian to suffer from depression:

  *…I had come to the realization that this (depression) is not sin…we don’t live in an airy-fairy world. We live in a world of reality. I mean, look at Jeremiah! I mean, poor Jeremiah! (Laughs). And even Peter, when he had denied Christ three times, I think his world was shattered.*

  She believed that God had given a depressed Elijah sleep therapy:

  *I don’t believe it’s (depression) a sin. Elijah also had the depths of depression – um – but, I mean, God didn’t strike him dead because of that. In fact, God gave him sleep therapy…*

- **Visualisation**  
  Catherine indicated that this type of exercise helped her in her spirituality, and in her struggle against disability and depression:

  *It’s a personal thing. Let me tell you what I often do. When my life becomes just too hard for me to cope with, I close my eyes and I visualise myself. And I go to God my Father, and I say, “I don’t want to speak. I want to get on your lap, and I want to put my head against your chest,*
and I want you just to hold me.” And I promise you, I can feel His arms around me. I can feel Him holding me, and a quiet stillness starts enveloping me. And eventually I’ll say, ‘Ok, I can walk now. I’ll get down. It’s fine’.

Harmful effects of spirituality on depression

- Depression as sin

At the beginning of her struggle with depression, Catherine experienced perceptions of spirituality and depression that seemed to add to her suffering. This perception suggested that a person possessing spirituality should not experience depression, and if they did, it was a sin:

> In the beginning. When I felt, this was wrong of me to be depressed. That it was a sin. That it was – having Christ as my Saviour, what on earth was the problem with me going into these bouts of depression?

Interpreting her depression through this lens was upsetting for Catherine:

> I thought I was wrong. Was I really a Christian? Was I really a true believer? Did I really have a relationship with God?

- Simplistic responses

Catherine also found the response of some Christians unhelpful in that they offered simplistic solutions. For example, Catherine recalled one such solution as follows:

> Christians can sometimes be your worst enemies too, which is terrible to say, but it is. Um – because people often say, “Just leave it with the Lord, and really walk out in faith, and you’ll do it.”

She found that this type of solution intensified her struggle:

> And this was, was – a huge struggle with me, because I questioned my faith. I questioned my relationship. I questioned everything about – um – even about God.

Catherine suggested Christians use alternative responses in their attempts to help those people who are spiritual and who also suffer from depression. For example,
she believed that it would be more helpful to listen, instead of offering simplistic, unrealistic solutions:

And I’ve learnt, through books that I’ve read – um – that you must rather let that person speak. Listen to him.

She felt that it was better not to give advice to a Christian struggling with depression:

And be slow to advise, because you haven’t got an idea.
You just don’t understand, unless you’ve been through it.

She offered an alternative response that the researcher found resonated with his own experience:

Isn’t it better just to hug that person, and to sit and cry with that person.

Spirituality as a means of dealing with depression

• Purpose versus purposelessness

As Catherine wrestled to come to terms with her disability and the seeming purposelessness of it in her early twenties, she began listening to Joni Earekson’s book that was being read on the radio. Joni Earekson was a Christian paraplegic who had written a book detailing her triumph over adversity. Listening to Joni’s story proved to be a turning point in Catherine’s life. She felt God used this experience to give purpose to her life:

And God used her, tens of thousands of miles away, to make me realise that He had a purpose for my life.

Soon afterwards, inspired by Joni’s story, she decided that God’s purpose for her was to help people living with disability. She articulated this seminal moment to a newspaper reporter soon afterwards in the following way:

…he said to me, “How do you cope?” And I looked at him in the face, and I said: “God had a purpose in making me disabled.”

Her belief that everything happened for a purpose sustained her even when she couldn’t feel God’s presence:

And that is, basically, how I have found God throughout my life. In times when I have thought he has not been there, He has been there. Um – and His promise,
throughout Scripture, has become real to me. His promises that that all things happen for a purpose is real. It’s real.

- Hope versus hopelessness
As Catherine struggled against depression, she admitted that there were times when she felt hopeless. She described one experience of depression in this way:

Um – I find it is a time when you are so vulnerable – um – in all sectors of your life, that you cannot cope. And in actual fact, it’s nearly a case of, if there’s hope, where on earth is it?

However, hope never deserted her completely. Even in the darkest times, spirituality provided a glimmer a hope:

I think spirituality is the one thing that has – given me, in the darkness, the glimmer of hope, when I’ve not been able to see. To get me through – that tunnel. Or in the pit to show me that there’s light above, there is hope.

Her hope seemed to be connected to God’s presence, support and strength in these dark times:

My hope is there in that, God is holding my hand through this, and he’s pulling me through this one. Not pulling me through, He’s dragging me through! (Both laugh). It is hope.

- Triumph versus adversity
This theme seemed prominent in every segment of Catherine’s story. She experienced the tragedy of polio as a child, but blessed by supportive parents and family, who treated her ‘normally’ and empowered by education at a school for special needs, she triumphed over adversity. When it came to seeking employment, she experienced the adversity of rejection as opportunity after opportunity was denied her because of her disability. However, she persevered, and eventually was given a highly responsible job. She experienced the adversity of rejection by men because of her disability, but eventually triumphed in that she came to live a rich, full
life as a single person. Her father developed Alzheimer’s and her mother had a heart attack and experienced Parkinson’s disease. Her brother was tragically killed. She experienced constant bouts of depression. She had to cope with sudden regressions in her condition. Yet she somehow triumphed. Eventually, for health reasons, she had to resign her job, but triumphed by then becoming an influential and highly sought after activist on behalf of people living with disability. Catherine attributed her triumphing in adversity to her spirituality, particularly to her belief that God somehow brings good out of evil. For example, commenting on her brother’s death, she believed the experience had been used by God to bring her closer to Him:

I wasn’t depending on God. There was – God had supplied someone else, you see. So – but – I’m not saying God took John away in an evil sense…We’ll only know in eternity.

Speaking about her disability in general, she felt God had brought triumph from her adversity because her disability opened up all sorts of doors for her:

You know, I can rejoice in my position. I mean, why not? I can talk about God freely. It’s lovely.

Perhaps the following comment, made as she was sharing the comfort she experienced as she gazed at two rainbows joined together, summed up her whole life:

Um – I felt God just saying to me, “Through all this, I’ve been looking after you.”

• Meaning versus meaninglessness

Spirituality helped Catherine to find meaning in situations that often seemed meaningless. After experience of suicidal ideation, she rushed home and began paging through her bible to find some explanation for what had happened. She eventually identified with Paul’s experience in Philippians:

I did find the answer in Philippians, where it says to you…

it would be much better to be with you, Lord, but it’s not for now. It is now that I must be here, rather.

Catherine seems to be saying that her spirituality gave her a sense of meaning in
the midst of depression, because of the assurance that God had a task for her to do. Her spirituality also enabled Catherine to find meaning in her disability. She felt that without her disability, God would not have been able to use her:

*Um – and that has been one of the certainties in my life.
Um – that God can use me more, being disabled, than He could ever have used me if I had not been disabled. Because it’s a bigger miracle, it’s a daily miracle – to sit in a wheelchair and smile, than to be on your feet...And this is how I see my disability, and God’s will in my life as a person...I have been able to glorify Him and to praise Him, in my disability.*

She found meaning also in the thought that her disability had deepened her spirituality:

*I would rather be disabled, and know God, than not bedisabled, and not know Him.*

- **Spirituality as a means of externalization**

Catherine seemed to express the externalization of depression as being of assistance to her. She externalized the depression, first, by means of writing down her feelings in the form of prayers:

*I wrote what I felt – um – a lot of it was also – in that I would write my prayers.*

Secondly, she seemed to externalize her feelings by talking to God:

*...I spoke to God, and said, ‘I know this is not right. But I can't help what I'm feeling.*

Thirdly, her spirituality seemed to function as a means of externalization in that she was able to separate herself from her problems by handing them over to God:

*What’s going to happen when Mom’s gone? Financially? I’ve got no idea! But that’s God’s problem. Not mine. I'm his child. He’s got to sort it out.*

- **God fighting the battle of depression on her behalf**

Sometimes Catherine conceptualised her struggles with depression as a battle:
My understanding of depression is...even the mundane things of life become...such a battle.

Her spirituality helped her to cope, in that she envisaged God fighting the battle on her behalf:

...in my times of depression, in my times of battle, I can take him with me, because He's going to be in battle for me. He's going to battle with the enemy, I'm just there.

• Openness to other traditions
Catherine grew up within a particular denominational context. However, once she embraced spirituality, it seemed that a part of this was openness to other traditions, and the ability to extract from those traditions practices that worked for her. For example, she reached a point where she felt that the denomination she was born into was no longer helpful to her in her context, so she joined a denomination that she found did meet her spiritual needs:

Um – and then a couple of years ago, I left there, because I wasn't getting the food I needed. And I came to the -------- church.

Later, she came to the conviction that she needed to be baptised, that this experience would strengthen her spirituality in her situation. Christian theologians might have objected, saying it was inappropriate to be baptised a second time. This aspect was not Catherine's concern. She did what worked for her:

And I was baptised...by a friend of mine. It was a three year process...and I just felt it was between me and God. That's what God wanted for me, and that's final.

Other themes
• Psychotherapy versus spirituality
Catherine articulated an opinion that recognition of her spirituality was important to her in the process of psychotherapy. Speaking about her needs in psychotherapy, she commented:
And I’ve just not found it possible to give – meaningful, substantial and lasting answers, if you have not given it a scriptural faith.

She also said:

I want freedom to be able to base my cure – my healing – I want that freedom to be able to do that (use her spirituality). Because I don’t want the psychologist then to tell me…you can’t always believe in those things.

Moreover, she felt that a good psychotherapist should be able to utilize her spirituality in the therapeutic process:

I need that freedom to be able to express, or to have that hope of spirituality expressed to me. And I don’t think you can be a good psychologist if you haven’t got that.

My experience in the interview with Catherine

I was deeply moved by Catherine’s story. I felt encouraged by her faith and resilience in the midst of adversity that was beyond my experience. Reflecting on the interview just afterwards, as I left, I felt that her experience reminded me of Viktor Frankl’s belief that being called to a task in the midst of suffering restored meaning. It was very easy to listen to Catherine, and I really forgot myself and the purpose of the interview as I was caught up in her story. I was very touched that she asked me to cover up her dog, and enjoyed that moment of the interview.

Feedback from Catherine

Catherine commented that, on the whole, my story of her story was trustworthy. She added that I needed to emphasize that her polio had resulted in quadriplegia. She also wasn’t sure that I had communicated effectively just how traumatic the loss of her brother had been. She confirmed the importance of the Bible in her story, sharing that she had just bought a copy of the audio Bible that she was listening to at night before falling asleep. She gave me a few references on post polio syndrome. She said at the end of my reading my interpretations to her:

Wow! Did I say things like that. It sounds so wise and profound. I feel embarrassed.
She also commented that she had “a profound view” that God had been with us in the original interview. She requested a copy of my story of her story. Before I left, she offered to pray for me, because she sensed that I was stressed about getting the thesis ready for submission. I accepted her offer and was moved and helped by her prayer for me.
RAJESH’S STORY AS A WHOLE
Rajesh was brought up in KwaZulu Natal by a very religious family. He described the family as close and supportive. After his matriculation, he began work for a construction company, and then was employed by a government department. Working for the construction company, he boarded with a family whose daughter was very good to him, doing his washing, making him meals and so on. Eventually this led to marriage and the birth of a son and daughter. Rajesh’s depression was strongly related to his falling in love with another woman whom he initially befriended at work. This experience plunged his life into confusion because a lot of people became involved: both his and his wife’s extended families and his children, whom he described as affected negatively by Rajesh being pulled in so many different directions. He was then faced with agonising choices regarding the future, which led to severe depression. Rajesh’s spirituality had received a solid foundation in the Hindu practices of his family. In the midst of his anguish during the experience of being married, but being in love with someone else, he had sometimes lost his spirituality, but at the time of the interview he declared that he had re-embarked on the journey of spirituality some six months earlier, and this was helping him find direction. At the time of the interview he described himself as still depressed.
THEMES EMERGING FROM RAJESH’S STORY

Rajesh’s personal understanding of depression

The following seemed prominent in Rajesh’s personal understanding of depression:

- Suicidal feelings

Rajesh described his depression as leading to suicidal feelings, which he expressed by driving recklessly in his car:

  And sometimes I would just, like – you know – test – you know – just test, and I would speed, hoping for something to happen, you know.

- Insomnia, fatigue and anti-social feelings

Rajesh experienced sad feelings, insomnia and fatigue:

  But then I was having problems sleeping, and, you know…I was just depressed, you know. I didn’t have that energy anymore.

He also mentioned that he battled to concentrate at work:

  It affected my production. I can’t concentrate. It was always, thinking about this, thinking about money, thinking about that.

He also displayed withdrawal that affected social and occupational functioning:

  And I became quiet, I became, you know – uh – you know, unsociable to people and stuff like that

- Mood swings

Mood swings are usually associated with bipolar disorder. However, Rajesh placed these in the context of his depression. When describing the story of his depression, he said:

  But then I was having problems sleeping and, you know, uh – mood swings.

- Psychosomatic symptoms

Rajesh included psychosomatic symptoms in his description of depression:
I would also suffer from headaches, migraines. You know, just too much of stress. My shoulders would pain.

- Not being able to cope with daily life
Rajesh articulated a view that everybody, at some time or another, has ‘normal’ depression, in the sense of a difficult time:

I mean, everyday in life, everybody, there’s not a person here that’s not having a tough time…

However, when it reached a level where someone cannot cope with daily life, then it could be described as depression:

...in a broad sense, depression is not being able to cope with daily life...depression gets to that stage where someone really can’t cope with it.

- Anger and frustration
Anger and frustration seemed to be a part of Rajesh’s discourse of depression. He recalled his behaviour during the depression:

And then I would snap...you know – frustration, and swear and things like that, you know, if somebody just…
(Pause).

- Depression as loss of identity
Rajesh seemed to link the inability to cope with a feeling that depression was threatening his very identity as a person:

…depression then gets to that stage where somebody really can’t cope with it. Where it’s really taking away their values, their happiness, their being – to be a person.

- Depression as a feeling of being trapped
Rajesh’s feeling of being trapped was linked to his relationships. He seemed genuinely to want to make his marriage work. However, he was clearly in love with another woman with whom he had found a connection. He wanted to stay in the marriage because of his children and a sense of responsibility to them. He felt
pressures also from his extended family that propagated a belief declaring that, in their particular religious and cultural context, marriage and a family was the only option: divorce was inappropriate. The following statement from Rajesh encapsulates quite dramatically this feeling of entrapment:

And she’s phoning me, this girl is phoning me. And my wife is phoning me. She’s crying. And my wife is crying. And the kids are crying. My family’s calling me…You don’t know what to do.

The financial burdens incurred by trying to please everybody in this dilemma added to the feeling of entrapment:

And then it comes month end, there’s accounts to be paid. There’s things to be paid. You don’t have the money. You don’t know who to pay, who not to pay.

• Connection versus disconnection versus commitment

The depression of Rajesh seemed to be related to his need to connect with somebody at a deep level. He indicated that there was very little connection between him and his father:

…we never really had a very open relationship with my Dad, in the sense where I could just go talk to him about anything.

Moreover, there seemed little connection between him and his wife. It was almost as though he got married because he was expected to do so. He described their courtship in this way:

You know, I mean, we – I went out there, I started working, and then I met her and then we just got married. We never really courted, or dated, or anything like that.

