

# WHEN HAPPINESS AND A ZEST FOR LIFE BECOMES A CHORE

By Tigress luv <http://breakups.org>

Let's get one thing perfectly clear upfront – let's change the stigma that depression is sadness, and people with depression just need to stop being so selfish and 'cheer up'. Depression is no more 'sadness' than narcissism *is* selfishness, or cancer *is* pain, or death *is* crying, or paralysis *is* a wheelchair, or bad food *is* a stomachache, or love *is* heartbreak. I just wanted to clear that up. So many people think depression is just being overly sad, but it's not. Depression may *cause* sadness, as cancer *causes* pain, narcissism *causes* selfishness, death *causes* crying, paralysis *causes* the need for a wheelchair, bad food *causes* a stomachache, and love lost can *cause* heartbreak. However, depression, in itself, is not sadness.

Depression is the 'negative' of one's world. It is the deletion of the color, the muting of the music, the slowing down of life's energy and dulling of the senses. The depressed individual finds no pleasure in anything, and fails to see the 'possibility of pleasure occurring' in the future. Why bother showering, why bother going to work, why bother eating, why bother dating, why bother lifting my eyelids...? This is how depression feels. It is an all-consuming lack of verve, the death of your 'zest' for life; you have become deflated. It's as though someone drilled a hole in your soul and all your pizzazz just drained right out. "Who cares?" "Why bother?" "So what?" "And, so..?"

Depression isn't caused by sadness; sadness is a result of depression. Just as a broken leg isn't caused by pain, but pain is the result of a broken leg. But what causes depression? Oh, so many different things! There are many types of depression, including some of my very own observations and ideas on the subject, and each has its own unique cause. And, just as unique and individual are the many specific ways to manage or cure it. Therapy, medications, even self-awareness ... or the combination of all, are just some ways we have all used to control or manage depression. Key to any program's success, though, is one's ability to 'accept' their depression. *More on that later.*

Medications work well for many forms of depression, but each state of depression is as unique as the person who is suffering with it. While medications work for many, they are not a cure-all, but rather a 'hide-all'. Some medications work to fight depression as they create a sense of 'apathy' ... this works well for those who suffer from depression due to their overabundance of emotional sensations (stress, fears, worries, anger, indignation, grief, etc.). In addition, there is often a direct correlation between above average intelligence and depression. Perhaps the overly active brain thinks and ponders too much and becomes overburdened or overloaded and simply shuts down, and medications that create the feelings of apathy help slow it down to a normal range? But for others, whose very depression *is* apathy, medications to create more apathy may have a numbing, dissociative effect on them. Oftentimes it takes many months – even years – of hit-or-miss and trial-and-error to find the exact method to help each individual and his or her individual symptoms and needs.

I do not believe that any one depression is exactly like another, nor are any depressions all linked to the same cause. It is baffling how so many people and even trained doctors can jumble them all into the

same one classification. I mean, seriously? To me, depressive mindsets are as unique and individual as a fingerprint. In fact, here are some of *my thoughts* and *my observations* on various types of depression. I believe some are self-imposed, but many are not. Maybe something will hit home with you?

## REM SLEEP DISORDERS

I often wonder why medications work on some individuals, but not on others. Could it be that some depressions are actually undiagnosed sleep disorders? For example, the drugs that create a break in REM sleep patterns have specifically helped many who suffer from depression. Therefore, it is now believed that many forms of depression and anxiety may actually be linked to overly long REM sleep patterns and apnea. Unfortunately, too many doctors and clinicians treat depression as a mental disorder rather than a physical disorder. However, many forms of depression may be cured simply by wearing a common CPAP (**Continuous Positive Airway Pressure**) mask at bedtime or by taking the drug Clonazepam, which is intended for REM sleep disorders. If your depression is one that has resulted from a sleep disorder, Clonazepam or a CPAP (or both) may be the answer for you.

I have to wonder if a possibility lies in the fact that maybe depression could be a sleep disorder where the brain is stuck in a sleep-like state of non-arousal. There is a light-switch (OK, the light-switch is actually metabotropic GABAB receptors and the GABAA/glycine ionotropic receptors) in our brain that switches off when we are sleeping. It does this to prevent our physical bodies from moving about or thrashing out when we are dreaming, or physically acting out our dreams. Perhaps science will one day find a link between that light switch malfunctioning on an 'asleep-to-awake' level, which may cause our brain to remain in a sleep-like lack-luster state. This sub-lucid state may create that lack of vitality, verve or lack of a zest for life that is actually the defining core associated with depressive feelings.

## SUPPRESSED ANGER

I believe that many more 'common' forms of depression are caused by suppressed anger. The victims of domestic violence or narcissists tend to become depressed because they are unable to express their anger without punishment or fear of retaliation by their abusers. Some people get angry with their lives, their bosses, their circumstances, and, in the absence of having any control over their situation and unable to express their anger they become depressed. Bottled up anger becomes depression. And anger is about 'control'. *Or rather, the lack of it.* Anger is a simple reaction to feeling as though we have no control over a certain situation (such as a demanding boss or abusive spouse) or even feeling we have no control over our own life. Over time, individuals who have learned to stifle or hide their anger – or to 'bite their tongue', if you will – become withdrawn and depressed.

Most all anger is about feelings of lack of control. If something falls off the top shelf and hits you in the head, you may get angry because you had no control over it. If your boss makes you work late, you may get angry because you have no control over your boss's decisions. If someone cuts you off in traffic, you may get angry because you couldn't control how he or she handled his or her car. If you find yourself just plain angry all the time, you must examine your life and see what part of it you feel you have no control over. Maybe a cheating spouse, a disabled relative you must care for, or a dead-end job?

Perhaps this isn't even the life you had planned for yourself at all, but you have no power over changing it? If I have said it once, I have said it a million times... The key to peace and happiness is 'acceptance'. And as long as we fight that which we cannot change, instead of 'accepting' it, is as long as we will remain unhappy, miserable, bitter and angry.

