UNPACKING "BIPOLAR DISORDER": MAJOR DEPRESSIVE EPISODE

Below is a brief overview to assist counselors in biblically ministering to individuals citing a diagnosis of "Bipolar Disorder".

Depression/Hopelessness

Regarding depression, the idea of a "chemical imbalance" as being the root (and sole) cause of the problem is extremely rare, even debatable among medical professionals. Other areas to consider include grief due to death of a loved one, major life transitions, anxiety (Proverbs 12:25), hidden sin (Proverbs 13:5), misplaced trust (Jeremiah 15:5-10), selfpity, and consequences of foolish living or poor It is also important to consider decisions. organic causes such as unusual thyroid activity or issues related to sleep apnea. Offering the comfort found in Christ is essential for one struggling in this area. (Welch, 2004; Smith, 2000; Welch, 1998)

Worry/Anxiety

Worry and anxiety are usually linked to fear. Fitzpatrick (2001) refers to fear as "a felt reaction to a perceived danger" (p. 14). Uncovering and gaining a deep and thorough understanding regarding a person's fearful thoughts and perceptions will likely reveal the underlying causes of anxiety. It is imperative to examine one's relationship with God (trusting self vs. trusting an all-sovereign God), coveting security and control, sinful thought patterns, a disciplined prayer life, and consistent Scripture reading. According to Smith (2000), medical causes of anxiety include: heart attack, hyperthyroidism, mitral valve prolapse, pheochromocytoma, and drug abuse (p. 365).

Selfishness/Self-Pity

Romans 8:5-6 reveals that those who live according to the flesh "set their minds on the things of the flesh", and "to set the mind on the flesh is death". Selfishness is a pathway to and product of spiritual death. Very often, individuals struggling with a depressed mood become centered in their own sadness, hopelessness, and despair. While it is very important to have compassion in such hardships, it is equally important (and loving) to confront self-centeredness if it is evident. The dynamic of the depressed heart is that it creates tunnel vision. People become focused on emotional difficulty, and begin to operate as if they are not functioning within a Godcentered universe. Often the misery of self becomes central, and the mind loses sight of the "things of the Spirit" (Romans 8:7). As such, lovingly encouraging clients to confront selfishness is paramount, so long as it is done with thoughtfulness, compassion and love! Recommending involvement in church related activities or some type of volunteer work is often helpful to discourage isolation (promoting an active love for others). Additionally, teaching counselees to live wisely, as outlined in Ephesians 5:15-20, will promote worship in the midst of trail via "psalms and hymns and spiritual songs" and "giving thanks always and for everything" (promoting an active love for God). Read Numbers 11:11-15 for a case study on self-pity.

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Pride

Psalm 10:4 says, "In the pride of his face, the wicked does not seek him; all his thoughts are, 'There is no God'." Pride always separates from God. While the depressed person usually does not exhibit a typically prideful demeanor, the subtle signs of pride are often present in the form of self-protection. For example, avoiding others, anger, or self-pity. Other forms of pride include doubting and becoming angry towards God during difficult times. This assumes a superior stance toward God regarding one's suffering. Comments such as "Why is God doing this to me?" or "I thought He would never put more on me than I could bear." are typical. Crying out to God in despair is one thing (see Psalms), but turning one's heart from Him because of sinful thinking is at root prideful and destructive (Job 2:9-10). In the end such thinking will produce extreme misery as it moves a person away from "God as refuge" and "Prince of Peace". If pride is present, the primary method of ministry is that of confession and repentance (James 4:6-10).

Sin/Guilt

While many within the counseling profession may avoid sin as an explanation for depression, to do so is unwise, simplistic, and void of biblical understanding. At the same time, careful attention must be made so as to address this issue with genuine love and concern. The Bible reveals the way of the unfaithful produces hardship (Proverbs 13:15). Intrinsic to the idea of unfaithfulness is sinfulness, which is often accompanied by a lack of confession to God. Concealed or deeply shameful sin is a potential root of

depression. Rather than talk a person out of his or her true guilt (a popular method of secular counseling), one's quilt should be addressed scripturally. By design, God intends quilt to prompt confession and repentance by His grace (Adams, 1979). particular areas where an individual may be partaking in sinful living serves to provide a context in which relationship with God may be restored through confession and repentance. This is a vital need for someone who is depressed. Areas that are recommended for investigation include: sexual sin, sinful anger (at God or others), bitterness, jealousy, pride, and coveting.