Describing the history of the marriage, he stated:

…we never really, you know, planned things together, talked, or understood each other, or anything of that sort.

At one stage, summarising the marriage, he emphasized the disconnection between them:
We had our fair share of problems, but, I guess, you know, I never really connected with her…

On the other hand, he had felt a strong connection with the other person. Initially the relationship was a friendship, but the connection was there from the beginning:

We just became very close friends…and so we just used to talk. We would talk a lot.

He contrasted this with the lack of connection with his wife:

I guess it’s what I lacked at home, in the sense of, company and – uh – talking, and – you know – someone to share your daily story with.

The relationship with the other person eventually evolved into a close, caring relationship:

And then eventually it evolved into something much – more than that…we – we – we really started deeply caring for each other.

Later in the interview he stated:

And – uh – I just really connected to her in a way that I never really connected to anybody.

What complicated Rajesh’s life even more at this stage was his conviction that marriage was a commitment. He explained his predicament in the following words:

You know, marriage is a commitment. It’s a – you know – you work towards it. And especially if you got kids involved, you know, they are innocent…Even if you wanna be happy, you know, your kids. Several times I was nearly divorced….everybody told me the same thing. You know, maybe you can get divorced, and maybe it’s the right thing, but – when your kids and your family and yourself, it’s a totally different picture.

Rajesh was facing a classic no-win situation: to leave and marry the person with whom he connected was made impossible because of his belief in commitment to his wife and children. He seemed to go to great lengths to preserve this commitment, even relocating to another town. In practice, the commitment was proving to be more
difficult. In a way, understandably, he found himself phoning the only person with whom he had ever really connected in his life, for support and comfort:

*It's very ironic, the same thing that put me in this problem is sort of helping me, because I've got her to talk to...I phone her and she listens to me, and I talk to her, and she's got a problem, she phones me.*

- Normative discourses linked to depression
Rajesh seemed to be subject to a normative belief system that considered staying in a marriage as the only possible option. In the foregoing section it appeared that divorce was simply not an option, because of his marital status and the children. Towards the end of the interview he summed up the influence of this belief over his life. Even though he was happy in his relationship with the other woman, a long term relationship with her was not an option. He put it this way:

*And I say, although I was doing wrong, I was happy. You know, my life was happy...But then I sit back and think, this is not who I am. I wasn't brought up that way. I've got kids. I've got a wife. You know what I mean.*

He seemed to feel that divorce was not an option especially because of the children:

*But – uh – just like my Dad, I love my kids, you know. They're my life. My kids...I was torn between my kids and – her.*

- Spirituality versus depression
There seemed to be a reciprocal relationship between spirituality and depression in Rajesh's experience. Depression, for example, was related to Rajesh losing spirituality. When asked about the impact of spirituality upon his depression, he replied:

*...Could I put it the other way? “What was the impact of my depression on the spirituality?” I lost faith. In those two years. I just lost faith, you know.*
However, although he described himself as depressed at the time of the interview, he seemed to be saying that the depression had eventually driven him back to spirituality:

…but being depressed, you know, losing faith at that time, you know, I was losing faith, and I said, “There are so many things going wrong with my life,” you know what I mean. Not realizing it’s my own fault. Not realising maybe that if I ask for help I’ll maybe get it…But now, coming back, and that one chapter of my life is sort of closed, although I’m still in a state of depression… But I’m going the route of spirituality, so it’s – it’s guiding me and it’s a guidance thing. It’s somewhere to start.

Spirituality was a crucial element in his experience of depression. Indeed, his depression seemed impossible for him to fully understand without it.

• Depression as a negative phenomenon versus depression as positive

Sometimes Rajesh experienced depression as negative. He described it in this way:

But it [depression] really became a problem after the first year when myself and her were together, and I started getting into financial problems.

As noted earlier, he would sometimes experience suicidal feelings:

And sometimes I would just want to, hey, end it all.

Elsewhere he described depression as a painful experience:

But I’m stuck with the problem, now…And that’s where depression comes in. The depression is, also – is you know – also not being with her now – that heartbreak.

However, Rajesh did not conceive of depression as only negative. He seemed to be saying that depression and the hardships that had led to it, had been a means of growth and learning for him:

And it’s through our hardships that makes us a better person…and it’s through my hardship that it made me stronger, made me a better person. Made me learn a lot of things.
Future story versus no future story
At the end of the interview, Rajesh shared this quite positive future story, in response to a question whether he thought he would win the struggle against depression:

Yeah. I definitely think that I will. I’m getting there slowly…The financial, you know, eventually, you know, it will come right…It’s going to be a few years, but I will eventually get there.

Spirituality versus religiousness

Inherited religiousness versus lived religion
Rajesh had been brought up in the context of a staunch Hindu background. Referring to this, he said:

I come from a very staunch background – with – uh – my Dad and Mum. They’re very faith orientated, and – um – yes. So we were born and brought up that way, and – following their way of faith and stuff.

When asked to differentiate between spirituality and religiousness, he described religiousness as something that was inherited by birth:

You know, I can say I’m a Hindu because I was born one, that’s by birth, but I cannot be practising anything of Hinduism.

In contrast, he described spirituality as something that one believed in to the extent that it affected one’s daily life:

I think that spirituality is…something to believe in – faith – I mean there’s someone up there above us, guiding us, protecting us, and – it gives you a direction in life.

He expanded on this idea later, emphasizing that spirituality needed to be implemented in daily practice:

I mean, you could be a Hindu, a Moslem, a Tamil. That’s your religion. But spirituality is more focussed on – sort of – uh – God’s work or the goodness of it, or practising – uh – good faith.
Rajesh, however, did not view religiousness and spirituality as entirely opposed to each other. He stated,

*I think to a certain extent they’re connected.*

His experience demonstrated this opinion. He lost spirituality for a while, and abandoned Hindu practices. When he rediscovered spirituality, he returned to the Hindu practices, but observed them with new insight, life and enthusiasm. He described his experience of forgetting his faith in this way:

…you leave home and…you sort of forget your faith and you forget to go to church or the temple, as we call it.

However, recently he had returned to spirituality:

*But…now after the case of these past two years that I have been, and I am still in a very bad patch in my life, I am turning more and more to my spirituality, and, and – trying to connect more to – to that.*

Returning to spirituality involved going to the temple, observing Hindu prayers in the home, fasting, offering thanksgivings, giving to charity, but the ceremonies seemed to be imbued with new meaning:

*I think that spirituality’s my main focus now – is, is – prayers and…through prayers you eventually unite your family and…through that, spirituality’s our central – I mean. We say to ourselves that maybe through our prayers we will get through this, and through God’s guidance…and – you know – having that faith.*

• **Inward spirituality versus outer religiousness**

A major difference in Rajesh’s understanding of these phenomena was that religiousness involved external observance, whereas spirituality was an inward experience. Referring to his religious upbringing, he said:

*We always went to the Temple, and, and – we followed the holy days and stuff like that.*

He later commented on this kind of observance:
I always feel that it doesn’t help to go to that church and pray, when you’re not doing it in your heart.

At the beginning of the interview, when asked to define spirituality, he remarked:

And it’s also inner, you know. It’s an inner peace.

His current spiritual journey was an inward practice:

So, I mean, everyday, I do thank God or pray in my mind, and thank the Lord for being here and keeping me safe, and, you know, helping me.

**Ingredients of Rajesh’s spirituality**

- **Prayer**

  Rajesh seemed to practise prayer as continuous communication with God:

  …everyday, I do thank God, or pray in my mind…

  However, he also found set times of prayer around ‘the lamp’ helpful. The lamp was placed in the ‘house temple’ or prayer room, a room set apart in the house for prayer. When the lamp was lit, it would symbolise God’s presence, taking away the evil:

  Normally we light the lamp. It sort of brightens up the house and, you know, should take away all the evil.

  He would sometimes pray at the lamp on his own, but usually this was a family activity:

  At the lamp, my wife and I pray together. With the kids.

  Sometimes prayer would also involve the extended family:

  Cause normally, when we have prayers, we normally have it together at my Dad’s place.

- **Fasting**

  Fasting seemed a prominent discipline in Rajesh’s spirituality. He would fast every Tuesday by not eating meat, only vegetables:

  We…must fast on Tuesdays. There’s no meat on Tuesdays. Just vegetables.

  Sometimes he would practise a dry fast, which would involve not drinking water from six to six.
• Offering
This practice, which involved offering fruits and vegetables to God, seemed to benefit Rajesh. He said:

*Like down in Natal, we have got a big temple there. We always go there, and we offer fruits and stuff like that. Just to…make me strong.*

Offering fruit and vegetables seemed to be related to thanksgiving and forgiveness. Rajesh expressed it in this way:

*Offering fruits is sort of like, for forgiveness. You’re not actually paying for it…you bless it.*

After blessing the produce, either at the temple or at home, Rajesh and his family would eat the food together as a kind of thanksgiving:

*We offer it to the Lord and we say, “Please, you know, thank you for the food you have given us, and thank you for protecting us, and so on.”*

• Observing special days
Observing special days in the Hindu calendar seemed important to Rajesh. He was celebrating the birth of Lord Krishna on the day of the interview:

*And, like, today is one of our very auspicious days, Krishna Hasnee, the birth of our Lord Krishna. And so, we actually offered some fruits…this morning.*

• A vow
At a crucial point in his story, having made the decision to remain committed to his marriage, and seeking a job out of Natal to help him make a break with the past, Rajesh took a vow.

*But then you know, I – uh – came for this job interview…and I went to Ashram, and I took a vow with my Mom and Dad. You know, in Hinduism we go take a vow. And I said, “Please, if I can at least get this job here, then it will be a new beginning for me”.*
Spirituality as a means of dealing with depression

- Spirituality as a way of connecting

As indicated earlier, disconnection had been a major problem for Rajesh and his wife, and was indirectly related to his depression, as he struggled between the connection to the other person and the disconnection with his wife. Spirituality was helpful to him in that it provided a dimension where he could connect with his wife and family:

  But ja, I’m coming back to that [spirituality] now. But it really did help me. I think, you know, having faith in something, and prayers, brought me and my wife back. And the family. At least that’s one place where we can connect.

Later he elaborated:

  That’s the one place where we can really connect, you know what I mean. And she feels a bit secure, and feels a bit better, if I attend these things with her, and if we pray together. It gives her that guarantee that I’m trying.

- Spirituality as direction

Spirituality as a means of direction in the midst of depression and hardship was a central theme in Rajesh’s story. When asked to share his understanding of spirituality, he used the word “direction” three times:

  I think that spirituality is…something to believe in – faith – I mean that there’s someone up there above us, guiding us, protecting us, and – it gives you a direction in life…Having something to believe in, uh – having a direction in life. To live your life having nothing to believe in, not knowing good from evil…there’s not actually a clear direction in your life.

From these statements it seemed that the direction spirituality gave was linked to faith in a superior being, as well as to an ethical code of right and wrong. Rajesh related this to finding the right path:
…and sometimes you wander in the wrong path and you try to find somebody to put you on the right path again.

He believed he had strayed from this path by allowing himself to fall in love with another woman:

You know, like that two years, when I was doing wrong, I always thought, there is no God, or there’s no direction for me.

Returning to spirituality had given him direction by providing him with a goal, or future story:

Spirituality is making me stronger in the sense of giving me a goal. For me, spirituality and religion is, like, direction.

In another place, he echoed this theme:

I mean, maybe I lost – I lost it for some time, but, you know, I like to think that I can get back again on the true path…I think that spirituality is my main focus now.

- Spirituality versus medication and therapy

Spirituality appeared to be the only avenue that Rajesh had found helpful in his struggle against depression. He went to the doctor who prescribed anti-depressant medication, which Rajesh found addictive. He recalled the experience in these words:

So I went to the doctor and I explained to him…so he said, no, you must go on anti-depressants. But I found these tablets very addictive.

Rajesh could not remember the name of the tablets but from his description and the dosage it sounded like 25 mgs Trepilene daily.

He then began to take the tablet whenever he felt anxious:

But then I started taking it during the day. In the mornings. Lunchtimes…It just did something to me. I just felt a little bit better, but it didn’t last, you know, for long. And I became addicted to it…
As a result, he gave the medication up after a month. It seemed that the doctor had not really explained the function of antidepressant medication:

*Ja, he did explain that to me, you know, very briefly. He said if you’re having problems sleeping, or stuff like that, you must take it. Or if you feel, you know, sad, or you know, anything of that sort.*

Rajesh had also never sought therapy or counselling:

*But – uh – you know, I’ve never really spoken to a priest or pastor or anything like that…*

However, as we have seen, returning to his spiritual roots gave his life direction.

- **Prayer**

The practice of prayer seemed to be that dimension of Rajesh’s spirituality that really helped him. At one point, when he had been finding his job in construction very unreliable, because sometimes he would have work, and sometimes not, he turned to God in prayer:

*And I would pray. I would go to the lamp, and I would pray, and I would pray, and I would tell God, “Please, I don’t ask you for anything else. Just give me a job.”*

He believed that his prayers had been answered:

*…I believe my prayers were answered. Because I did get a job. And I got a nice job.*

Clearly, prayer was still a practice helping him at the time of the interview. For example, replying to the question, whether he was finding his family supportive during his current depression, he replied:

*Ja. And prayers. Ja. And prayers. These are the only things that are helping me.*

Towards the end of the interview he confirmed this experience:

*I mean, I wake up, like this morning. There’s so many problems and what have you. And I woke up, and I prayed. And, you know, it just makes you feel better. It gives you that strength.*
• Meaning versus meaninglessness
Rajesh’s spirituality seemed to bring meaning in the midst of his depression, in the sense that there was a reason for it somewhere, and that God would somehow bring good out of the bad situation. Reflecting on this aspect, he said:

But, I mean, it happened for a reason. And I believe everything happens for a reason. It’s God’s will. It’s – it’s – His way of… teaching you or making you a better person.

• Good resulting from adversity
Rajesh’s spirituality contained a belief that God brought good out of all things, including suffering. He shared, for example, his conviction that if he had not experienced marital problems he would never have accepted his present job, where he was experiencing considerable job satisfaction:

But it happened. In that two years. And, you know, maybe had that not happened, I wouldn’t have taken this job here…And it was an achievement for me. It felt proud, you know, being where I am today.