However, not all depressions are caused by an 'obvious' lack of power and/or suppressed anger. There is also a long-term deep-rooted depression that some are almost born with, or that develops at a very young age of which suppressed anger cannot be held as its cause – except, perhaps, in the case of child abuse, incest, trauma, or neglect.

These individuals lack zest and optimism. They become defeatist and pessimist at a very early age, and oftentimes their circumstances cannot be held accountable. Many have wonderful families, no history of abuse, great opportunities, lively and bright futures and live in good neighborhoods. The depression is something inside of them rather than the result of anger suppressed or environmental contribution. However, feeling as if we have no control over our lives and situations can also cause anger in a child or young adult, and suppressing or subduing this anger may also lead to depression. There are situations that we may not be aware of in our own child's life – situations where they may not feel in control. These situations could be social or school-based bullying or even parents who focus too much on their child getting good grades, putting pressure on the child to try 'harder' or apply themselves more to their school work. Fighting parents, controlling or self-focused parents, or discord in the home may also contribute to a child feeling like they have no control over their life. Being ostracized by their peers, feeling 'different', or feeling insecure about themselves can also lead to suppressed anger. Now add the possibility that this child or young adult is also one who internalizes too much, and the resulting cocktail is a bitter one to swallow. If I could write a screenplay on adolescent depression, this would be it.

It is in 'acceptance' – and in the understanding that we have no power over certain situations, events and people – that will bring us a peaceful retrieve from our anger-induced depression.

## **ATTACHMENT DISORDER**

For others, loss or fear-of-loss triggers an unrelenting anguish and loss of enjoyment. The monks believe that attachment is the root of all human pain and grief. If one was to relinquish all their worldly physical possessions and belongings, and to hold friendships and family as mere gifts of the moment and not as possessions (objectify them), then one would never experience the grief of losing anything or anybody (as one truly never had them in the first place). If some individuals fear loss, abandonment, or have witnessed a great loss of something they have attached deeply to (such as another person, a job, a vehicle, a house, a pet, etc.) they may become depressed. This depression stems from loss or the fear of loss, and it does begin with attachment. If one removes their attachments to things or people, they also will prevent the grief associated with loss. *Because nothing lasts forever, right?* Of course, this type of depression pertains to those individuals for whom their depression is truly brought on by the sadness and the grief associated with the loss of something they were attached to. The loss of a loved one, the repossession of a house or vehicle. The loss of a limb or the loss of our health. The loss of a job or the loss of a friend. The loss of our future plans. As we attach to things, so must we also learn to lose them.

Again, it is in 'acceptance' of our losses or current situations – and understanding that we have no power over certain events and people – that will bring us a peaceful retrieve from our depression.

## **PHYSICAL AILMENTS**

Then there are those who fight depression for years, as it slowly consumes their life, only to find that it was caused by an autoimmune, metabolic, hormonal or thyroid disorder. Inflammation, in itself, causes an increase in cytokines, which, coincidentally, scientists have found a direct correlation between high amounts of cytokines and patients who suffer from depression. One should always, always rule out all physical reasons for depression. They are more common than you think and usually remain undiagnosed as patient after patient sees therapists, clinicians or psychiatrists for help with their 'mental' or 'emotional' issue, only to learn years later that it was really a physical issue all along.

## **GENETICS**

Genetics and heredity play a role in some forms of depression, too. I come from a long line of schizophrenia, depression, anxiety and bi-polar disorders and afflictions. Also, in my family tree, nary a one individual has escaped autoimmune and thyroid disorders. We have systemic lupus erythematosus, myasthenia gravis, vasculitis, irritable bowel syndrome, rheumatoid arthritis, Hashimoto's disease, Grave's disease, fibromyalgia, over *and* under active thyroids and thyroid cancers. These conditions are prevalent in almost every single member on both sides of my family tree. Additionally, geniuses and those with acute intelligence are also prevalent in my family tree. Could this be proof of a correlation between either high-intelligence, thyroid or autoimmune disorders and depression or other emotional disorders? Although I, myself, do not suffer from depression – except for the occasional bouts of 'damn, my life sucks' – I do have a sibling and two (of my six) children who do, along with diagnosed bi-polar disorder. However, many members of my family do suffer from anxiety, including me. I swear, though, that my anxiety is caused by combining caffeine drinks with my thyroid medications, as it virtually disappears if I give up even one of the two – either-or, makes no matter which one I eliminate. This makes me wonder if maybe both the caffeine – and the thyroid medicine – together may trigger anxiety.

## **EMOTIONAL NARCISSISM**

Some sufferers of depression do so as they find their depression brings them certain benefits. These are the ones for whom depression is a form of self-centeredness – or, rather, 'emotional narcissism'. Buddhists believe that an underlying sense of selfishness and egotism is the cause of all depression. In emotional narcissism, the depressive state seems to hold many benefits to the narcissist, including *manipulating others, self-cherishing* and a *sense of self-entitlement*. While it does appear that some people who suffer from depression do seem to believe that their depression and their 'self' are of much more importance than anybody else's, it is hard to say if it is truly emotional narcissism or merely that self-centeredness is the bi-product of depression. Either way, the emotional narcissist finds that their depression gains them much-needed attention with the added benefit of excusing them from participation, absolving them from blame, and allowing their egos to remain intact even after failure. It is much easier to blame their depression than to blame themselves. Depression also benefits the

emotional narcissist by giving them the advantage of having emotional manipulation and control over their victims. Lastly, the depression is used to hold and keep loved ones with you regardless of your abusive treatment of them, as most victims of a narcissist try to blame the 'disease' of depression and not the person who suffers with it.