If, however, a person's guilt is not created by overt sin, but instead originates from issues of perfectionism (also a sin) this too can create depression, and must be addressed by outlining the futility of trying to achieve perfection by one's own strength. In either case (overt sin or disguised sin), the Gospel message, and the sufficiency of Christ's finished work must be outlined and studied.

Double-Mindedness

Double-mindedness produces instability (James 1:5-8). Double-minded living transpires in the one who does not place full trust in God for his or her wellbeing. A powerful illustration of the consequences of such living may be found in Jeremiah 17:5-7 in which the prophet explains that trusting in flesh (self or others) always creates a barren existence filled with sorrow. On the other hand, verses 8-9 of the same chapter highlight the power of trusting God. These passages emphasize that even in drought (i.e., depression, trial, difficulty), the believer may continue to bear much fruit (i.e., love, joy, peace, patience, etc.) as found in

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Double-Mindedness (cont)

in Galatians 5:22-23. The essence of whether a person will become a fruit-bearing tree or a withering shrub rests in the answer to the following question: "In whom do you place your trust?"

Grief

Grief due to loss, transition, or extreme hardship is a natural human response to suffering. When reading books like Jeremiah, Ecclesiastes, and Lamentations it is clear that prominent men of the Bible struggled with grief. Isaiah even reveals that Jesus was "acquainted with grief" (Isaiah 53:3). Therefore grief is not by nature sinful, rather it is quite natural when faced with difficulty. Providing compassion, love encouragement, kindness and comfort for those in the midst of grief is a powerful ministry for a counselor, and must reside as a priority when grief is present. Yet even in the midst of grief, it is helpful (and biblical) to highlight the importance of responding to trauma or difficulty in such a way that God is brought to center-stage of the mind (Matt. 26:39). This mirrors Jeremiah as he cried out, "For the Lord will not cast off forever, but, though he cause grief, he will have compassion according to the abundance of his steadfast love" (Lamentations 3:31). (See the book of Psalm and Jesus' prayer in Matthew 26:36-39 for examples).

Fatigue

Fatigue may be a symptom of anxiety and depression. Encouraging the depressed

individual to function with a worshipful attitude towards God even when he or she is fatigued is important. Developing daily goals centered in "loving God" and "loving others" may be a helpful motivator for someone struggling with fatigue. Monitoring sleep habits is essential. Recommending counselees to undergo a physical exam to rule out conditions such as a heart condition, anemia and sleep apnea is also advisable. As long as there are no medical limitations, seek to incorporate daily exercise into a counselee's routine.

Idolatry (Approval, Significance, Security, Control, etc.)

Every issue with which an individual struggles merits a deeper examination of the heart. Some may be depressed, yet address it with a Godly attitude whereas others may be depressed and address it with a self-centered attitude. Depression is not an automatic sign of sin, nor is itself necessarily a sin. Be cautious of jumping to unwarranted conclusions on this However, all depression requires a response that is driven by the Holy Spirit. with depression always One's struggle provides a fertile field in which the fruit of God's Spirit may be grown in abundance. It also provides context for the flesh to run rampant in deceit and corruption. Assisting counselees in deeper heart examination, not only as to potential causes of depression, but also in one's response to depression, works work powerfully promote the to sanctification in one's life. This does not assume sin is the cause of one's struggle, but recognizes the universal permeability of depravity in all circumstances. Utilizing the "Heart of the Matter Series" is recommended for this task.

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Fits of Rage/Anger

Individuals regularly who exhibit excessive anger often receive the diagnosis of "bipolar disorder" by a doctor or psychiatrist. This "diseased brain" explanation is rooted in the medical model, and attributes anger exclusively to physiological components. Such a view of human nature, if accepted completely, positions anger as being an amoral emotion stemming solely from chemical brain functions. The Bible opposes this mechanistic description of anger, instead formulating a worldview in which anger is indeed a moral emotion, originating from the heart, and experienced in reference to God (Powlison, 1995; Mark 7:21). A counselor must be prudent in not accepting excuses such as, "I rage against my husband/wife/children/friends because I have "bipolar disorder". Accepting these explanations merely perpetuates undue slavery for the counselee as it has a tendency to reinforce sin and irresponsibility under the guise of "disease". Pointing people to the Bible's explanation and prescription for anger is recommended, and holding individuals responsible for all behavior is essential.