• Hope versus hopelessness
Spirituality seemed to give Rajesh hope, which in turn gave him a positive future story. Towards the end of the interview, talking about the way stress seemed to be coming at him from all angles, he said:

It’s coming, like, it’s not ending. I don’t know, the only thing that gets me through each day is that I believe that somewhere along the line there is hope. Somewhere I’m going to see the light again. God is going to show me the way and, He’ll, I mean, He’s brought me so far, I’m sure he’s going to take me the whole mile.
Other themes

- ‘Man is not an island’ – the interconnectedness of all things
The above idea only occurred only twice in Rajesh’s story, but it impacted on the researcher as summing up the way his behaviour had caused repercussions in the lives of many people. It also seemed to encapsulate the way his depression was characterised by Rajesh being pulled in many directions. Speaking about that critical moment when his relationship with the other person developed from friendship to love, he commented:

   *It just grew to something more, and it went out of control, because then a lot of people got involved.*

Towards the end of the interview, he lamented the way his choices had impacted on his children:

   *You know, my son was really affected. He was bad, you know. And he’s still scared, because he’s very attached to me. And so is my daughter.*

- A discourse of God as male and female
Rajesh’s story offered a new understanding of God as male and female. This aspect seemed particularly important in the light of the criticism of Christianity by feminine theologians as being a religion that propagates a discourse of a male, patriarchal God. Although Rajesh mostly referred to God as “He”, he also explained that there were other manifestations of God that were feminine:

   *But a lot of our disciples [in the sense of deity] are very feminist. I mean, if you look at home, you know, we have a Laxmi. That’s what we light. The lamp...That’s the light of the house. It keeps away evil. But it’s feminine. It’s a female.*

My experience in the interview with Rajesh
During the interview, my predominant experience was a feeling of concern for Rajesh. My personal opinion was that he and his wife should seek marital therapy. I offered my services as a therapist, and suggested, alternatively, that I refer him to someone else. He seemed quite enthusiastic about the possibility of therapy with
me, and did contact me a few weeks later to find out where my consulting rooms were, and my hours of consultation, but so far he has not followed up. I was amazed that Rajesh opened up so fully to me, because we were little more than acquaintances. I also found this interview challenging to my belief, that, while other religions represent a sincere seeking for God, in Christ we have the fullest revelation of God. Yet Rajesh seemed to be getting from his spirituality what I was receiving from mine: direction, strength, hope and meaning. I particularly identified with his finding the disciplines of prayer and fasting helpful, because they have also been key elements of my own spirituality. I really liked the idea of a prayer room in the home, with light as a symbol of God’s presence. I felt gratified that Rajesh had found the interview therapeutic. At the end of the interview he commented:

*You know, I feel better talking to somebody….Sometimes you have all these things in here, and you don’t really have anybody on that neutral ground, just to listen to you…just talking about it, getting it out, you know, it sort of lightens yourself.*

**Feedback from Rajesh**

Rajesh felt my interpretation of the interview was trustworthy. He commented: “It’s good. Very nice”. He shared that he felt he had made the right decision to stay with his wife and children and that his heartache was beginning to heal, which the researcher was pleased to hear. He felt that my observation of him not really “connecting” with his father was not entirely correct. There was a “bond” between them, but it was not possible for him to speak openly with his father and “connect” on a really deep level because of the cultural norm of respect for your elders.
NASEEMA’S STORY AS A WHOLE
Naseema grew up in a home where she experienced physical abuse from her mother. She was brought up as a conscientious Muslim, going to Muslim school, and being encouraged to observe all the Muslim spiritual disciplines. Her depression had originally been related to the mistreatment experienced from her mother. Later in life she had come to realize her mother was also a victim, and had forgiven her. Her mother was subsequently a major support in her spirituality. Naseema’s next experience of depression was related to a marriage in which her husband tended to be emotionally, and at times physically, abusive towards her and their son. She seemed depressed at the time of the interviews, and was tearful at times.

THEMES EMERGING FROM NASEEMA’S STORY

Naseema’s personal understanding of depression
Naseema’s personal understanding of depression seemed to consist of the following themes:

• Sadness, suicidal tendencies and anti-social behaviour

Naseema experienced depression as affecting social functioning, and consisting of sad feelings when she said:

…I would get into my room feeling hurt and upset – and then I would just put on the music and, (sighs) – just sit in my room and listen to sad songs… and then – you don’t want to talk to anybody, you don’t want to go out.

She also associated depression with a suicide attempt:
...I just couldn’t take it any more. All these pills were lying there…So I used these whole lot of pills…and after that my Mom and them took me through for them to pump my stomach out.

- **Loss of energy and feelings of worthlessness**

  Speaking about her spiritual practices, she indicated that she struggled with loss of energy:

  *I tell myself, no, I have to do this, but I’m so depressed that by the time the time comes, I just can’t summon the energy…*

  She would also experience feelings of worthlessness:

  *And, I know, last year and the year before, uh – I felt like I was worthless.*

- **Tearfulness**

  The experience of tearfulness was also apparent when Naseema shared her understanding of depression:

  *Sometimes you can start crying for no reason. Or crying because you think people don’t love you anymore or you become all sympathetic towards yourself…*

  However, Naseema’s story also revealed alternative ways of looking at depression. These clustered around the following themes:

  - **Depression related to the stories of significant others**

    Naseema indicated that she had experienced two major struggles with depression. Both were related to her close relationships with significant others. Speaking about her childhood, Naseema’s story revealed that her depression began when she was diagnosed with epilepsy as a child:

    *…the first time I was very, very, very depressed, started getting upset, was when I first started getting epilepsy.*

    However, as she was speaking about this, she suddenly switched to the subject of her mother, as though that relationship had made the depression worse:
I had…to start taking medication on a regular basis. It wasn’t nice and – let’s – you know my mom, she used to physically abuse us and uh – all that together…

Her suicide attempt was related to her mum hitting her:

And when we came back from school, there was my Mum. She got me by my hair. She started banging my head against the wardrobe, and hitting me endlessly – and then – I lost it completely…And so she went away, and I just couldn’t take it anymore. All these pills were lying there.

She felt that her depression experienced at University was also linked to the abuse from her mother:

Naseema: I was still very, very upset with my mother when I went to Varsity…Can’t believe how I hated my mother – (cries) – couldn’t understand her. Couldn’t understand why she used to hit us like that. (Pause).

Researcher: So your depression was very closely linked to your mother?

Naseema: Yes, very closely…My Mum was too controlling. She came from an abusive family as well – and, just – the cycle just continued.

Later in her life Naseema was able to forgive her mother, and found her very supportive of her spirituality.

Naseema’s second major struggle with depression was connected to her relationship with her husband. After one and a half years of happy marriage, Naseema stopped working, and the resultant financial problems, her husband’s depression, as well as alcohol abuse on his part led to her also becoming depressed. She summed up the situation in this way:

I mean I had a husband now who didn’t bother about me, who started coming home late. Then he started drinking. Our entire relationship just started falling apart. And I felt worthless. I felt suicidal.
Anger and frustration

Anger seemed to be a very prominent theme in Naseema’s story of depression. When she shared her understanding of depression, she included anger as part of it:

…sometimes you — uh — you’re confused, you’re angry at the world, you become — um…you’re frustrated — um — frustrated - frustrated…the slightest thing irritates you — because now you’re angry, you’re upset.

She described the most dominant emotion experienced during the depression related to the abuse by her mother as anger. Describing her feelings of depression at that time, she said:

I was angry. I was — one minute I was angry, and then my Mum used to hit me and then I would get more angry…

Recalling the issues she had discussed with her counsellor at University, she explained:

It was more the family and — how — why I was getting so angry and depressed and sad and things like that.

Referring to the depression experienced in the context of her marriage, she shared:

Sometimes…I feel so angry that he does this to me. I can't stop. I feel I want to throttle him, because he keeps on manipulating me into giving him money for this alcohol. (Cries).

She also described how angry she became when her husband, Ahmed, treated their son badly:

I get very, very angry when he treats Younis like that.

Being pulled in different directions

Being pulled in different directions left Naseema immobilised, unable to make decisions and worsened her depression. Her position was understandable. Although Younis was Ahmed’s biological son from a previous marriage, a bond had developed between Naseema and Younis, so that Younis viewed her as his mother, and according to Naseema, the child had very little positive interaction with Ahmed. However, Ahmed had official custody of Younis, so that, if Naseema decided to get a divorce, she would have to leave the six-year old behind, which she felt would be
basically abandoning him. Against this, she was pulled the other way by her mother, who was urging her to leave an abusive marriage. She summed up the situation in the following words:

I get very upset. Disappointed, upset, angry – and – I just want to leave him – go away from him – far away from him. And then I remember about our son. (Tearful). And then, I think, no, I can’t go away, because of that little fellow. Then I say, no, I have to. The other day on the phone, my mother was just saying, why don’t you just go. If I’m not going to love myself first, then I’m going to lose myself completely. And I shouldn’t bother feeling guilty about our son, because he’s not my responsibility – he comes from my husband’s first marriage. But it’s easier said than done.

- Spirituality versus depression

Spirituality seemed an important aspect of Naseema’s depression. When she became depressed, she found it difficult to perform the Islamic rituals that were an important dimension of her spirituality. Before the depression, for example, she would observe a ‘big night’, such as the Prophet’s birthday, very enthusiastically. However, once depressed, she referred to her experience in the following way:

But when I was depressed, I couldn’t care less what was happening.

She also said:

And the last two years…living with my husband under these conditions…he’s, he’s depressing me to the extent now that sometimes my Mum will phone me and she’ll tell me…tomorrow night is a big night and I just couldn’t bother…I’m so depressed that by the time the time comes, I just can’t summon the energy.

Paradoxically, the depression eventually forced her back to her spirituality in order to cope, not so much in observing the rituals, but in desperately turning to God for help. She seemed to be saying this in the following quote:
…it’s amazing how, when you need God, then we always ask him to be there for us.

She seemed to find it helpful, when depressed, to share her feelings with God:

…at times I get angry at Him. At times I question Him more – uh – also – when I’m depressed I also – uh – ja – look for Him more.

- Depression as a positive experience versus depression as a negative experience

There were times in Naseema’s story when she made it clear that depression was a very negative experience for her. For example, when sharing with the researcher her understanding of depression, she said:

Um – depression. Pain, pain, pain, pain. Depression is pain.

In another statement she spoke about the adverse impact of depression

…you can say that it [depression] affects you adversely, because – um – you kind of forget that there is still something good out there.

On the other hand, Naseema was also able to discern a positive side to depression. She seemed to say that depression was a challenge in the following words:

I think He challenges you, basically. Maybe He challenges us. That’s what Muslims actually believe – they say when things are bad, God challenges you, because you have forgotten Him.

When asked specifically if she had experienced depression as a challenge, she replied:

…God is still challenging us. God is still challenging me. Either he is telling me, “You’ve got to hang on to your husband.” Or He’s trying to tell me: “You’ve got to get out of there now. Just leave him”…So, God is giving me the challenge, certainly.
• **A normative belief system of male dominance**

It seemed as though a view that saw the husband as the “leader” in the home was a part of Naseema’s depression, in that it contributed to her nearly losing her spirituality, and, to put it harshly, not taking responsibility for her depression. In general terms, she expressed it thus:

…there are roles society has set out for us. A man should be a man and a woman should be a woman.

She explained this in more detail within the Muslim context, when she said:

…a woman normally takes the lead from the man in the house. I know things have changed, and people have Westernised and things, but a Muslim woman normally takes her lead from the man in the house.

The consequences of the man not taking the lead, according to Naseema, could impact negatively on the wife:

And if the man is weak, and the man doesn’t want to do these things, and he doesn’t want to read his namaaz… the Muslim woman is going to sit by and say, “Oh well, the man doesn’t want to do it, I can just as well not do it myself.” And that is one way we can also lose our spirituality.

• **Taking responsibility versus avoiding responsibility**

At times Naseema seemed to evade responsibility for solving her problems. For example, at one point she said:

I used to walk around the house in my pyjamas only. I never used to go anywhere. My husband never used to bother about me, so I never bothered about myself.

However, she immediately added:

And eventually… I said, “No, just stop this. I have to get a job. I have to get back my self – some of my self-esteem.”

Later she seemed to be using a patriarchal discourse to avoid responsibility in her spirituality:
But if the man is – uh – strong and he can lead the way, then the woman, she will also stand up and say, OK, I will follow my husband’s lead, because she’ll see him doing this and doing that.

In the end, though, she had taken responsibility and had found herself a job:

The only good thing about this entire experience so far is the fact that I woke up a little bit. I started to smell a little bit of the roses. And I got this job. I think I would have been gone – I would by now have committed suicide if I hadn’t got this job.

- Depression and loss

Naseema’s sense of loss seemed linked to the celebration of Muslim festivals that had been an important part of her life before she married and relocated. She recalled nostalgically:

…I feel very, very depressed when it comes to times like Eid and Roza and Ramadaan and things like that. because I mean, our traditions and such, I remember, and like, you know, when we were at home, what traditions we follow – and I mean, here, at eid time, there’s nobody.

The sense of loss seemed related also to missing the sense of family togetherness associated with the celebration of the festivals:

I feel very depressed, especially at midday. I try as much as possible to follow the traditions, but I mean it’s no fun – I feel lost. Cause my parents are not here, my sisters are not here. Nobody is here.
Spirituality versus religiousness

- Inward spirituality versus outward religiousness

When asked about her understanding of spirituality, the most prominent theme in Naseema’s reply was that spirituality was an inward experience, related to beliefs and values:

Spirituality – uh – is something that’s inside of you – faith – hope – um – something that you – you don’t have to – it’s not what you do that makes you spiritual – it’s what you believe, or – what’s inside of you – what you believe to be right and wrong, what is your principles, what is your values.

Religiousness applied more to outward religious activities:

…religion is more the outward things that you do – like praying, - um – actually physically praying to God – uh – like going – taking out your musala – five times a day – and saying – and praying to make everything hamas.

However, Naseema believed it was possible to combine spirituality and religiousness. She said:

Well, at some stage they both become more combined, I mean. They become combined to some extent, but I mean – it depends on how serious you are. Like I mean I consider musala and, I can uh – be thinking about – what would you say, ‘Laurel and Hardy’ and not focussing on the fact that I am now praying to God. You see – but if I had my iman here (puts hand on chest) in my heart, and I know now, I am in front of God, and now I am praying in front of God now, I have to give my attention.

- Lived spirituality versus practised religiousness

Naseema stressed that her spirituality was something, not only practised externally, but also something affecting the whole of her life, and involving all the aspects of life. For example, she said:
Spirituality...is how you live your life basically...you don't have to be a moulana to be spiritual. You can be spiritual because you are just an ordinary person, just doing the right things. There are times when just bringing up your family in the right way...is spiritual.

In another place, she summed it up:

...you see, Islam is a way of life. It is not a religion.

**Ingredients of Naseema’s spirituality**

- **Iman**

Central to Naseema’s spirituality was Iman, which she seemed to be saying was the inward faith reality:

...Islam is made up of five pillars: Iman, namaaz, roza, zakar and hajj...in the middle is Iman – Iman is your faith.

She compared her understanding of spirituality to a marquee, or tent, with five poles supporting it. The middle, or most important pole, is Iman:

If you put a pole in the middle of a marquee, and the rest of the four pillars of Islam around this middle pole, Iman.

If you took away the middle pole, the entire marquee would collapse.

The other observances were important: namaaz (prayer) roza (fasting), zakar (charity) and hajj (pilgrimage to Mecca), but only if infused with the spirit of Iman. She illustrated her point well when referring to the practice of fasting:

And keeping our fasts we must know now why we are keeping it. For what reason? We just don’t keep a fast just for the sake of keeping a fast.

- **Legalism versus freedom**

There seemed to be two realities jostling for supremacy in Naseema’s spirituality. On the one hand, as indicated above, inward faith was important to her. Nevertheless, she also observed outward detail, in an almost legalistic manner. For example, speaking about eating and walking, she said:
...if you have to drink water before you eat, or after you eat, you drink three sips from the glass...If you cannot drink three sips, then five sips, but always in odd numbers...And when you enter the toilet, you enter with your left foot...and you come out with your right foot...I do all of this. These things I do on a regular basis.

However, there was evidence that Naseema was beginning to question the legalism. For example, referring to dancing, Naseema said:

Dancing is regarded as a sin in our religion...We don't do it at home, although I don't see why we shouldn't do it at home, we're not harming anybody, I'm not hurting people...

It seemed that Naseema was moving to a new spiritual principle, namely, behaviour that doesn’t hurt is legitimate. In other words, within a broad Muslim framework, her spirituality was growing and developing in a way that worked for her.