### **SELF-INSTIGATED DEPRESSION (CHANGE / GRIEF /GUILT)**

Depression can also be a resulting response to a specific change in our lives. It may follow grief, illness, unemployment, loss, divorce or relocation. Many people get depressed during winter months. Known as Seasonal Affective Disorder (SAD), this type of depression is often successfully treated with phototherapy (light therapy). Some people feel guilty about their happiness, so they use pain to express unacceptance of negative circumstances. As though depression means you are not 'OKAYING' the pain that surrounds us in this cruel world. Others may feel guilt over having happy feelings in the wake of tragedy. If you have lost a loved one you may feel as though enjoying personal happiness is a betrayal to their memory – as if you were making light of their absence, or even crudely mocking or insulting their memory. You may feel like you are slighting them or dishonoring them if you laugh or feel happy, as your deceased loved one can no longer enjoy life. If you have caused injury or harm to another, such as in a car accident, you may feel guilty living a happy life afterwards. Depression may also be a way we punish ourselves for some imagined injustice we feel we have caused on another. It is a metaphorical 'self-cutting'; we do not harm ourselves physically, but we do harm ourselves mentally and emotionally. We deny ourselves pleasure as a way to penalize our self-imposed sins.

### **VICTIMIZATION**

Still for others, the 'why bother' defeatist attitude, an acute form of pessimism, overrides our ability to anticipate good things in our life or our future. These people lack goals or the ability to initiate with hope and excitement any future achievements or accomplishments. They sometimes feel intense anger, bitterness and spite. They feel their life has been a long series of disappointments and letdowns. They may also learn to compartmentalize themselves and the world. They sit around on their 'pity-pot', confirming their victim status and seeing the rest of the world as a nasty place. On a constant, vigilant search for new injustices transpiring against them, they see people as cruel and worthy of hating and loathing. They withdraw into themselves and their own little world, and they see themselves as victims of these cruel people, singled out by a cold and greedy, uncaring world. They may experience paranoia along with their depression. Victimization and self-persecution are difficult for concerned family members and friends to deal with as it is nearly impossible to convince those who suffer with this type of depression that you are there to help them and not there to add more harm to them. They are comfortable within their protecting blanket of depression and persecution complex, and rarely allow others in.

### **SELF-DISAPPOINTMENT**

Much the same as self-persecution, at the core of depression for some individuals is an overpowering feeling of self-disappointment or letdown. When you tell someone who is depressed to love himself or

herself, you don't understand that *that* may be the very problem to begin with; they are already too self-focused and too internalized on their 'self'. For these individuals the answer to their depression is not to learn to love themselves more, but to learn to love others more. They need to stop the exaggerated self-importance, and learn to look outside of the 'me-box'. They would benefit greatly by learning an appreciation of the world around them. When one has a deep dissatisfaction with themselves, then making others happy is often times the only way to remove the self-hate and replace it with feelings of pride and self-accomplishment. To tell someone who is overly focused on him or herself to learn to love themselves, you tell them to focus on themselves even more. It's like telling a drowning man to grab onto an anchor. Unable to see outside the 'me-box', they only sink deeper in their self-loathing and self-disappointment. However, to encourage that person to do good things for others and to place others' happiness and well-being first, you actually build self-esteem back up in them. They learn to love themselves more (by proxy), feel self-pride, and they learn to externalize more than they internalize, which is very liberating to the self-absorbed individual.

### **MAUCHENSON SYNDROME**

One thing I have noticed is that when some people who suffer from depression meet other people who also suffer from depression, there is often a debate on whose depression is worse or whose suffering is the most severe. Each wants to insist they are the bearer of the worst depression. It's like a prize, an award, as if they deserve the most 'attention' as they are the most 'emotionally diseased'. "*Nobody is sicker than poor me.*" And there you have it. Attention. They are 'special'. They weren't special in any other walks of life, but they have aced depression. They may feel like a failure elsewhere, which causes self-pity and self-hate, but they can ace the depression like a pro. They rock it, they sport it – they wear it proudly like a PhD.

It's just amazing! Whereas most people who suffer from depression tend to try to hide it, you have this one, small group of people who actually appear to be bragging about their depression, and the horrors of it. This is why I believe that some forms of depression may be a form of *Mauchenson Syndrome*. However, instead of using a physical injury to seek attention and pity (which, to the patient, translates to love and 'specialness'), it is mental injury and/or an emotional condition they use to seek attention and pity (which, to them, also translates to love and 'specialness'). It brings them love, attention and pity from others, it makes them special and unique, separating them from the crowd and making them stand out. It gives them their much-wanted, attention-getting disease, without actually having to show any physical symptoms or tangible proof of their illness. They can 'suffer' greatly from their depression, and garner all the love, care, attention and pity as possible that way. They believe that they have a 'special needs' disorder, and they feel it's a sad one, worthy of the utmost pity. They have depression and they want you to feel sorry for them for their suffering.

Mauchenson Syndrome is a disorder that makes people fake disease, illness, abuse, rape, disabilities, or other trauma in order to gain attention, sympathy, make themselves feel 'special' or 'stand out in a crowd', etc. They have mistaken this type of attention as a show of 'love' and admiration – as caring and sympathy is in direct correlation with feelings of compassion and love. They also garner MUCH attention to themselves via their 'misery' – attention that they crave in much the same manner as a narcissist

craves attention and 'specialness'. It is a disease of the mind. You can find many of these people trolling anonymously on social networks under the guise of an alias name. They posts of catastrophic events in their life, their illnesses, the beatings and abuse, their cancer, their child's cancer – any story they can 'make up' that will elicit attention and pity. As social networking 'trolls', they are burdensome. We have to understand not every sign of depression is actually a depressive disorder. Some people really do have disorders that make them feel the need for pity and sympathy. And, ironically, they have it from me... as I do pity anybody who has to pretend to be a victim to feel good about themselves. As a true victim, myself, I have to ask myself *who on Earth would want to be a victim on purpose?!*

For these individuals, desire for attention motivates their depression. This need for attention may be triggered by a lack of self-esteem, self-worth, self-love or even self-confidence, or even a desire to be 'special' – not ordinary or common as with the masses, but to stand out. They feel that attention and sympathy is equal to love and eminence, and may even seek sympathy by insisting their depression is 'unique' from others, or far more worse. Maybe claiming it is more intense, or more consuming, paralyzing and debilitating. One has to ask themselves if their depression makes them feel special and unique. Maybe even gifted? Above the rest? In its most ironic sense, depression can make you feel special, as though only you are introspective enough to see the world in its most 'realistic' and true form.

## **SOUL SHOCK**

There are those individuals where depression is an intermittent feeling. It is not a constant in our life, but rather just hits us in occasional waves that override our joy. I have this type of depression. In these cases, depression is simply a cathartic action, a way for the soul to be purged and to be soothed. A venting of life's grief and releasing it, in order to allow room for hope and joy to reenter our psyche. It's a way for us to stop the craziness of everyday life and embrace our soul.

These are the people who suffer from occasional bouts of depression, but for whom depression is not an overriding issue in their lives during the off periods. For these people, life can just become too chaotic. I call it being in 'soul shock'. They may do too much, help too many others, work too hard, mother or father demanding children 24/7, take care of a sick or disabled family member, volunteer for charities and drives, run a business, have a demanding boss or spouse, and in the process of it all they forget to take care of themselves. They give themselves no downtime, no 'me' time. In these cases, depression is just a way for the soul to regroup, take a hiatus to an allegorical 'Martha's Vineyard'. Love themselves, pamper themselves, hug themselves and just regroup and take a break and a breather from their busy lives.

## **SELF LOVE**

Most of us commonly experience feelings of rejection, unfair judgment, or ostracization at one time or another. We oftentimes may feel excluded from friends or family members, isolated, alone, different, ignored, unloved, outcast, inept, incapable, awkward, or unpopular. *This is normal*. But – for the most part – we love ourselves, shake it off and get on with our lives. We don't wallow around in self-pity, confirming our victim status and weeping to the walls. However, there are those who – instead of just

shaking off negative feelings – they become absorbed with excessive self-pity. But what use is it to us to be sad? What are the benefits to our depression? Why do we self-absorb? Because, it is only in self-pity that we feel free to love ourselves without guilt or feelings of conceit. To emotionally embrace our wounded self, hug our inner child and rock her or him to sleep. To quench our need to be loved by self. Self-pity allows us to love ourselves, to self-nurture and self-soothe our wounded soul. It allows us to feel special without guilt. Depression can be as a loving mother to us, an understanding loyal friend. We must learn to self-love without self-pity. I think the taboo of depression is not so much the ‘tag’ of mental illness, but the disgrace we place on self-pity. “POOR ME, POOR ME, POOR ME. Aw, come here sweetie and let me comfort you in my love.”

## **ABSOLVED FROM LIFE**

Let’s not forget the “I’m checking out” depression. Oftentimes, depression can have many benefits. Hard to believe, huh? Depression can sometimes protect us from the real world – a world we view as chaotic, sinful and pointless. People who do not cater to a depressive state do so by not allowing themselves to become ‘boggled down’ in subjective, existential questions. They don’t obsess over evil acts, atrocities, and wrongdoings. They are aware of war, global warming, disease, poverty and crime, let they do not own it or let it consume their being. They do not fear it. They do not self-blame. They do not catastrophize it. They try to accept that failure is a normal part of trying and not an indication of self-worth or self-ability, and so they just ‘accept’ it and let it go when things don’t go right. They don’t persecute themselves or punish themselves.

However, for others they see the world as a hard and scary place, full of risks and failures. They hide away, cocooned in the sheltering shield of their depression, and protectively guarding it as a brand-new mother watches over her newborn offspring.

These people are very shielding and defensive of their depression. They refuse to seek help, try meds, or consider other methods of understanding (gaining power over) their depression. It is as though their depression has become their friend, their lover, their soulmate – and they fear living in a world without it there to blanket and protect them from the pain of the real human race. They use their depression as a shield against the horrors of ‘what if’ or the terrors of ‘what could be’ or the off chance of ‘trying and failing’. They may have a hidden fear of the unknown, or a phobia of social rejection. Depression feels familiar, comfortable and safe to them; it shields them from having to face life.

Non-depression is terrifying to these individuals. It represents vulnerability, openness, and risks, and it requires confidence and expertise. To these people their depression becomes their security blanket. It has many rewards. It protects them from participation. From failure. From competition. From trying to act ‘normal’, to feel like they fit in. For these people, depression becomes an emotional laziness similar to slothfulness being a physical laziness. Their depression is a comforting, swaddling blanket to cover up their helplessness or fear of being a failure, hurt, vulnerable, incapable, or not good enough. It protects them from making efforts and choices, and from suffering through consequences.

It excuses them from the human race, pardoning them from active participation. They get out of having to do things or take responsibilities.



It protects them from failure, wrapped up and safely cocooned in their depression they are exonerated from having to try or make any efforts at any of life's demands, or be held responsible for any of life's failures. Depression guarantees a safe exclusion; it excuses them from living. It's a metaphoric note from their mother saying 'Junior does not have to participate in the world today'.

Those who suffer from this type of depression become very defensive of their depression. They refuse help or make claims that therapy and medications do not work on them or for them. They get angry with others who suggest methods of coping, and claim that these others just don't 'understand' their depression or what it is like to be depressed, or they remove these others from their life. They may even search the 'outside' world (outside of them), looking for new things to get outraged or depressed about, seeking out injustices and pain just to ensure that their depression remains strong and lasting.