- Questioning versus unquestioning spirituality

Naseema seemed to be moving from a spirituality that was unquestioning to a more questioning spirituality. For example, she explained her fear of a questioning attitude in the following quote:

And I get frightened, because now it says that we shouldn't question, because He has related out for us in the Q'ran how we should live our lives...But, I mean, God gave us intelligence – and surely, if God gave us intelligence He would want us to question ...what is in the Q'ran.

In practice she questioned:

At times I question Him more – uh – also – when I'm depressed I also – ja – look for Him more. Ask Him more questions

In this dimension as well, Naseema’s spirituality seemed a growing, developing, dynamic process.
Spirituality as a means of dealing with depression

- Prayer

Prayer seemed to stand out as a prominent way of dealing with depression. Yet it was not so much her formal prayers that helped Naseema, but a spontaneous turning to God:

*I turn to Him whenever I need Him, and I thank Him every night without fail. Maybe I don’t read my namaaz, but every night, before I go to sleep, I say my prayers…*

Later in the interview, referring specifically to the impact of spirituality on her depression, she indicated that both formal prayers and spontaneous prayer had been of assistance to her:

*S sometimes I prayed – uh – prayed the way we pray. By using our type of – um – prayer. You know, using the Arabic language…the namaaz, and things like that…At other times I just spoke to Him. I just talked to God, and just – uh – like He was around me. He was listening, and I felt – I felt His presence. So it was at different times, and in different ways. So – I suppose that’s how it helped.*

- Spiritual support of her family

For Naseema, spirituality was communal, as well as individual. This community aspect was especially related to her family. For example, replying to the question, ‘How has spirituality helped you to deal with depression’, she said:

*And my Mom – OK, we had a hard life, a dysfunctional family…but today, she has been my rock and she has been – um – she has guided me spiritually. She always tells me on the phone, “Naseema, have you read your namaaz? Naseema, make sure that you keep your roza!” I think if – parents in a Muslim family, if our parents didn’t – my parents didn’t help me spiritually, to guide me…I don’t think I would have gotten out of my depression.*

She also said:
And so I think parents are a vital link in this whole spirituality. To help you with your problems, like depression.

It was because this family aspect of spirituality was so important to her that her husband’s abandonment of spirituality was so depressing for her:

…because he’s forgotten that he’s a Muslim, he can bring that kind of ugliness, that kind of thinking, that way of life…into my home – the home that we share.

- Forgiveness
Forgiveness seemed to be an important part of Naseema’s spiritual growth, especially the way she had managed to forgive her mother for the physical abuse experienced as a child. The forgiveness was related to understanding her mother's frustration:

I think I got some understanding as to why she was frustrated. I got some kind of closure with her. Now I don't hate her. I understand why she is the way she is. Maybe, you know - I forgive her for what she did to us, but – um – it took some time…but I've forgiven her now.

My experience in the interview with Naseema
I found it difficult to listen to Naseema, because she spoke very quietly and presented rather passively. I found myself worrying about the number of times she became tearful, and for this reason decided to have a break, and complete the interview over two weekly sessions. I found that I became very interested in her experiences and description of Islam, about which I knew very little. At times I wanted to “begin therapy” as it were, because she seemed, from my perspective, to need therapy, but I resisted the temptation, so that her story could be told with as little influence from me as possible. There were occasions when I felt frustrated, because Naseema would rattle off Islamic terms that I knew I couldn’t spell, but I did not want to break the flow of the interview by interrupting her for her spellings. Fortunately this was cleared up in the feedback interview.
Another strong emotion I became aware of during the interview was a feeling of anger towards Naseema’s husband because of his abuse of Naseema and their son. When I transcribed the interview, I felt the anger again. One of my tendencies is to feel things very deeply, which this experience reminded me of. In the privacy of my study, I tried to turn the feelings of anger into understanding, compassion and prayer. Naseema’s husband also needed healing, in his context.

Feedback from Naseema
Naseema felt my interpretation of her story was trustworthy. I was particularly gratified that she agreed with my interpretation of her spirituality as developing dynamically within a Muslim framework. She agreed with my suggestion that some aspects of Islam needed to dialogue with Western views on human rights. She corrected my spelling of various Muslim terms, such as Iman, not Imam. She said at the end of the feedback session:

I am not a sophisticated Muslim. Just a simple person trying to make head or tail out of life.

Naseema was very tearful during the feedback interview, to such an extent that I offered her my services as a therapist, an offer that she accepted. At present I am seeing her for weekly therapy.
MPHO’S STORY AS A WHOLE
Mpho was brought up by her grandparents until she was eleven years old. For the next two years she stayed with her biological mother, and then returned to her grandparents for her high school education. After that, she shuttled back and forth between the two homes, and worked for a while as a trainee nurse until she got married by customary union, and came with her husband to settle in Kimberley. Her depression was linked to verbal and physical abuse from her stepfather, as well as a tendency to deny her feelings. Her spirituality was a fascinating synthesis of Christianity and African traditional religion, which she utilized on a daily basis in a way that worked for her, although there had been some struggles in its development. She had overcome her depression by a combination of psychotherapy, marital therapy and spirituality. She indicated during the interview that she was no longer depressed.

THEMES EMERGING FROM MPHO’S STORY

Mpho’s personal understanding of depression

- Sad feelings, suicidal ideation and social withdrawal

Sad feelings, suicidal ideation and social withdrawal to the extent of clinically affecting social functioning seemed apparent in Mpho’s story. For example, describing her first depression, she said:

*I felt suicidal. I felt down, all the time…At home I was withdrawn.*
• Insomnia and other physical and psychological experiences

Moreover, describing her depression she experienced after her mother’s death, she mentioned the DSM-IV themes of insomnia, feelings of worthlessness, tearfulness, loss of concentration, weight loss and loss of appetite:

*Loss of appetite. Loss of weight, not sleeping. Crying all the time. Feeling useless and worthless…and my attention span was – I had a short attention span at that time.*

• Western versus African traditional beliefs

Mpho’s story reflected a clash between Western and African ways of viewing depression. The western model views depression very much as something negative, as a kind of sickness, and Mpho seemed to draw from this view in order to describe depression:

*My understanding of depression is – uh – it’s a sickness – I don’t think it’s a disease – but it’s some kind of a sickness that affects your brain.*

However, Mpho also seemed to include alternative ideas from the African traditional religion. She came from a family that, according to African traditional religion, had received the gift of prophecy, and she needed to accept the gift for herself. What confused Mpho was that another prophet told her that the symptoms of being called to be a prophet were very similar to what the Western perspective attributes to depression. She described it in this way:

*Because there was this prophet...So she told me, you know, like sometimes you would think you have depression, because, sometimes – uh – people’s gifts don’t come in the same way. You don’t sleep. You have disturbing dreams.*

Mpho seems to be saying that depressive symptoms, from a traditional African perspective, are not a bad thing, but rather a positive thing in that it may signify one is being called to be a prophet. She expanded on the theme a little later in the interview:
So I didn’t understand how, you know, depression got into that – how it got mixed up in that, you know. Like, she said, that sometimes it’s not depression, you know. Sometimes people are perceived to be mad, but they are not mad, but it’s the prophetic gift.

Mpho solved her dilemma by combining the two views:

I – I – had to sit down and really ask myself whether it was the gift or depression. So – I had to do – to deal with them as if it was both – both depression and the gift.

- Emptiness versus fulfillment
For example, Mpho described one of the symptoms of her depression as emptiness, which she experienced when there was no spirituality in her life:

I believe if you don’t have anything to believe in, your life just becomes empty…it’s just an empty existence for you.

Describing another time when she gave up spirituality for a while, she expressed it in these terms:

...there was a time when I didn’t pray, totally. When I just stopped believing in God, and I stopped believing in my ancestors. Uh – and – I felt like my whole life was empty.

- Feeling down versus feeling alive
The close relationship between spirituality and depression was apparent in Mpho describing her depression as a feeling of being down, a feeling which was dispelled by the life-giving qualities of spirituality. She said:

I just felt down all the time, you know. But when I do pray, then I feel alive, and – I think it has – because I’m just not bothered by depression any more.

She related a similar experience of depression when she stopped believing in God:

So – so that’s what depression did to my spirituality.

Yet it was spirituality that eventual fought back, as it were, and drove back the depression. Listening to a spiritual song on the Oprah Winfrey show, Mpho was inspired to give her depression to God:
I do not want to feel like this any more…I put it in Your hands, for you to do whatever you want. So – I felt like, just taking everything out – all my troubles and everything, and handing them over to God. Yeah, and I felt relieved. I felt relief. For the first time in a long time, I felt alive, you know, you know, I felt alive.

- Depression as negative versus depression as positive

Sometimes Mpho spoke very negatively about depression. For example, when asked about her story of depression, her first response was as follows:

    Uh – the story of my depression is uh – I think it ruined my life.

Describing another experience of depression, she indicated it as negative:

    Because, when I’m happy, I can just block all the negative things, you know. But, as soon as I get disappointed, everything just returns. I feel down again, and I cannot sleep, and – you know, all those things.

However, towards the end of the interview, she seemed to see it in a more positive light. Asked whether she felt her ancestors had punished her by allowing depression into her life, she replied:

    No. I don’t think they punished me with depression. I think it was – for me – I see it as a way of reminding me of things. Of teaching me a lot of lessons in life.

Later she elaborated on this theme:

    I think I had to be strong through that way (depression). Because I was quite spoilt. I was used to everybody doing things for me. So I think I had to have it tough for me to be strong.

Mpho seemed to be saying that depression was a positive phenomenon, because it had contributed to her becoming more resilient.
• Denial versus congruence
Denial seemed a prominent part of Mpho’s story of depression. She denied the reality of the emotional and physical abuse experienced at the hands of her stepfather by suppressing it:

…I suppressed a lot of things. So it affected my life – my social life… Like I was abused at home. The insecurities. And the hurt.

Later she added:

I would live my life as if nothing was wrong, because I just didn’t want people to be sorry for me. But I was feeling sorry for myself. Like, at night, I would cry and – all those things.

When she was at school she wore a mask:

At school I was somebody else. At home I was another person, you know. At home I was withdrawn.

On another occasion, when experiencing suicidal feelings, she called her mother and shared how she was feeling. Her mother did not do anything about it, so she denied the feelings:

To me, it was like reaching out to her. She didn’t do anything about it so I just – just gave up. I did what I always did – I suppressed everything.

• Anger
Anger seemed to be a prominent part of Mpho’s discourse of depression. Referring to her childhood experiences of physical and verbal abuse, she recalled:

I was just so angry with everybody. I was angry at God, at my mother, and – everybody.

• Loss
Mpho’s grandparents functioned as her parents. She saw her mother more as a sister figure whom she disliked, and she hated her stepfather, who had abused her. She was particularly attached to her grandmother. She expressed this in the following way:
My grandmother was my mother, and my grandfather was my father. They were both my parents…I think both my grandparents understood me more than anyone. There were things that I couldn’t talk to my grandfather about – uh – I would talk to my grandmother, you know.

So it was that when her grandmother died, she experienced another bout of depression. This seemed linked, not only to grief, but also to a sense of losing her only source of support:

And, it just – my whole life went down with her – and I had very – it was tough…so I felt I had no-one to talk to, you know…so, at that time, when she died, it was sad.

Because, I thought that I had to start living by myself.

Later she lost her grandfather (who she referred to as her father) as well, and this also threw her into a depression. She found the whole experience surrounding his death traumatic. At first, because of tribal tradition, she wasn’t allowed to visit him for a certain period of time, because she was recently married. When she finally went to see him, she found that his illness had reduced him to a shadow of the person he had been. She said:

And, when I went to see my grandfather – I had not seen him for three months – and when I saw him, the following week, he was gone. It was bad – it wasn’t him. I think that’s what made everything worse…I just could not accept my father’s death – I couldn’t. I am still trying to accept it – uh – it’s easier than it was.

- Depression linked to a future story

Mpho’s depression seemed to be characterized by the absence of a future story. When sharing her understanding of depression, she said:

You don’t feel you’re going forward, or whatever. You just feel like your whole world is in mid-stop.

This contrasted to her attitude at the end of the interview, when, declaring that she had recovered from depression, she described this positive future story:
So probably next year I’ll be a prophet…I’m really looking forward to it. I just want to be a prophet.

• Depression linked to a normative value system
At one point in Mpho’s story, it seemed that a normative discourse from African tradition contributed to her depression. This occurred when her grandfather, to whom she was very attached, became very ill, and she was unable to see him because of the tribal custom that a newly-wed woman could not see her family until a certain period of time had elapsed. She seemed to link this with her depression in the following quote:

I wasn’t supposed to go home and see him, anyway, at the time, anyway, because I was supposed to spend three years at my husband’s home, but I didn’t, because I was here. So I had to ask permission to go home – it’s some tribal tradition. You know, we have traditions. So, I felt like I couldn’t take it anymore.

• Depression and identity
Depression seemed to make it difficult for Mpho to have a relatively stable sense of identity. She said:

I felt like I had a split personality. At school I was somebody else. At home I was another person.

It could be argued that we all behave differently, in different contexts. This is true, but because Mpho felt discomfort at the radical change, it seemed beyond the usual effect of a different social context, and therefore related also to her depression.

**Spirituality versus religiousness**

• Spirituality as open-minded versus religiousness as closed-minded
The key element of spirituality for Mpho was an openness to experiences of spirituality outside the church. For example, when asked to define religiousness, she said:

…most people believe religion to be about believing in God, and praying, and nothing else.
When asked how this differed from spirituality, she replied:

\[\text{...you know, like – uh – believing in God, and believing that God is the only way, you know, like not being open-minded about the things that happen, you know, outside the church.}\]

In Mpho’s case, this seemed to indicate being open to the spirituality offered by African traditional religion, which she combined with her Christian spirituality:

\[\text{My religion is God and my ancestors. So I believe in both, but I believe God to be greater than my ancestors.}\]

**Ingredients of Mpho’s spirituality**

- A Western versus an African view of spirituality

Mpho’s spirituality was characterized by a unique blend of Western Christianity and traditional African religion. She had grown up in a family where the grandparents had the gift of prophecy, which Mpho explained in this way:

\[\text{...prophecy is, like, you have the power, or the gift to – communicate with your ancestors in order to help people – uh – to heal people.}\]

She attended this traditional community which she described as:

\[\text{It’s what normal churches do, but we are allowed to – uh – acknowledge our ancestors.}\]

Besides attending this community, she attended the local Western church in the form of the Methodist Church. The traditional worship would also incorporate the rituals of slaughtering sheep or cows, and would sometimes involve a worship service for the whole night. This service would be characterized by lots of singing accompanied by a drum. When asked which spiritual practice was more real for her, Mpho answered:

\[\text{Uh – for me, at the time, they were both real, but with time I got to realize that was easily bored with the Methodist Church and I liked this one better.}\]

At the time of the interview, she was attending a Western church with her husband, because this was expected of her, but was drawing from both Western and African traditions for her personal spirituality in a way that worked for her. The following statement seemed to sum up in a nutshell this synthesis:
I acknowledge Jesus Christ as my Saviour. I do believe in God. I believe in angels. I believe in God. I believe that my ancestors are my angels. So when I pray to God, God will send them to give me what I ask for.

- **Prayer**

Prayer was a very important part of Mpho’s spirituality. She was able to combine Christian and African traditional religion into a practice that was effective for her. Mpho would have set times of prayer, sometimes every three hours:

There are times when I pray, like three hourly, like 12, 3, 6 and 9. Day and night.

She would set the scene for her prayers with candles:

Like, when I pray, I have to have – I pray with candles – two white candles and one red one.