Depression is their friend and their security blanket, protecting them and hugging them from the cruel, cruel world, and saving them from making any effort at life – efforts which carry the risk of failing or falling short of expectations. After all, you cannot be a loser if you never enter the competition to begin with. Unfortunately, those who suffer from this type of depression are the ones who are the hardest to get help for, or find a method that works to help manage the depression. They are the most blind to it and many are in denial of it. Their depression is their crutch in which they use to lean on and control the world around them – and the world inside of them, and if you take that crutch away from them, they will fall ... *they just know it*. You cannot convince them that they are using depression to control the world around them – or hide from life, or that letting go of the depression – and just going with the flow – can be liberating.

Can this type of depression simply be emotional laziness or is it fear? Do some of us enjoy our depression as it shelters us from the risk of trying or failing? Do we intentionally keep ourselves depressed in order to spare us from the harshness of the world around us? Does depression excuse us from active participation? Or does the depression, itself, cause this view? Does one cause the other, or the other way around?

### **CONSCIENCE DISORDER**

There are disorders of which affect our levels of conscience. For instance, the psychopath or sociopath lacks a conscience...then there is the empath who is cognizant of other's pain and suffering and feels a conscience for that which is *not even of their own doing*...but the depressive person may have a conscience disorder, too – one of which is conscience 'overload'. They may have too much conscience. Too much internalizing, turning inward, consumed with self, racked with guilt, self-loathing, self-reproach and self-condemnation. To them their depression has a two-fold benefit – it not only enables them to keep their abundant self-awareness, but it also allows them to use depression as a form of self-punishment.

### **IT REALLY MAY BE A CHEMICAL IMBALANCE**

Then, finally yet most importantly, there are those depressions that may be caused by certain malfunctions within our very own body. Let's face it, for many of us there really is no clear-cut sign as to why our loved ones or we are depressed or suffer from depression.

In theory, I understand that depression's major marker is the inability to feel excitement, pleasure or happy anticipation. We lose our vitality and our zest for life. So, wouldn't it be a logical conclusion that the part of our brains that incites and induces feelings of pleasure in us is somehow 'short-circuiting' or malfunctioning? Exactly! To be more precise, I am referring to the nucleus accumbens (NAc for short) – which is a part of the brain responsible for instilling in us feelings of pleasure. It is what allows us to enjoy the taste of an apple pie, or sweet lovemaking with our partner, or watching a puppy play, or an amusement park ride. Without this important 'pleasure transmitter' many of our needs would not be met. We wouldn't eat or our appetites would fade to nothing, as we would find no pleasure in the taste of food. We may freeze to death, as we would not feel happy contentment under a toasty warm blanket by the fireplace on a cold, wintery night. We may stop reproducing, as there would be no sensations of gratification in lovemaking – and if we did reproduce then our offspring may be abandoned as well, as there would be no joy in motherhood. We wouldn't feel rewards in a paycheck for a hard day's work, and we would never fall in love. Movies would leave us cold and discontented, and music would just be scratchy, irritating noises. Now, hey – that all sounds a lot like depression! Get the picture?

Wikipedia describes NAc this way: *“Different NAc subregions are responsible for different cognitive functions. As a whole, the nucleus accumbens has a significant role in the cognitive processing of aversion, motivation, pleasure, reward and reinforcement learning; hence, it has a significant role in addiction.”* ([https://en.wikipedia.org/wiki/Nucleus\\_accumbens](https://en.wikipedia.org/wiki/Nucleus_accumbens))

Therefore, the inability to feel pleasure may be directly related to a malfunction of this area. Also, is it perhaps possible that in times of great stress or grief, the NAc slows down or shuts down and then just 'forgets' to turn itself back on in some people? Hence, why some people may grieve for a short period-of-time – but eventually resume back to their normal lives, while others may seem to be 'stuck' in their grief and never fully recover from it.

Well, there you have it...above are just some of my thoughts on some of the different types and degrees of depression based on my observations. This list is not scientific, carved in stone, and not all conclusive. It is 'my' list and 'my' thoughts. I'm sure there are many more types of depressive disorders, depression degrees and speculations about links and causes. Keep reading to find more of my thoughts on what we can do to help ourselves or to help others who may suffer by depression. It may surprise you!

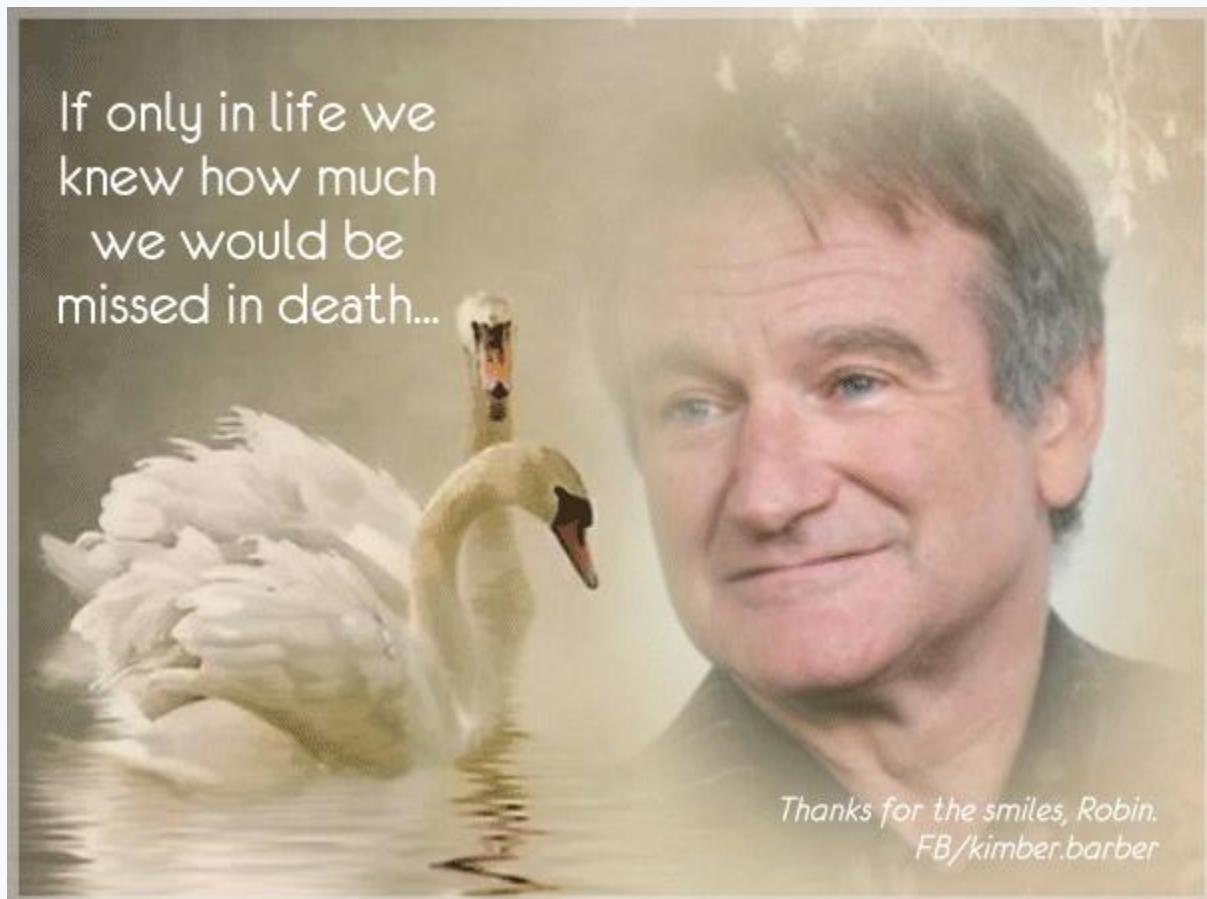
## **MEET AND GREET THE ENEMY – GET TO KNOW THE DEPRESSION**

For each individual, the treatment plan is as diverse as they, themselves, are. People are not cookie-cutter cinderblocks all made from the same mold. What works for Sally, may not work for Dick. And what makes Harry feel better may lead Tom permanently wanting to hide away from the world. Each individual is different, each case different, each cause unique, and each benefit should be catered specific to each person.

Whereas there may be many different types and causes of depression, the feelings of depression remain consistent throughout all groups – an inability to derive pleasure, anticipate enjoyment, or gain positive feedback from life. Depression causes black-and-white, catastrophic-like thinking...there are no gray areas, and, most importantly, no color. There is only 'depressed-self' in 'this-moment-now-which-sucks' and so 'why-bother'. These defeatist thoughts – and 'why-bother' attitude – ensures that you stay trapped and stagnant in the gloom of the black-and-white 'you-now' moment.

Depressive thoughts **enable** you to remain depressed. They give you constant feedback that depression is the place to be! The 'you-now' is a thought process that limits you to your immediate moment. Only you, only now. Like a tethered dog, your whole world becomes no larger than your own backyard. Depression rapidly evolves into a 'you' thing...this is the result of too much focusing inwards, or expecting rewards for focusing outwards. Self-centeredness becomes the norm. Everything revolves around the depressive person. This is a double-edged sword, for once you are in that state of mind you are unable to see your way out of it.

Depression is a cancer of the soul. Once you get it, if it isn't diagnosed and treated correctly it grows aggressively and consumes every bit of your emotional health, until you are an emotional invalid, mentally bedridden – a soul disabled. Depression is an invisible cancer. Like cancer, it is oftentimes fatal if untreated. YES! FATAL! **Depression is a fatal disease.** Depression isn't always obvious, but its resulting suicides are. Depression isn't always obvious, but its resulting alcohol abuse, drug addictions and overdoses or alcohol-related deaths are. Depression isn't always obvious, but its resulting stress-related heart attacks and strokes are. Depression isn't always obvious, but its resulting mass-shootings are.



Depression is exhaustive. You wake up exhausted, you drink or take a pill to numb your exhaustion...you go to sleep exhausted. Depression isn't a place you are at – it is a state you are in. And, contrary to popular belief, it is not a place that leaves you, it is a place that you leave.

Some people are very protective of their depression. They deny having it, or they get angry when you tell them they need help with it. Moreover, once you're in depression, the depression not only overrides your sense of okayness but also your ability to make wise decisions regarding your health and wellbeing. Once there it's hard to leave the depression, it clouds your thinking and reinforces your fog. Like a cancer of the soul, it grows rapidly, aggressively eating up healthy thoughts. Relieving oneself of depression involves acceptance and externalizing, but both are hard to do in a state of depressive mindfulness. However, telling a person who is depressed to just cheer up and shake it off, is like telling a drowning person submerged in water to just breathe.

I do believe that long-term depression can become a habit...so ingrained in us ***that we forget how to be any other way.*** It is what we have become accustomed to and therefore, it – in a sense – is comforting. An old friend. We can wrap ourselves up in self-pitying hugs and blanket ourselves in its protection, free from the guilt of happiness. The 'habit' of depression becomes an addiction, a comforting mental rush, an emotional high. You wake up with the addiction, it is there during lunchtime, it accompanies you while you watch a movie, and it cradles you in its sad warmth at bedtime. It's been in your life for so long that depressed is the *only way you know how to be.* There is no other lifestyle known to you – no other way known of which to be but depressed. And – although you may not want it anymore – you aren't able to kick it. You are helpless to its familiarity. It consumes you. You are addicted to it. You have become so accustomed to the norm of depression that *you can't fathom any other lifestyle.*

Depression causes 'moment-overload'. You become too caught up in the immediate 'now' moment. You see no future; you make no plans. You have no goals, ambitions or anxious excitements about the future. It's all now, this moment in time – gloom and doom and nothingness. You are so exhausted and physically consumed that it is an effort to raise your arms or keep your eyelids up. You pray that your body would just die to match your mind, which already feels dead.