She would then involve both her ancestors and God:

Cause when I pray, first I call on my ancestors, yes. I call on my ancestors and I ask them to come and be there. And then I pray – but I pray to God, you know. For me, calling my ancestors is, like, OK fine, come here and hear what my prayers are to God, you know. Ja. Because they do things as well.

Sometimes she would pray for only two minutes, sometimes for longer. She described the content of her prayers as follows:

You could ask for fertility, you could ask for luck. You could ask for a whole lot of things.

- **Fasting**

Sometimes Mpho used prayer and fasting to enrich her spirituality. She would combine fasting with prayer, as she indicates in this extract:

Like when I’m fasting, when I’m – I don’t eat certain things, like meat and certain vegetables. I eat some vegetables, but I drink water...like a tiny fast, you know – I’ll eat certain fruits and then I pray.
• Dreams

Dreams seemed an important aspect of Mpho’s spirituality. She said:

_The ancestors are also there to bring you messages. It’s just that you don’t understand them, because you forget your dreams, when you wake up. And they give you messages, through your dreams._

Because she perceived herself to have the gift of prophecy, she began trying to remember her dreams and paying attention to them. For example, two weeks before the interview, she had a dream of her grandfather that she interpreted as him telling her to start buying the things she would need for her ministry as a prophet:

_Because I had a dream about my grandfather about two weeks ago, and he told me that he was hungry. I had to feed him. So I had to – whatever I saw in my dreams, I had to give him – the food…So my brother told me that I have to buy the things I need to be a prophet._

• Prophets versus Sangomas

Mpho believed that she had been called to be a prophet. According to her this differed from the work of a Sangoma in a number of ways. The Sangoma might only believe in ancestors, whereas a prophet would believe in God as well:

_A prophet is different to a Sangoma. So, the Sangomas just straight up talk to the ancestors. Some of them don’t believe in God, they just believe in the ancestors._

Evidently her family had concentrated on the prophetic, rather than the traditional healer (Sangoma) part of their gift,

_...because it’s a lot of work, and I understand you suffer a lot in that._

She implied that some Sangomas abuse their gift:

_But some people use it badly, you know, so I don’t trust Sangomas… Because, when you are given the gift to heal people, I think that you should do just that. Not get greedy and do bad things, you know._
• Spirituality as balance
When asked how spirituality affected her daily life, Mpho replied:

_Uh – if I exclude all these things, then I feel like there’s some kind of imbalance in my life, you know._

**Spirituality as a means of dealing with depression**

• Spirituality versus psychotherapy
Mpho had gone to a psychologist for therapy. In the course of therapy, she had managed to pinpoint the things that were linked to her depression. Her challenge, then was to, in her words, to ‘depression proof’ her life. When asked for the details of this process, she replied:

_When I felt down, I prayed. And – I sort of knew what was depressing me at that time, because – I had learnt so much about myself, about things that I was afraid of exploring in myself, you know. And I worked on those things._

In this way, she seemed to combine the prayer aspect of her spirituality with psychotherapy in a very constructive manner.

• Spirituality giving strength through prayer, singing and reading
Replying to the question, how has spirituality helped you to deal with depression, Mpho replied in the following way:

_It gave me strength. I used my strength and courage to face the demons of my past._

She then linked this experience of receiving strength to prayer by immediately adding:

_And I used prayer._

At another point in the interview she again emphasised prayer, this time specifically prayer to her ancestors:

_I draw my strength from praying, you know. From my talking to my ancestors, yes. That’s where I draw my strength from._
She also related the strength to singing:

> I used songs, especially hymns....So I had the CDs. And there’s this song, ‘I can’t give up’. I love that song. And I listened to that song about twenty times. I put it on repeat, until it sank into me...I kept singing it to myself, and saying it to myself...So that’s where I drew my strength from, and my courage to go on.

On another occasion, relating how she had recovered from a bout of depression, she connected it to listening to Oprah Winfrey singing a hymn on her show. Mpho was inspired to sing a song as well:

> So she sang that song. And I didn’t know the words to her song, so I sang my own.

This song began her recovery. At another point she summed up the situation thus:

> ...whenever I felt like crying, I would find something that would make me feel good, like singing, like reading.

When asked about the reading, she replied that she had read anything, as well as studying her psychology course:

> Any books at all. So I – finished my course, ja.

- **Spirituality bringing meaning to suffering**

Mpho’s spirituality seemed to impart meaning to her depression and suffering. In the following prayer, she affirms that God had allowed everything for a reason:

> And I told God, “I do not believe that you could have made me survive all the abuse, and survive all this hurt, even though I felt like giving up most of the time, but I didn’t. It was for a reason. So I’m not giving up now.”

- **Spirituality as externalization**

On one occasion, spirituality seemed to function as a way of externalization, thus helping Mpho to cope:

> ...I felt, OK, God, I’m taking my depression and I’m giving it to you...whatever is happening to me I put it into your hands...I felt like, just taking everything out – all my
troubles and everything, and handing them over to God. Yeah, and I felt relieved.

Other themes

• Patient as the expert versus the professional as the expert

When she was at High School, Mpho began to feel unwell. At first her illness was a puzzle to her, until she picked up a magazine and read an article on spiritual depression. The article was very much a summary of DSM-IV symptoms, which Mpho found reflected her experience accurately. So she went to the doctor and presented her diagnosis. She related the story in the following way:

And he said, “Maybe you’re just under a lot of stress.”
And I was like, “No, this is not stress, you know. This is what I am suffering from.” So I went back and fetched the magazine, and I showed it to him, and said, “I have all these!”

As a result, the doctor prescribed an anti-depressant.

• Loving too much versus loving herself

Mpho described herself as having loved her husband too much. She married him because she was afraid of losing him:

I got married because I was afraid of losing him. I loved him too much, and I thought that if I didn’t get married to him, I was going to lose him.

After individual and marital psychotherapy she came to a more balanced outlook in which she began to love herself:

I was too attached to my husband. So I detached. I learnt to love myself for who I am – and not depending on other people for happiness.

Later she declared:

Because I went into the marriage because I felt that my husband completed me. Uh – but then I had to be completed myself. I had to complete myself first, in order for us to be complete for each other.
The result was mutually fulfilling:

*Now we have learnt to co-exist. We have learnt to respect each other, you know…*

- Taking responsibility

Another result of therapy was that Mpho began taking responsibility for her own happiness. In her marriage she did this by constructive communication:

*I have to make myself happy, you know. So – when I’m feeling sad, and my husband has made me sad, I sit down and talk to him about it.*

- Psychotherapy versus medication

Mpho eventually gave up the medication, declaring:

*It made me worse. That’s why I stopped taking medication.*

She felt that her spirituality had helped her more:

*When I felt down, I prayed.*

In addition, she felt that therapy had helped her to learn about herself, and the things she was afraid of exploring. She described her experience of therapy in this way:

*I had learnt so much about myself, about things that I was afraid of exploring in myself, you know. And I worked on those things.*

In this way she was able to control her depression:

*And – by remembering everything that my psychologist and I had talked about, I learnt how to control my depression, and accept my life the way it was, and to accept that everything was not my fault… And I grew up.*

**My experience in the interview with Mpho**

During the interview, I felt a deep admiration for Mpho. I knew her well, and had shared some of her journey with her. I felt proud of her. She proved for me the validity of the Rogerian theory that people have an innate, and from my perspective, God-given potential for growth. The interview reminded me of how far she had come,
and how much she had grown. I felt she was an example of how personal psychological and spiritual growth can enable the transcendence of depression. I found it very easy to listen to her, and enjoyed her spontaneous enthusiasm in sharing her experiences.

Feedback from Mpho

Mpho confirmed that my story of her story was trustworthy. She shared, however, that I gave the impression that she had deliberately set out to amalgamate Western and African traditions. She felt this was too ‘impressive’ a way of describing it. She had simply used what was of value to her, and she counted herself as fortunate that she had been exposed to both traditions. She spoke at length about the way African traditions impacted upon her life in other ways. Her husband, for example, was still paying off “lobola”, about which they both felt a bit resentful, as they could use the money elsewhere. But they respected their elders too much to challenge the practice.

Conclusion

This chapter has belonged to the participants in the research. The researcher has tried to address the gap in the field by allowing the voices of people with spirituality and depression to be heard. This was done by the researcher interpreting the interviews and presenting his story of the participants' stories, supporting his interpretations with quotations from the interviews, and checking with the participants whether the stories were trustworthy (dependable and credible). The researcher’s own voice (in the sense of my opinions and reflections on the interviews) was kept to a minimum, as was the voice of the literature and current research.
CHAPTER SEVEN

A COMPARATIVE ANALYSIS: HARMONIZING THE VOICES

Introduction

In this chapter, an attempt will be made to bring all the voices in this dissertation together, in this way broadening, enriching and giving new insights to the understanding of spirituality and depression. The voices of the participants, the voices from the literature and current research and the voices from society and culture will be analyzed and compared. Similarities and differences will be discussed, as well as how the various voices have resonated, influenced and informed one another. The aim of the chapter is not to substantiate the findings of the research, but rather, as Gergen has suggested (2006) to allow dialogue between the various voices and in this way to arrive at a new understanding.

Voices on depression

The DSM-IV

Burr (2003) and Parker et al. (1995) draw attention to the fact that depression is a discursive phenomenon, and its understanding is shaped by societal discourses. The DSM-IV could be said to voice the current Western perspective regarding depression (Hussain & Cochrane, 2002). Hussain and Cochrane (2002), Morgan (2000), Parker et al. (1995), and Michael White (1995), inter alia, are all critical of the DSM-IV, describing it as a dominant and marginalizing discourse. However, the experience of the participants in this research suggested that they found it helpful to describe some of their experience of depression in terms of the definition of the DSM-IV. James, for example, used language which coincided with that used in the DSM-IV to describe his understanding and experience of depression as something “that definitely has an impact on your physical well-being”. It did this by reducing James’s energy levels, by producing feelings of worthlessness, by leading to loss of appetite, loss of concentration, inappropriate guilt and affecting his social and occupational functioning. Angel’s story contained the symptoms of feelings of worthlessness, tearfulness and suicidal ideation that are included in the DSM-IV description of
depression. Simon’s interview reflected insomnia and restlessness, Marion stressed sad feelings, Catherine loss of energy, social withdrawal and suicidal ideation. Even the participants from non-western cultures seemed to draw from the DSM-IV description. For instance, Rajesh experienced sad feelings, insomnia and fatigue, Naseema described sad feelings, loss of energy, suicidal ideation, worthlessness, tearfulness and social withdrawal, whilst Mpho spoke about her experiences of sad feelings, suicidal thoughts, social withdrawal, insomnia, feelings of worthlessness, tearfulness, weight loss, loss of concentration and loss of appetite.

This phenomenon could be interpreted as the DSM-IV providing a helpful discourse that was drawn upon by the participants because it accurately described some aspects of their experience of depression. An alternative explanation could be that the participants had simply been socialized to describe their experience in terms of the dominant discourse of the DSM-IV. What seemed beyond doubt was that the experiences described by these participants suggested that depression is a much broader and more complex phenomenon than that defined by the DSM-IV.

**Depression and spirituality as inextricably linked**

Robinson-Smith (2004) and Swinton (2001) have suggested that spirituality may be an important, but neglected aspect of depression. Armentrout (2004) argues that depression is a negative emotional state with a spiritual base, encouraging corrective action. The stories of the participants in this study harmonized with this notion. James, for example, described spirituality as “the binary opposite” of depression. So close was the relationship of these two phenomena in his experience that he spoke about depression as a cyclical experience, which “regenerates spirituality in the way winter allows the plants to regenerate”. Angel also felt that depression had been an integral part of her spiritual experience, in that she perceived God as using depression to give her “a good hiding” from time to time to deepen her spirituality. In Simon’s story, every time he could focus on “God’s agenda” and not his own, his depression lifted, only to return when Simon’s own agenda, in response to the many demands upon him, began to return. In Marion’s case, depression had been the catalyst for her finding spirituality and had then been a constant companion in the background:
Ja, I was going to church, and I was ministering and I was doing…but it was heavy-going. It was heavy-going.

Catherine’s experience seemed to resonate with that of James in that she also found that the relationship was almost cyclical. Her depression sometimes pushed spirituality out of the focus by “clouding her vision”, but then spirituality imparted hope in the darkness, until the depression lifted. However, then depression would begin to cloud her vision again, and the process would repeat itself. Rajesh’s story also revealed a reciprocal relationship: depression would cause him to lose spirituality, but would then drive him back to spirituality as a means of “finding direction”. Naseema found that depression led to neglect of her Islamic rituals, which were important to her. In this way her depression was intensified, until the pain drove her back to God in spontaneous prayer as a means of dealing with depression. Mpho shared that depression had caused her to lose her spirituality, but eventually, her spirituality, through prayer and listening to a spiritual song, had freed her from depression:

*For the first time in a long time, I felt alive…I felt alive.*

The stories of these participants suggested that depression and spirituality may have a reciprocal relationship and that they may inter-relate with one another in a kind of cyclical feedback loop. This was certainly the case in the experiences of the participants in this study, and it would therefore also have been impossible to fully understand their depression without some insight into their spirituality.

**Depression as negative versus depression as positive**

The dominant societal perspective today is that depression is an illness, and an unpleasant one (Cole, 2005; Fitzpatrick & Sharry, 2004). The participants reflected this perspective to a degree. Naseema, for example, said:

*Um – depression. Pain, pain, pain,pain. Depression is pain.*

Mpho reflected in similar vein:

*Uh – the story of my depression is uh – I think it ruined my life.*

Simon and Marion also reflected this negativity through numerous sighs during their descriptions of depression.
However, Bullard (2002) has correctly pointed out that viewing depression as negative is very much dependent on the cultural and social context of the time. There have been contexts, even in Western society, when depression has been viewed positively, because it seemed to go hand in hand with poetic, philosophical and spiritual gifts (Bullard, 2002). Swinton (2001) has also suggested that depression can be a positive experience because it functions as a catalyst for insight and fresh possibilities. All of the participants in this study articulated this alternative voice regarding depression. James, for example, found that depression helped him to understand his spirituality better and to reach out for it more:

There is a place for depression in the world. Depression almost is something that causes one to understand and reach out for spirituality more.

Angel, similarly, said that God had used her depression to make her “a broken vessel” capable of accepting the reality of her situation, and she also described depression as a “learning process”. Simon said: “So I would say that depression is part of spiritual growth”, a theme which Marion and Rajesh expressed as well. Catherine reflected:

…in cutting away those big vines that have not been bearing fruit for him…I’ve been able to grow the most, spiritually.

Naseema described depression as a challenge that God had put before her, and Mpho said:

I see it as a way of [the ancestors] reminding me of things. Of teaching me a lot of lessons in life.

The stories of these participants suggested that a paradigm shift may be taking place in the way ordinary people view depression – as an experience that contributes invaluably to psychological and spiritual growth.

**Anger and depression**

Goodwin (2006) has found in a quantitative study that there is a close relationship between anger and depression. Winkler, Pjrek & Kasper (2006) indicate that anger is connected to depression, particularly in men. Fitzpatrick and Sharry (2004) have
suggested that anger is an experience integral to depression, especially among teenagers. Rifkin (2004), from a psychodynamic perspective, argues that bottled up anger is characteristic of depression. Anger as an aspect of depressive experience was a common theme in the stories of the participants. James, for example, would be mistreated by others, and experience anger. He then blamed himself for getting angry, which made the depression worse:

I was far too hard on myself for getting angry with situations.