Being a martyr will not change you, nor will it change humankind. Life was not meant to be an ill-gotten gift that one must be punished for having been gifted with. Living is not fail-proof; there is no perfection on this planet. With effort comes failure. With attachment comes loss. It is a normal part of life and one we must 'accept'.

You can't tell someone who is depressed to just 'snap out of it', nor can you convince them to let their depression go by calling to their attention all the positive blessings in their life. To help you relate, let me tell you a brief story. Many, many years ago, I worked with a wonderful (wonderful-x-10) woman named Sue. It was flu season, and poor Sue had caught a nasty flu bug. After realizing she wasn't able to kick it on her own, Sue went to her doctor who then prescribed certain medicines for sinus infection and congestion relief (I cannot remember the name of these medications now).

One of those medicines had a very rare side effect – permanent loss of ‘taste’. Rare as it was, Sue was unfortunate to become one of those statistics who suffered that ill-fated side effect. She completely and totally lost all her ability to taste food or beverages from that day forward. She would drink ‘Mountain Dew’ as she said she could ‘sense’ the sourness in it, but still she could taste nothing. Now, let’s suppose I had gone up to Sue and said, “Naw, you just need to try this big, juicy steak or eat this hot fudge sundae!” Do you think just offering her a better flavor or bigger portion would have ‘cured’ her permanent loss of taste? Of course not. **All it would have done was made her more depressed about her condition by pointing out one of the greatest joys in life that she was *missing out on*. The pleasure of taste.** Essentially, telling a depressed person to ‘cheer up’ or trying to find things that you think they might like or that will make them ‘happy’, is akin to telling Sue she just needed to eat something with more flavor, or just outright giving her a steak. It just doesn’t work that way! If it were that easy, we wouldn’t have depressed people!

Ironically, what may help instead is simply to agree with them and confirm their negative outlook. By agreeing with them, you allow them to be ‘heard’, to stop hiding their depression or feeling isolated within the boundaries of it, and this, in turn, takes away much of the power the depression holds over them. A sympathetic and understanding ear – that just listens, confirms, validates and agrees – is one of the most beautiful things we can give anybody. Moreover, when doing this to someone who suffers from depression, you help him or her release some of their depression. That is because attempting to shut out, deny or hide the depression sometimes only strengthens it. It becomes their ‘hidden’ friend...their best friend as they feel only they truly understand it. Therefore, if you agree with their depressive thoughts – and if you acknowledge their pain and sympathize with an empathetic understanding to their suffering – you will be giving them a certain degree of self-induced power over their depression. You will be relieving them of having to own all of the depression themselves. You will be relieving them of having to hide or defend their depression. You will be relieving them from the monster-size load of their depression. You will be relieving them from feeling as though the depression owns them or, worse yet, that the depression ‘is’ them. Basically, you are taking the power away from the depression, itself, and giving it back to the person who has it. All these things help reduce the depression’s hold on that person.

But, how does this work, you wonder? In two ways:

**One)** it releases the depression. See, sometimes we can’t let go of our message until we feel it is heard. When arguing with someone all we have to do is agree with them and their point of view, and the argument is over...once the other party feels heard they release the anger and the fight. It is no longer a valid matter of contention! For instance, if I had a line of people picketing outside my business, and I went out there and told them they were right, and that I agreed with their message and I supported them, they would put their signs down and go home. Once you agree with their point, their ‘message’ loses its overriding importance to them. It no longer is an issue. ***It has been heard and validated.*** They don’t have to scream it out loudly to get their point across; it’s not consuming their every waking moment anymore. The issue instantly lost some of its almighty intensity and the picketers instantly lost their overwhelming, connective passion to it. It has been heard; it is now no longer an all-powerful issue. As another example, have you ever noticed that you can remember a certain detail about something for

years, but then when you tell someone about it, all of sudden you forget what that detail was the next time you need to recall it? It's as though you erased your files, or purged your database, when you told somebody else the detail. You released it, and that meant that it now occupies less space in your brain.

**Two)** the more we try not to focus on something, the more our subconscious minds will focus on it. If you don't believe me just try NOT to love someone you are in love with. In fact, this is what causes the most pain and anguish in breakups. Our attempts to force ourselves to stop loving someone, or to try to force ourselves to 'fall out of love' with someone –, someone who we are in love with – *actually makes us love (and obsess about) that person all that much more.* It's true ... the more someone tries not to think of something or to deny something, the more they actually focus on that very thing. Want proof? OK, for the next minute, I want you to close your eyes and try not to think of Twinkies. You can think of anything else you want, as long as you do not think of Twinkies. Ok? You ready? Now remember, do NOT think of TWINKIES! Now, close your eyes and go...

...

...

...Ok, open your eyes! Were you thinking of Twinkies? I bet you were!

So there you go! When you try to convince someone in the throes of depression not to 'feel' depressed, or not to think about their depression, you only make them obsess about it more and feel more depressed. You make the depression more powerful. The same with the person who suffers from it; the more they, themselves, try not to think of their depression, the more powerful their depression may become. Instead of fighting it or refusing to admit to themselves that they have it, they simply need to acknowledge their depression to take some of its power away. This is 'acceptance', and acceptance is very peaceful. *"I have depression. I may always have depression. But depression doesn't have me."*

By agreeing with them, validating their pain, and accepting it as it is, you also are allowing them to accept it and that is very releasing, very **purging** – it helps them to let it go and take back some of their power. *"I understand your depression. It must be so difficult for you, always feeling so lackluster, muted, and isolated. I do know that the world can be a very depressing place at times. I can relate to your perception."* This works far better at helping someone lessen the pain of his or her depression – it's so much better than, *"Cheer up. Here, let's go shopping and catch a movie!"* Offering 'shopping & a movie' to someone who is depressed in hopes of making them happy is like offering a songbird to a deaf man in hopes it will make him hear.

**But use some brains when doing this...if someone is talking about harming themselves, killing themselves, or seems suicidal or a danger to society, do not agree with them for crissake! Call 9-1-1.** Although agreeing with their anger does help lessen their torment and calm them down, you do not want to encourage them to harm themselves or others. It's best to let the experts help in this situation.