Angel suggested that anger at her husband was a part of her depression, and releasing the anger was part of her recovery:

I was very angry at John and I’m not angry with him anymore.

Simon’s anger was linked to unhelpful responses from the Christian community, which in turn made him feel guilty. Marion linked anger to her symptoms of sad feelings. Catherine described her first depression as being characterized by sad feelings, but her second by anger, especially towards her father who was behaving abusively because of Alzheimer’s, and anger about her deteriorating physical condition:

And there was deep anger towards my father... the regression in my body...I was angry about that...I was angry about all these things...I was angry and aggressive.

Anger in Rajesh’s case expressed itself in sudden outbursts of temper. Naseema mentioned how anger towards her physically abusive mother had been part of her adolescent depression and how anger towards her abusive husband was a part of her depression at the time of the interview. Mpho likewise included anger as part of her adolescent depression:

I was just so angry with everybody. I was angry with God, at my mother, and – everybody.

The stories of these participants suggested that anger should be included in current discourses on depression. The DSM-IV, for example, could include it in its description of an episode of major depression.
Loss and depression

Parker (2004), very much in the tradition of the medical model, suggests that there is a clear distinction between grief and depression. The experience of the eight interviewees indicated that ordinary people do not make such a clear distinction. Seven of the eight participants described loss and subsequent grief as part and parcel of their depression. Marion, for example, described her depression as beginning with the loss of her brother. In the next fifteen years, she lost her father, her mother, and mother-in-law. She seemed to view grief as the catalyst for plunging her into deep depression that was to be a regular part of her experience. Catherine’s story of depression was also linked to loss. Her disability gave her a sense of loss. The loss of her father had contributed to her most recent depression. Naseema experienced loss in the form of the family celebration of Muslim festivals that had been a part of her life before she had got married and relocated:

> I feel very, very depressed when it comes to times like Eid and Roza and Ramadaan. I remember...when we were at home, what traditions we follow...and here, at eid time, there’s nobody.

Mpho also connected loss with her depression. Two of her experiences of depression were linked to the loss of loved ones. James did not specifically mention loss, although it could be said that James lost security when he was sent to a strange school and when his mother left his father. Simon’s experience of leaving Zambia with feelings of rejection and persecution could also be interpreted as loss. Rajesh and Angel both mentioned the loss of their identities through depression. Angel said:

> ...I’m not going to be me anymore. I’m just going to disappear...

and Rajesh commented:

> Depression then gets to that stage where someone really can’t cope with it. Where it’s really taking away their values, their happiness, their being – to be a person.

It can be seen that loss was central to the participants’ experience of depression. It may be useful for current discourses regarding depression to connect a sense of loss more closely to the description of depression.
Depression and relationships
Ellis (2003) has drawn attention to the importance of problematic relationships as a factor in depression. Johnsen, Sundet and Torsteinsen (2004) argue convincingly that all mental disorders have a context of relationships because our ‘selves’ or identities are formed in relationships. Depression therefore cannot be understood apart from relationships: if there were no human relationships, there would be no depression.

The stories of the eight participants in this study confirmed the important role relationships play in depression. The depression of James was linked to an abusive father. Angel’s depression was related to sexual abuse as a child, as well as rejection by her mother and by her first and second husbands. Marion’s depression was related to the repeated loss of people she loved and who functioned as a support for her, as well as to the lack of support received from her faith community. Simon related his depression to growing up in the shadow of his elder brother, and the disconnection he had experienced in the Christian communities he had served. Catherine’s depression was complicated by a problematic relationship with her father when he developed Alzheimer’s, as well as to the rejection she experienced because of her disability. Rajesh’s depression was all about being pulled in different directions in relationships, Naseema’s was related to childhood abuse and a problematic marriage, which was similar to Mpho’s experience.

The experience of these participants seemed to call into question the idea of an ‘individual’ seeking help for depression, apart from his or her context of relationships, and support the emphasis by, inter alia, ecosystemic theorists on therapy for depression within the context of relationships (Moore, 2003a; Sutherland, 2005).

Depression and a future story
De Shazer (1991) has argued that psychological health is linked to a future story of hope. Robertson et al., (2005) have suggested that narratives of depression are characterized by the absence of a future story. The stories of these participants
partly confirmed this idea. James, for example, stated regarding his experience of depression:

\[
\text{But it was as if I couldn't see any further, like, I couldn't imagine myself in a few months, let alone a few years...}
\]

Marion who described herself as moderately depressed at the time of the interview, seemed also to have no future story, other than the certainty of God’s presence. She said:

\[
\text{I might lose faith in people, but I will never lose faith in God... He's going to be there in the future. That I know for sure.}
\]

Of course an alternative interpretation might be that for someone struggling with depression, the certainty of God’s presence in the future was positive. Naseema seemed to have no future story. Referring to the challenges facing her in the future, she said:

\[
\text{God is giving me this challenge, certainly. But it's not one I'm winning.}
\]

Mpho also described her story of depression as characterized by the absence of a future story:

\[
\text{You don't feel you're going forward, or whatever. You just feel like your whole world is in mid-stop.}
\]

By contrast, Angel, who felt that she had recovered from her depression, articulated a positive future story:

\[
\text{I've also said to God, I want to work for you. I want to do things for you. I want to help people. Show me the way...I'd really like to work for Him, but I think that'll come.}
\]

The experience of Simon showed some ambivalence regarding a future story. Although he described himself as depressed at the time of the interview, there did seem a glimpse of hope in his future story. Speaking about his future plans, he shared, at first quite negatively, as though he might not continue his missionary work:

\[
\text{...sometimes a work for God must come to an end.}
\]

However, he immediately added the following statement that seemed more hopeful:
But there are just some things that make me think my work is not done here. I’m going away on furlough to recharge the batteries, and I’m hoping to continue here when I get back.

The stories of Catherine and Rajesh seemed to be exceptions, in that both described themselves as depressed, yet both possessed positive future stories. As indicated in the previous chapter, Catherine, despite her stressful context, seemed able to hold on to a “sunbeam” of hope. She had quite specific plans to study the connection between the Old and New Testaments, and was very positive about learning more about God in the future. It may be that Catherine’s undoubted resilience was linked to this hopeful future story that she hung on to, even in the darkest moments. Rajesh shared this quite positive future story, in response to a question whether he thought he would win the struggle against depression:

Yeah. I definitely think that I will. I’m getting there slowly….The financial, you know, eventually, you know, it will come right….It’s going to be a few years, but I will eventually get there.

An alternative explanation could be that at the time of the interview Rajesh was beginning to recover from depression, having made the difficult choice of staying with his wife and children, and receiving help from his spirituality. His positive future story was therefore a sign of recovery, and may not have been there earlier, in the worst stages of his depression. If this explanation is accepted, his experience does not contradict the idea of an absence of a future story being related to depression.

Meaning versus meaninglessness

Viktor Frankl (1965) articulated the importance of meaning as a factor in a psychological health, and his concept of logotherapy continues to exercise an influence today (Giovinco, 2005). Swinton (2001) found, in a qualitative study, that loss of meaning was central to the experience of his participants. Loss of meaning also seemed an important voice in the experience of the participants in this study. For example, James seemed to be raising the existential issue of meaning in life as relevant to depression when he said:
Depression is something which profoundly affects your world view in a negative way.

Angel experienced meaninglessness from the adverse life experiences she underwent, namely her husband having an affair and her daughter leaving home. There were times when Catherine searched for meaning in the context of disability, as did Rajesh in his situation of being pulled in different directions. Mpho referred to her depression as making her life empty, which suggests meaninglessness. “Converting people to be friends of Jesus” brought meaning to Simon’s life, and the loss of this way of connecting to people exacerbated his depression. Maureen likewise found existential meaning in expressing her personal relationship with Jesus in a church context, and lack of support from members of her church seemed to rob her life of some meaning. Naseema, in her feedback interview, implied lack of meaning was a part of her depression, when she said:

I am not a sophisticated Muslim. Just a simple person trying to make head or tail out of life.

Discordant voices: subjugating discourses

Burr (2003) suggests that there are certain discourses that marginalize people. By discourse she means a way of viewing reality that is shaped by language. Burr encourages researchers using the social constructionist model to see the uncovering of subjugating discourses as an important part of their research. Doan (1997), Hussain and Cochrane (2002) and White (1995) have likewise drawn attention to the oppressive power of dominant narratives in society. The following discourses will be discussed in this light.

Disability means being unattractive

Catherine expressed this perspective when she said: “Maybe if I looked good, maybe if I was not disabled I would be – acceptable to the opposite sex”. The rejection she experienced because of this discourse was a part of her depression. This disempowering discourse was even embraced by many of the women encountered by Catherine. She said:
…even females, you know, look at you and say: “you are disabled, after all…how can you think men will be interested?”

According to Catherine, the media was mostly responsible for this discourse.

**For a woman, marriage is the norm**

The rejection associated with this dominant societal discourse added to the intensity of Catherine’s depression. Her spirituality helped her to come to terms with this perspective:

…*in my relationship with God I realized that, to be married or to have a relationship with a man was not the be-all and end-all of life*

**Divorce not an option**

In the experience of Rajesh the societal discourse of divorce not being an option complicated his depression. He was happy in his relationship with another woman, but the voice of the South African Indian community had socialized him into believing that divorce was not an option:

*And I say, although I was doing wrong, I was doing wrong, I was happy. You know, my life was happy…But then I sit back and think, this is not who I am. I wasn’t brought up that way. I’ve got kids. I’ve got a wife. You know what I mean.*

It may be argued that this discourse was subjugating, in that Rajesh seemed to be putting his own happiness second to that of his wife and children, largely because of the expectations of his family that he had internalised. Indeed, from an individualistic, western perspective the discourse was subjugating. However, Rajesh came from a South African Indian background, where the welfare of the individual seemed secondary to that of the family, both nuclear and extended, and that of the community. This discourse represented ‘truth’ for a certain cultural group. In a feedback session, Rajesh communicated that he felt this discourse had an important place in Hindu culture and he would not wish to change it. Hence it would be presumptuous to call that discourse subjugating. It did, nevertheless, pose unique
problems and choices for Rajesh, which would have needed to be taken into account by any psychotherapist that Rajesh consulted.

Male dominance
In Naseema’s story, she expressed a discourse of the man being the leader in the home as a normative perspective in Muslim culture:

…a woman normally takes the lead from the man in the house.

As pointed out earlier, this perspective contributed to Naseema nearly losing her spirituality, and blaming her husband for her depression. This discourse seemed disempowering in that it ascribed a dominant role to the husband, and enabled the wife to absolve herself from responsibility. It may be argued that such a criticism reflects a Western perspective as the ‘truth’. Perhaps the way forward is to allow the two conflicting discourses to dialogue in a way that would respect Muslim tradition but allow the discourse of equal rights and responsibilities of individuals also to be recognised. In a feedback interview Naseema agreed that this kind of dialogue could have constructive outcomes.

Tribal custom
At one point in Mpho’s story it seemed as though tribal custom had made her struggle against depression worse, for example when she was expected not to visit her dying grandfather because of a tribal tradition that a newly-wed woman could not see her family until a certain period of time had elapsed. From a western, individualistic perspective, this tradition seemed oppressive. However, the original intention was to help the new wife adjust to the separation that marriage involved. In the feedback interview, Mpho indicated that although her life had been complicated by the tradition, she did not perceive it as oppressive.

The spirituality of simplistic denial
Simon had encountered a spiritual discourse in the Christian community that he found subjugating, namely, the denial of the reality of his depression with simplistic responses. He expressed it thus:
...if someone is worried, telling them not to worry doesn’t help them at all. Maybe you don’t know how to help them but it doesn’t help them to tell them not to worry.

The story of Catherine resonated with Simon’s experience. She recalled one such simplistic solution as follows:

> Christians can sometimes be your worst enemies too, which is terrible to say, but it is. Um – because people often say, just leave it with the Lord, and really walk out in faith, and you’ll do it.

An alternative explanation of this voice might be that it in fact does not represent an aspect of true spirituality at all, but a subjugating discourse propagated by the faith community.

**Depression as unspiritual and sinful**

The spiritual voice suggesting that to experience depression was unspiritual was a subjugating voice for Marion, because it led to guilt feelings:

> …when I was depressed and negative, I had a guilty feeling because – um – I am a child of God, and I say all these things and I believe in Him, and I knew He was there, and I still feel this way. So it gave me a bit of a guilty feeling.

Catherine likewise suffered from a belief in the Christian community that a Christian should not experience depression, and if they did, it was sinful:

> In the beginning… I felt, this was wrong of me to be depressed. That it was a sin. That it was – having Christ as my Saviour, what on earth was the problem with me going into these bouts of depression?

Interpreting the depression through this lens was upsetting for Catherine.

**A masculine view of God**

Speer (2005) contends that masculine language is part of society’s oppression of women. In the light of this, it was of concern to note that all the participants, except James and Rajesh, used the masculine pronoun for God. James used ‘God’
throughout his story as though he was aware of the oppressive discourse, and Rajesh felt that Hinduism allowed for female expressions of God. It may be argued that six of the participants seemed comfortable with a masculine view of God, suggesting that ‘ordinary people’ do not find the masculine picture of God oppressive. An alternative explanation could be that they had been socialised into accepting a male God as the norm.

**Language used to describe depression**

Language is central to a social constructionist approach, because language is the lens through which we view reality (Burr, 2003; Edley, 2001; Liebrucks, 2001). It would therefore seem crucial to analyse the language used to describe experiences of spirituality and depression.

**Metaphors used to describe depression**

James, on three occasions, described depression as a zombie-like state, an image that communicated the lack of life and energy he experienced when depressed. He also referred to depression as a swamp: a state of lostness one enters into, and can’t get out of. Depression also “blunted” James’s ability to think and his ability to experience spirituality. He also compared depression to a seasonal, or cyclical phenomenon in its inter-relationship with depression:

> Depression regenerates spirituality in a sense, the way in which winter allows plants to regenerate

Angel described depression as a pit, and Catherine described it as a dark pit. The image communicated powerfully the trapped and horrible feelings engendered by depression. Angel also compared depression to a grey world, an image that conjured up a picture of a life without meaning, pleasure, joy, laughter, colour, variety. Marion expressed the pain of depression and her desire to escape it thus:

> It was like I wanted to go and sit in the corner, and cover myself up, and say, “Let it go away…and when it’s over, I’ll come back into the room”…

Catherine also expressed her desire to escape in a metaphor about depression as a battle:
One of the things is, your emotional and psychological way of trying to cope with merely even the mundane things of life, becomes a much – such a battle...I would rather just lie on my bed and cover my head, and not face the world.

Catherine also referred to depression as something that “sneaks up on you”, in this way expressing how it gradually became a part of her life without realising it. Catherine also described depression as “engulfing” and “enveloping”, images which have nuances of being swallowed up, claustrophobia and being trapped. Catherine also compared depression to being lost in a forest, which gives an idea of a sense of confusion, fear, no direction. Catherine also described depression as making her feel “like a rat in a cage” when relating how depression was linked to the many demands upon her. Finally, Catherine compared depression to a “cloud” that was obscuring her vision. Clouded vision implies an inability to see other perspectives, or perhaps a spiritual blindness, since when she used this image it was in the context of her spirituality.

From the researcher’s perspective the use of these metaphors by the participants added immeasurably to the descriptions of depression. It also suggested that depression may be, for some people, difficult to describe without figurative language. An alternative explanation could be that the above participants were particularly gifted in language, and therefore able to draw upon metaphor to describe their experiences.

Another striking feature of the metaphors used was that they all implied depression was an external reality: a swamp, something that blunts, a battle to be fought, a sneak, a forest, a pit, a cloud, a season, something that engulfs, something that envelops. None of these images communicate an understanding of depression as an inward illness, residing inside the participants. An exception was James’s “zombie-like state”.

The use of these metaphors by some of the participants suggests that figurative descriptions of depression might be helpful to include in definitions of depression,
because they describe in striking and powerful ways the effects of depression that may resonate with many people.

**Negative generalizations**

According to Robertson et al., (2005), the narratives of depressed persons may be characterized by the use of negative generalizations. The stories of these participants did not seem to support this idea, except in the case of Angel, who, as indicated earlier, used many generalizations, making the researcher wonder if generalized language is not a feature of depression, and whether therapists should introduce alternative realities into the dialogues with these clients. In her feedback interview, Angel resonated with this idea, and said she was aware of her tendency of generalizing, and was working on it.

**Cultural factors and depression**

Bullard (2002), Hussain and Cochrane (2002) and Lothane (2004) emphasize that depression is experienced differently by different cultures. The stories of these participants supported this assumption to a degree. There were three participants from non-western cultures. Mpho described a view of depression in African culture that sees depression as a blessing because depressive symptoms are often displayed by people with a prophetic gift. In the case of Rajesh, a cultural view of the family as being as important as the individual, if not more so, complicated his struggle with depression. In Naseema’s case, an Islamic cultural perspective seeing the man as the head of the home made her struggle with depression more difficult. There was evidence that these three participants were in a phase where they were “caught” between Western culture and their traditional cultures. For example, Naseema was beginning to question her Muslim traditions in a Western kind of way, Rajesh was feeling the Western pressure suggesting a divorce as the solution to his problems, and Mpho felt compelled to attend a traditional Western church, even though she did not resonate with it. This dilemma also provided Mpho with a unique opportunity as she synthesized Western and African elements in a unique and creative way. James’s story provided a fascinating example of a person from a Western culture drawing from Eastern perspectives.
Spirituality and religiousness

The common themes around this topic seemed to be as follows:

**Lived spirituality versus static religion**

According to Hudson (1995), writing from a Christian context, spirituality should be shaped and given personal expression through everyday lives. Altares (1996), writing from an Islamic perspective, says that spirituality should be fostering “God consciousness” every day. The participants in the study reflected various aspects of this theme, as opposed to religiousness, which they saw as a static, outward thing performed only from a sense of duty. James emphasised this theme with the following words:

...when it comes to scripture, just seeing them in the abstract doesn’t really work for me...Because, I think it’s just maybe my orientation to be into, um, religion being lived all the time, as opposed to being static and fixed.

Spirituality was also a part of Angel’s daily life:

...spirituality for me...it becomes a part of your life.

She contrasted this with religiousness, which was observing outward rituals, like going to church out of a sense of duty. Simon, in similar vein, spoke of spirituality as something affecting daily life as one prepared for an eternity with God. Religion, on the other hand, involved ritual and sameness:

It’s quite possible to be religious in terms of taking part in a ritual...that doesn’t particularly change.

Marion, for whom beliefs were important, stressed that those beliefs needed to be translated into a lived spirituality. Catherine conceived of spirituality as witnessing to the reality “of Jesus, our husband”, every day. For her, religiousness was just going through the motions: “You’re doing it because you’re doing it”. Rajesh described his spirituality as something he put into practice enthusiastically everyday, in order to find direction, as distinct from an inherited religiousness:

I mean, you could be a Hindu, a Moslem, a Tamil. That’s your religion. But spirituality is more focussed on... God’s work... practising – uh – good faith.

Naseema also felt that true spirituality applied to all the many different facets of life:
Spirituality...is how you live your life basically...you don't have to be a moulana to be spiritual. You can be spiritual because you are just an ordinary person, just doing the right things. There are times when just bringing up your family in the right way...is spiritual.

Religiousness, for Naseema, was “more the outward things you do”. Mpho also made spirituality part of her daily life by being open to experiences of spirituality inside and outside the church, and often praying three times daily in her own unique way, rather than observing rituals.

**Individual experience versus organized, outward religiousness**

Swinton (2001, p.20) argues that spirituality is an “intra, inter and transpersonal experience” of individuals in context. The stories of these participants bore out this description. The spirituality of James, for example, was related to personal experience:

*Spirituality is an individual experience, of, not necessarily God – um – although a lot of people would interpret it as that, but – um, as seeing the world as – um – being not the sum of its parts, but there being something more that connect things…*

Simon contrasted his own personal experience with “theoretical spirituality”. He said:

*I think that spirituality is helpful only as you experience it yourself.*

Maureen resonated with this theme when she said:

*Spirituality is knowing God, not just knowing about God.*

Angel spoke about feeling God’s presence since she had become spiritual, in contrast to previously going to church “and coming back empty”. Catherine described her experience as a love relationship felt with her “whole heart”, instead of observing an “outward script.” Rajesh seemed to agree with Catherine that spirituality is an individual experience of the heart that was more helpful than outward observance:
I always feel that it doesn’t help to go to that church and pray, when you’re not doing it in your heart.

Naseema also described spirituality as an inward personal experience, related to beliefs and values, and different from the outward observances of Islam. Mpho also seemed to connect spirituality to experience when she described an encounter with God in terms of feelings:

For the first time in a long time, I felt alive, you know.

Relationship versus rituals

Altares (1996), Foster (1992) Frankl (1965) and Hudson (2005) writing from diverse perspectives stress that spirituality could include some sort of a relationship with the transcendent. This aspect was strongly supported by the stories of these participants. James, for example, seemed to be referring to a relationship when he referred to spirituality in this way:

I don’t know if that awareness was created within me, or whether that awareness was just around me, but I became very aware of a kind of protective presence in my life, um, that was looking after me, and that I could trust.

Likewise Angel reflected a relationship when she spoke about often talking to God directly:

I speak directly to God, and as I say, He has never let me down.

Naseema, from an Islamic perspective sounded remarkably like Angel:

At other times I just spoke to Him. I just talked to God, and just…like He was around me. He was listening.

Simon expressed the relationship as journeying together with God. He also described his spirituality as “friendship with God”. For Catherine, as indicated earlier, spirituality was a love relationship with God:

Spirituality is a love relationship…I want to let the Father’s face smile on me.

Rajesh implied a relationship with God as he shared:

…sometimes you wander in the wrong path and you try to find somebody to put you on the right path again
Mpho did not express this aspect as clearly as the others, but she did imply it, for example:

\[
\text{I felt like, just taking everything out – all my troubles and everything, and handing them over to God.}
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**Spirituality renewing religiousness**

Cole (2005) has suggested that spirituality and religiousness need not be seen as enemies. She believes that there is a new perspective that combines spirituality and religiousness, in the sense of spirituality breathing new life into religiousness. Whilst James, Simon, Catherine and Rajesh believed there was a clear cut difference between the concepts, Marion, Angel, Naseema and Mpho shared that their spirituality had infused outward religious practices with new life and energy. For example, after experiencing spirituality, Marion decided to “blossom where she was planted” by exercising spirituality within the structures of her church. Angel found that spirituality meant that she now always received something from church services, whereas before, she had come away empty. Naseema also found that inward spirituality brought life to the outward religious practices of Islam. Mpho found that her spirituality breathed life into the rituals of African traditional religion.

**Ingredients of spirituality**

**Prayer**

Grenz (2003) and Foster (1992) have highlighted prayer as central to a Christian’s relationship with God. Prayer is also one of the five pillars of Islam (Altares, 1996). Prayer is also an important practice in Hinduism and Buddhism (Drummond, 1984; Paranjpe, 1984; Tobler, 2001). The researcher approached the study with the expectation that prayer would be an ingredient of the participants’ spirituality, but would be differently experienced and practised in the differing faiths represented. This assumption was proved totally unfounded by the evidence. The similarities in the experiences, and also the language used, were quite remarkable. The similarities were as follows:
Prayer as conversation with God

Rajesh reflected this natural way of talking to God:

And I would pray. I would go to the lamp, and I would pray, and I would pray, and I would tell God, ‘Please, I don’t ask you for anything else. Just give me a job.’

Mpho said:

…I felt. OK, God, I’m taking my depression and I’m giving it to you.

Catherine and Naseema, from different faiths, both spoke about prayer as continuous communication with God. Simon shared: “I don’t pray anymore. I talk to God”. James seemed to be communicating the same perspective when he said:

…God speaks as much as we speak. (Laughs). You know, we should just listen, you know.

Simon echoed this ‘listening’ dimension of conversing with God:

Prayer, generally, is a – a – monologue with God – to God – and what is necessary is dialogue with God in which we are mainly silent, and God does the talking.

Angel and Catherine both spoke to God in this conversational manner when walking their dogs! Marion resonated also with this idea of prayer. She said on at least two occasions:

I said, “Yes Lord. I hear what you are saying”.

Prayer as a set ritual versus spontaneous prayer

Foster (1992) emphasizes that prayer should have two dimensions: set times of prayer, and spontaneous prayer. Simon and Catherine seemed to only practice spontaneous prayer. Catherine, for example, put it well:

Um – you know, there are…very few set times, there is more continuous prayer. One of the nice times that I pray is when I take my dog for a walk. I – I do a lot of praying then. And also when I’m riding in my wheelchair to go and
shop, or go to the hospital...I'm always talking to God in that time. There is a continuous communication.

However Marion, Angel, James, Rajesh, Naseema and Mpho all had set times of prayer as well as continuous communication. For example, Naseema would use her Islamic rituals, the namaaz, as a help in prayer. Mpho would light candles and invite God and her ancestors in a set time of prayer. Rajesh would use Hindu customs to help him have set times of prayer and Marion would use the Anglican prayer book.

What was very striking was the way prayer functioned as a unifying thread, highlighting the similarity of spiritualities across barriers of different faiths.

The uniqueness of spirituality

Plante and Sherman (2001) draw attention to the fact that spirituality is almost impossible to define empirically. This study confirmed this observation. It seemed that the only theme common to the spirituality of all participants was prayer. There were other themes common to a few of the participants. The four participants from the Christian faith mentioned reading the Bible as an important ingredient of their spirituality, and Naseema said that the Q’ran was important to her, but reading of sacred writings was not important to the other participants. James felt that reading of the Bhagavad Ghita represented an adherence to static religion and was not for him. Forgiveness was an important ingredient of the spirituality of James, Naseema and Angel. Singing and music were important to Marion, Mpho and James. Other than these, the spiritualities seemed to be marked by how unique they were to each individual. The most striking examples were James, Catherine and Mpho. James was a “Hindu with a difference”. He drew from Hindu beliefs and practices in a way that worked for him, but rejected Hindu practices which he considered oppressive. He described it thus:

I’d say I had probably committed myself to spirituality, to being like a type of universal spiritualist, in a sense, but, um, definitely being very sympathetic to a Hindu world view, and not a secular Hindu world view, because, while I saw a lot of problems with secular Christianity, I saw just
as many with secular Hinduism, secular Islam, and those kinds of practices were really oppressive to people.

Catherine was able to incorporate aspects of another denomination into her spirituality, while Mpho combined African traditional religion and Christianity in a way that seemed absolutely unique, but worked for her. Naseema also practised a distinctive and developing kind of Islamic spirituality. Angel, a traditional Anglican, included a charismatic experience in her spirituality, but continued to attend the Anglican church. Simon’s authenticity led him to use particular books at particular times that were appropriate and his idea of prayer as listening was incorporated into his unique spirituality. Even Marion, whose spirituality was perhaps the most traditional, used metaphors of spirituality and depression that were unique to her experience.

It can be seen that spirituality seems to be such a unique, personal phenomenon that it may be beyond empirical definition and that future research in this area may need to be mainly qualitative.

**Spirituality as a means of dealing with depression**

There seemed to be five common themes:

**Prayer**

Prayer was an ingredient of spirituality that seemed to help all of the participants. James prayed at the Ashram, which he found helpful. Angel felt that praying to God all the time assisted her, as did Catherine. Marion also conversed with God, while Simon suggested the listening dimension of prayer was helpful to him. Rajesh said:

> it makes you feel better. It gives you that strength.

Naseema said:

> At other times I just spoke to God, and just – uh – like He was around me. He was listening, and I felt His presence…So – I suppose that’s how it helped.

And Mpho, after committing her problems to God in prayer, said:

> I felt alive, you know…I felt alive.
Spirituality as a means of externalization

Robertson et al. (2005) suggest that spirituality may help depressed persons as a means of externalization. The stories of the research participants seemed to support this view. The metaphors of spirituality used by the participants especially seemed to convey an idea of externalization. For example, James felt that that spirituality functioned as a kind of protective bubble that extracted him from the situation:

But anyway, I was depressed for a long period of time because of this...the best metaphor I can use is, like, this calming, protective bubble that I was in, that I was completely, um, taken away and removed from the situation, and the bad, negative aspects of it, and allowed to see things very differently.

Angel said:

...spirituality is really leaving things in God’s hands.

Simon’s image of journeying through depression with God also seemed to convey a degree of externalization. Marion’s metaphors of spirituality as God carrying her, and as an anchor also seemed to imply externalization: God carried her over depression, an external entity and the anchor of spirituality gave her stability in the midst of an external storm. Catherine used the image of God helping her to fight the external enemy of depression:

He’s going to battle with the enemy, I’m just there.

Catherine also used the metaphor of spirituality as “a sunbeam that pulls you up” out of the pit of depression, which articulated the idea of externalization. It could be argued that Rajesh was expressing the idea of externalization with his emphasis on God giving him direction, out of depression, as it were. Naseema also expressed this idea of depression as something to get out of when she said:

...if our parents didn’t help me spiritually...I don’t think I would have gotten out of my depression

Mpho externalized her depression by giving it to God:

...I felt, OK, God, I'm taking my depression and I'm giving it to you...whatever is happening to me I put it into your hands...I felt like, just taking everything out – all my
troubles and everything, and handing them over to God.
Yeah, and I felt relieved.

Spirituality giving a sense of meaning
Ai et al. (2005), Frankl (1965) Swinton (2001), and from an Islamic perspective, Altares (1996) emphasize spirituality as something giving meaning to life. There was some support for this idea from the participants. James seemed to have this in mind when he said:

…it was so overwhelming that I think I became disjointed from that environment around me, and I needed to find something else that tied all of these things together and make the world make sense for me in some way.

Spirituality helped Catherine find meaning through suffering:
Um – and that has been one of the certainties in my life. Um – that God can use me more, being disabled, than He could ever have used me if I had not been disabled. Because it’s a bigger miracle, it’s a daily miracle – to sit in a wheelchair and smile, than to be on your feet…And this is how I see my disability, and God’s will in my life as a person…I have been able to glorify Him and to praise Him, in my disability.

Rajesh reflected a theme of Frankl (1959), namely, that there is meaning in suffering:

…I believe everything happens for a reason. It’s God’s will. It’s His way of …teaching you or making you a better person.

In similar vein, Mpho found that a sense of meaning helped her to carry on:

And I told God, “I do not believe that you could have made me survive all the abuse, and survive all this hurt, even though I felt like giving up most of the time, but I didn’t. It was for a reason. So I’m not giving up now.”