However, for the most part, trying to fight depression, deny depression, cure depression, hide depression, or hate depression only gives the depression more power. When you can teach an individual

just to accept their depression, to acknowledge it, and even to embrace it, you give them powerful tools for overcoming it, or for managing it. The depression ceases to reign over them; they now can begin to reign over the depression. Remember, what causes the most pain and grief in almost every negative situation is our mind's refusal to accept the situation, to just 'let it be' and embrace it.

Anyway, you don't need to 'cheer them up' as they are not unhappy. They are just 'unliving', in a state of suspended enervation. Imagine if someone was to take all the color and sound out of your world. If emotional bonds were no longer a thing, or if love was removed from humanity. If there were no such thing as tomorrow. If our brains were reprogrammed to not feel pleasure or derive enjoyment. Now think about the concept of also not only being 'unliving' but of also being 'undead' – a zombie, so to speak. You're not sad, you're not angry, you're not anything. You are just being, just 'existing' without any vivaciousness or zest of life. This is depression. True depression is not an abundance of negative emotions; it is a lack of positive ones. And when it hits you, nothing matters and yet everything matters – however, you feel it is all hopeless, anyway, so why bother? ***This is how depression feels.***

When we are depressed, we view life as a one-dimensional string of 'meaningless events'.

## **THINK AND BECOME**

I oftentimes use the quote 'think and you will become'. Never is it more aptly applied than it is to depression... Your mind sends constant feedback that encourages and supports your negative frame of mind. "I am no good", "My life sucks", "The world is a bad place", "I'm such a failure", "I don't care", "I'm miserable", "People are cruel", "I'm unworthy", "Everybody hates me", "I feel nothing." Like listening to a subliminal tape, the more you play these thoughts repeatedly in your head, the more they become true and you play them out for real.

Unfortunately, for those caring for the depressed it is difficult to convince them to replace these negative thoughts with positive ones. However, when the feedback changes from constant negative thoughts to positive ones, such as, "I am capable", "I am lovable", "There is so much beauty that surrounds me", "I am valuable", you do become less depressed. Your vim and vigor returns. You find a new zest for life. You become vital, vibrant and energetic. This calls for mindfulness and applied self-discipline, but it can easily be mastered after some practice. At first, it will be difficult. You will be sending yourself mixed messages. It's as though your depression keeps trying to remind you to be depressed! It will send depressive reinforcements after each affirmative one just to detour *and* deter your peace of mind. *"I must take a shower. I am too depressed. Oh, isn't that squirrel cute? Wait, I am depressed. Drive to work. I am depressed. I will force myself to talk to that client, even though I am depressed. Hey, a BLT sounds great for lunch. But I have no appetite as I am depressed."* Eventually – and with persistence – your positive thoughts will override the negative ones.

## **INTRODUCE YOURSELF TO YOUR DEPRESSION**

One step in managing depression is not to think of it as one with you. Do not take ownership over it. Think of it as a unique entity all of its own and separate yourself from it. You are NOT depression any more than an addict is a drug; depression has a hold on you much the same way as a drug has a hold on

the addict. When you can separate yourself from depression you take away some of its 'power' over you. It no longer is 'you' – it is now a separate entity that sometimes affects you.

In essence, one learns to not-fight the depression, but to acknowledge and accept it as part of the huge makeup that is them. The irony as to why this works was discussed earlier. It is because the more we try not to dwell on something, or to force ourselves not to feel something, such as love or hate, the more we give that feeling power and sustenance. So think of depression as a unique part of the makeup that is you. Albeit, not a desirable part, but a part, nonetheless. And just 'accept' it as so. If you had been born with Dumbo-sized ears, fighting your ears wouldn't help them go away. Obsessing about your ears wouldn't help them go away. Hating your ears wouldn't help them go away. Hiding, masking or disguising your ears wouldn't help them go away. Only in accepting the fact that you have Dumbo-sized ears, and letting it go as such, do you actually feel some peace and release from those Dumbo-sized ears. Anything other than acceptance keeps you under the power and misery of your Dumbo-sized ears, and sucks the happiness right out of you. You **become** 'Dumbo-sized ears'.

So, go ahead and introduce yourself to your depression. As the addict in recovery has learned not to think of the drug as 'himself' – but as a separate entity from him, so should you also see your depression – or even your anxiety – as a separate and unique identity, apart from you. It is NOT you, it is not something you become or own...it is a thing you have to greet-and-meet, and still hold separate from you even as you experience the effects of it. Try to see your depression as an independent and detached entity. Do not take ownership over it; you are NOT depression. Meet it, learn it, get to be its friend, but do not become it. Just as an addict is not the drug but still must learn the drug inside and out, so are you not the depression, but still you must familiarize yourself with it. As the recovering addict must do, you, too, have to learn to live with and conquer your depression, one day at a time. You accept it, you understand it, and you conquer it by admitting defeat to it, and then relearning how to live with it ... but not to live as though you were it.

## **IN PARTING**

Every day is a genesis. Each and every morning is a brand-new dawn, an awakening of our very new 'first day' of the rest of our life. We wake up and we have this unique ability to be reborn, to start anew – *every single day we are given this blessed opportunity*. Just for today, stop being alive but not living. Stop focusing inward and start to focus out. What can you do for others? What can you build or improve today? How can you be of assistance? What goals can you go after? What would be a blue print to achieve them? Lay your depression at the doorstep and let it go for just this one day. You can take it back tomorrow if you want. It will still be there, waiting for you, should you wish to wrap yourself back up in it.

When you give kindness to others and help others, you remove your depression – the self-focused self. And always leave them with the message 'pay it forward'.

"It amazes me how some people would rather give up their life than give up their self-imposed prisons."

Tigress Luv, the Breakup Guru · <http://breakups.org>