Angel found that her experience of the Holy Spirit brought new meaning into the emptiness of her life, Simon’s idea of friendship with God formed the existential
basis of his life, Naseema found meaning in the Islamic practices of her family, and Marion said:

\[ I \textit{might have felt helpless and hopeless, but I never stopped believing. Whatever the reasons were, God was in it.} \]

**Spirituality as openness to experience helping to deal with depression**

This theme seemed very significant because it was not apparent in the literature on spirituality and depression. It also provides a link between spirituality and mainstream psychology, in terms of Rogerian psychology. James’s openness to experience helped him to find a spirituality that dealt with depression. James said:

\[ \textit{To remain open to these things, to see more and more things as being expressions of God, as opposed to…this is the bad and terrible world, you know, and the wonderfulness of life is somewhere else. Everything can be an expression of God. Every being, every person, every kind of living thing can be an expression of God…} \]

Mpho likewise was open to both western Christianity and African traditional religion, in this way synthesizing a spirituality that helped her. Angel was open to the experience of a certain medication being unhelpful to her, and, despite the resistance from her psychiatrist, she persevered, using a psychologist and a general practitioner to find a new medication that really helped her. Simon was very open to experience in that he realized that certain books were no longer helping him, and so he moved to others that helped him:

\[ \textit{As I’ve grown older, I’ve found that the real important thing is your relationship with the Lord. And so now I find that books that were of no value to me when I was twenty five – like books on prayer – are now real helpful.} \]

Marion was open to the experience of being gently nudged in the direction of priesthood and Rajesh was open to the connection that spirituality gave him with his wife. Naseema was experiencing dancing in her house as not harmful, because it didn’t hurt anyone, and allowing this to modify her beliefs. Catherine,
after an initial period of denial was open to the reality of what it meant to be disabled, and therefore better able to deal with it.

The healing of relationships through spirituality

Worthington, Berry and Parrott (2001) draw attention to the importance of healed relationships in psychological health and discuss, in particular, forgiveness. Social constructionism suggests also that depression exists only in a context of shared relationships (Burr, 2003) and ecosystemic therapists remind us of the importance of the contextual pattern of relationships (Moore, 2003a). The experience of the participants suggested that spirituality can be a key factor in the healing of relationships, thus helping to deal with depression. James found that spirituality helped him to forgive his father, and Angel declared about the person who had molested her as a child:

*I said to her I had forgiven him. It’s gone. It’s finished.*

Simon found that the connection he made with people in South Africa helped him to cope better with the depression resulting from the rejection he had experienced in his previous appointment. Marion seemed to need the healing of her relationships with members of her congregation who had not supported her in order to cope better with her depression. Catherine was able to forgive her father who had become aggressive when he had Alzheimer’s: “I *mean, it was not his fault*”. Naseema forgave her abusive mother and Rajesh was finding that spirituality was beginning to heal his relationship with his wife by providing a dimension where they could connect. Mpho found that growth in spirituality, as well as individual and marital therapy, helped to heal her relationship with her husband:

*I had to complete myself first, in order for us to be complete for each other...Now we have learnt to co-exist. We have learnt to respect each other.*

Conclusion

It can be seen that the themes in the stories of the participants articulated rich, in-depth information that highlighted the complexity of spirituality and depression, and also contributed to fresh insights and new perspectives on these phenomena and
their relationship. The themes were analyzed and discussed in the context of voices from the literature, society and other current discourses regarding these phenomena, in this way enabling the voices of the participants to be heard in the current context of research on spirituality and depression.
CHAPTER EIGHT

CONCLUSION: ROOTS AND WINGS – REFLECTIONS ON THE JOURNEY

Introduction
In this chapter an evaluation of the research will be attempted by referring to the aims of the research, as well as to the strengths and limitations of the study. Recommendations will also be made regarding clinical practice, future research and books on depression for the popular market.

Evaluating the study in terms of the research aims
One of the first principles of evaluation of research is to assess whether the research achieved its aims (Scheurich, 1997). The general aim of the research was to allow persons who journey with spirituality and depression to voice their experiences in a South African context. The researcher tried to the best of his ability to allow the voices of eight participants to be heard, by in-depth interviews, by asking “what” and “how” questions, by being a non-intrusive voice in the interviews, and by sharing the researcher’s interpretation of the stories with the participants, inviting their feedback. On the whole, participants felt that the interpretations were trustworthy (dependable and credible). Some of the criticisms articulated in the feedback were then incorporated into the interpretations.

There were five subsidiary aims:

- Did spirituality help or hinder people in dealing with depression? The interviews seemed to elicit detailed and rich information in this regard. The stories suggested that spirituality was a means of dealing with depression, although there were also subjugating ‘voices’ in perceptions of spirituality that contributed to depression.

- What language do people use in their stories of spirituality and depression? The language used by the participants was analyzed. In particular, metaphors of depression and spirituality were examined and their meaning discussed. It was also noted that one of the participants tended to use negative generalizations.
• How do ordinary people understand and define spirituality and depression? The eight participants were “ordinary people” who offered definitions and descriptions of depression and spirituality. Their definitions revealed that they understood depression far more broadly than the current psychiatric definitions. Their definitions of spirituality articulated a view of spirituality as primarily an inward, experiential relationship with a transcendent being, distinct from religiousness, which they defined as an outward, external ritual.

• What meanings do people attribute to their experiences of spirituality and depression? The stories of the participants were examined for common or distinctive themes relevant to the topic. These themes have been summarized in the preceding chapter.

• What subjugating voices are apparent in the stories? The interviews were analyzed for the presence of possible subjugating voices, which were discussed. From the foregoing, it seems that the aims of the research were fulfilled.

**Strengths of the research**

The strengths of the research seemed to be as follows:

• Including people from different faiths and cultures was a strength of the study, because it enabled spirituality and depression to be compared across faiths and cultures, in this way throwing new light on the phenomena in a rich, detailed manner. This approach seemed particularly appropriate for the South African context that embraces many faiths and cultures.

• As indicated earlier, the research in this field has been dominated by quantitative research, which is an important voice. However, the qualitative approach of this study enabled the voices of those who experience depression and spirituality in a South African context to be heard from the perspective of depth, richness and complexity. In this way a lacuna in the research has been addressed that will hopefully pave the way for many more studies of this nature.

• The research facilitated the articulation of new insights into a field that, in some ways, is beyond empirical definition. The uniqueness of the
spirituality of the eight participants suggested that the best avenue of
further research in this area may be in a qualitative direction.

- Feedback interviews were held with the eight participants, ensuring
  trustworthiness (dependability and credibility).

- It is hoped that a strength of the research was the involvement of the
  researcher in the research process, and the attempted transparency and
  openness in this regard. That will be up to the reader to assess.

**Limitations of the research**

- Ideally, the research needed fewer Christian participants and more
  participants from other faiths. It would have been good to have included, for
  example, a person from the Jewish faith and a Buddhist. This would have
  enabled even better comparisons across faiths.

- The researcher’s own passionate interest in both depression and
  spirituality led him to select these as a topic. Although the researcher tried
  to be aware of his presuppositions, and tried to avoid this imparting bias to
  his interpretations, it is impossible that these assumptions did not influence
  the interpretations to some extent. Another interpreter might have found
  different themes. Nevertheless, this limitation is part of the qualitative
  research enterprise and is made less so by honesty and transparency
  regarding the assumptions the researcher brings to the material.

- The research could be criticized for not being able to be generalized
  because of the small sample. Small samples, however, are typical of
  qualitative research, because it involves so much work, such as the
  transcribing and analyzing of lengthy interviews. If a team of researchers
  could select a much larger sample and find a way of analyzing these
  qualitatively together, it would eliminate this criticism.

**Recommendations**

**Clinical practice**

- The study suggested strongly that therapists should be aware of the
  spirituality of their clients, and to be open to using this aspect as part of an
  integrative therapeutic approach. It is recommended that therapists also
give attention to the spiritual dimension of their own lives, so that this may interact with that of the client where appropriate.

- Related to this, the researcher recommends that the training of therapists in a South African context include some teaching in the field of spirituality.
- The close link between spirituality and depression suggested by this study supports a recommendation for the development of a “spiritual psychotherapy” that is particularly appropriate for depression.

Future research

- Although the multi-faith nature of this research was a strength it might be useful to complement it with a more narrowly focused sample, for example, Depression and spirituality in the context of the Hindu faith or African traditional religion.
- Since the importance of culture and depression in South Africa emerged from the study, it is recommended that qualitative research be conducted into cultural factors and depression in a South African context. Perhaps eight participants from an African background could be interviewed with regard to their experiences of culture and depression.
- Two of the participants were ordained Christian ministers, whose stories of depression and spirituality were closely linked to this calling. Knox, Virginia and Lombardo (2002) have conducted a quantitative study of depression among Roman Catholic priests in America. It is recommended that a qualitative study examines the stories of depression and spirituality among South African clergy of the differing faiths.
- It is recommended that a qualitative study be conducted in the field of “spiritual psychotherapy” by interviewing therapists who try to incorporate their spirituality into their therapy.
- The research highlighted the fact that some of the participants included anxiety and obsessiveness and mood swings as part of their descriptions of depression. Further research is recommended on this aspect.
A qualitative research project is recommended on the metaphors people use to describe spirituality and depression.

The research suggested that prayer was a common denominator in people’s experiences of spirituality, and something that helped all the participants to cope with depression. Further research on prayer and depression is recommended.

The researcher and his promoter found Catherine’s story particularly moving. It is recommended that research be conducted on spirituality and depression in the stories of people living with disability.

Books on depression for the popular market
In the course of researching this doctorate, the researcher came across a book by Fitzpatrick and Parry (2004) on depression in young people. Intended for a popular market, the authors described depression not only from the perspective of the ICD-10 and DSM-IV, but included a few pages of qualitative descriptions of depression from young people that the researcher found extremely helpful. It is recommended that in popular books of this kind, as well as in pamphlets from the South African Depression and Anxiety Group and so forth, that both quantitative and qualitative descriptions be used.

The personal journey of the researcher
When I was writing up this dissertation I came across a poem by William Blake that expressed something of how I had encountered God in the story of each participant. It is entitled “The Divine Image”:

To Mercy, Pity, Peace, and Love
All pray in their distress
And to these virtues of delight
Return their thankfulness.

For Mercy, Pity, Peace, and Love
Is God, our Father dear;
And Mercy, Pity, Peace and love
Is man, His child and care.

For Mercy has a human heart;
Pity, a human face;
And Love, the human form divine:
And Peace, the human dress.

Then every man, of every clime,
That prays in his distress,
Prays to the human form divine;
Love, Mercy, Pity, Peace.

And all must love the human form,
In Arab, Turk or Jew;
Where Mercy, Love and Pity dwell
There God is dwelling too.

A professor friend of mine once shared: “Research is like chewing on a stick of biltong, only to find later it is an elephant’s tail”. This was very much my experience in this research. I started by putting my feet into a paddling pool that turned out to be an ocean! It was a very long, very exhausting journey, but a journey that was enriching and growth-inspiring beyond description.

It was enriching and growth inspiring in the following ways:

• I feel that I have come to a much deeper understanding of spirituality and depression in a South African context.

• The stories of the participants enriched my life. When I encounter them from time to time (Kimberley is a small place) there is a special bond between us.

• I was inspired to read as much of Viktor Frankl’s work as possible, and logotherapy (in a social constructionist framework) is now an integral part of my thinking.

• For the first time in my life, I read from the original works of Jung, enjoying him immensely. As a result, I began to record and analyse my dreams.
• Hearing the stories of the participants encouraged me to grow in my personal spirituality.
• Transcribing the recordings reminded me that I should listen more and talk less.

There were a couple of decisive moments in the journey. The first was when I was struggling with the social constructionist paradigm, and I was challenged by my promoter to really get to grips with the approach. I began to do some serious reading and found that the approach did resonate with me and would indeed help me to fulfil the research aims. The second was when I discovered that my promoter was planning to retire. I tend to procrastinate, and having a deadline did wonders for my motivation.

I found that the research impacted upon my everyday life in serendipitous ways. An example of this was when James’s interview inspired me to make an apology, as indicated earlier. On another occasion, when I was reflecting on the role of family relationships, I was encouraged to ask a client, “To what extent has your relationship with your father contributed to your depression?” The question opened a whole new avenue of therapy for the client. On another occasion, while I was working on the research, I received, out of the blue, an invitation to address the graduation ceremony of the Kimberley Muslim School (Madresa), which gave me some insight into Islamic culture and spiritual practices.

This research has transformed my attitude to other religions. Before this research I believed Christianity to be superior to other religions, although I did concede that other religions represented a sincere seeking after God. However, the similarities in the spiritual experiences of people, especially in the sense of spirituality as a prayer relationship with God, really impacted upon me. I am now much more open to other faiths and hope that I can, like James and Mpho, draw from other faiths to enhance my spirituality in its Christian framework.

There were many times when I wanted to give up the research. My work is very demanding and I like to give lots of time to my wife and family. I am also quite involved in the church, doing a lot of preaching. Much of the research has
therefore been done in the early morning hours and over weekends. At times it seemed that it was all too much for me and I was tempted to throw in the towel. One of the factors that kept me going was the conviction that the voices of my participants needed to be heard. I owed it to them to finish. I therefore allow them to have the final say by drawing from their stories to communicate the gains of the research:

**James:**

> Depression regenerates spirituality in a sense, the way in which winter allows plants to regenerate…While depression cuts one off, it also gives one incentives to become spiritual again, I think. That’s my experience of it, almost cyclical.

> I experienced them [Hindu practices] as positive, and having as positive an impact on the world as any other religion and I felt that – it was at that stage that I realized as well, that truth, you know, that truth is not objective, it is definitely something that has a lot to do with where you come from, and the way in which you experience life…seeing the way in which these people had so many similar ideas …

**Angel:**

> I do think my psychologist who I see now is the one who has helped me the most, because he’s brought both of the things together, if you know what I mean, you know. He’s taught me religion and depression. The one can heal the other. I don't need people all the time. I’ve started leaning on God.

**Marion:**

> Then I thought, OK, maybe God is saying, “You can’t see here, to the bottom of the valley – but I want you to step off that cliff, because I am going to be with you, because I am there.”
Simon:

I have come across – kind of pat – pat answers that I don’t really own….that when I cry, I’m told we don’t worry about this because of such and such…I don’t own that truth. It’s not my truth…and that kind of thinking doesn’t help in really dealing with the real problems…

Catherine:

…my body is not a number ten! It’s completely the opposite of a number ten! Maybe if I looked good, maybe if I was not disabled, I would be – acceptable to the opposite sex

Depression is very dark. It is a pit, where the top of the pit is just out of your finger’s reach.

Um – and that has been one of the certainties in my life. Um – that God can use me more, being disabled, than He could ever have used me if I had not been disabled. Because it’s a bigger miracle, it’s a daily miracle, to sit in a wheelchair and smile, than to be on your feet…And this is how I see my disability, and God’s will in my life as a person…I have been able to glorify Him and to praise Him, in my disability.

Rajesh:

But ja, I’m coming back to that [spirituality] now. But it really did help me. I think, you know, having faith in something, and prayers, brought me and my wife back. And the family. At least that’s one place where we can connect.

Naseema:

Sometimes I prayed – uh – prayed the way we pray. By using our type of – um – prayer. You know, using the Arabic language…the namaaz, and things like that…At
other times I just spoke to Him. I just talked to God, and just – uh – like He was around me. He was listening, and I felt – I felt His presence. So it was at different times, and in different ways. So – I suppose that’s how it helped.

**Mpho:**

Spirituality…is being open-minded about the things that happen, you know, outside the church… my religion is God and my ancestors. So I believe in both…
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