Pride/Selfish Ambition

The terms "inflated self-esteem" and "grandiosity" are simply polished words for what the Bible would refer to as "pride", "lover of self", or "swollen with conceit" (Matthew 23:25, 2 Timothy 3:2, Psalm 119: 36). As cited earlier regarding anger, pride is not a disease, but a moral position before the Lord. It is an issue that Jesus attributes to the heart (or spiritual part) of man (Mark 7:22).

"Bipolar disorder" has often offered a license for people, including Christians, to mirror without conscience, 2 Timothy 3:2, which says, "For people will be lovers of self, lovers of money, proud, arrogant, abusive, disobedient to their parents, ungrateful, unholy, heartless, unappeasable, slanderous, without self-control, brutal, not loving good, treacherous, reckless, swollen with conceit, lovers of pleasure rather than lovers of God...", therefore excusing immorality in the name of "illness". Seek to sinful behavior biblically "scientifically", and approach such descriptions with solutions from the Bible. The root of "inflated self-esteem" is conceptualized VERY differently in Scripture than what is found in most counseling literature (Christian secular).

Fear/Anxiety:

It is always important to outline with counselees the connection between fearful living and lack of faith in an all-sovereign God. If God is indeed in control of every component of one's life, there is no need to fear. Providina discipleship, teachina. and counseling in the area of God's sovereign and loving nature is a helpful method to address fearful living. For the counselee citing "bipolar disorder". fear fosters procrastination, avoidance of responsibility, a focus on selfimage and acceptance, fatalistic thinking, acute sensitivity to others, and stress. individuals engage in such behavior, they become overwhelmed, and often "escape" via foolish and destructive behavior (i.e., engaging in buying sprees, sexual indiscretions, etc. as cited in the DSM-IV).

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Self-Control

"A man without self-control is like a city broken into and left without walls" (Proverbs 25:28). Not only does a lack of self-control allow sin to enter, it leaves the individual completely exposed to domination on the part of the enemy (world, Satan, and the flesh). The counselee who attributes foolish behavior to "bipolar disorder" does not have a proper biblical understandina of self-control. According to the apostle Paul, self-control is a fruit of the Holy Spirit (Galatians 5:22-23). Again, this places the issue of self-control as a heart or spiritual issue, not one of "chemical imbalances". While there is no question that brain functioning interrelates in significant ways to behavior, self-control for the Christian originates from disciplined living as he or she is so empowered by the Holy Spirit. Offering homework that presses the counselee in the discipline of "putting off" and "putting on" or "sowing and reaping" is helpful in training one to become "self-controlled" (Ephesians 4:22-24). As already stated, excusing a lack of "self-control" due to having a "diseased brain" (e.g., "I spent \$20,000 last night because I was in the midst of a manic episode.), is not operating from a biblical worldview. Such an approach will ultimately serve as a powerful rationale for counselees to remain in slavery to fleshly patterns.

Drunkenness:

The Bible is very clear on God's position as it relates to drunkenness. It is not uncommon for individuals citing a diagnosis for "bipolar disorder" to engage in heavy drinking

binges. Such people often point to "mania" as the culprit, often arguing, "Drinking alcohol excessively has never been a struggle for me." On the face of things, a statement of this sort may be completely true, but one does not have to have a pattern of drunkenness to engage sporadically in such behavior. Actually, the Bible does not attribute drunkenness to a symptom of brain dysfunction, rather the Bible states specifically that it is an issue of the heart (Galatians 5:21). Drunkenness is a "work of the flesh" according to Paul, and therefore must be addressed as such. Peter warns that those who practice these things are living by worldly passions, and will give an account to God for such behavior (I Peter 4:1-5).

Sexual Immorality

Whereas the American **Psychiatric** Association has formulated all diagnostic labels and descriptors from the attempted stance of amorality (due to a materialistic worldview in which there is no God), operating from the Bible requires a profoundly different system of "Sexual indiscretion" in the understandina. DSM-IV-TR or DSM-IV is called "sexual immorality" and "fornication" in the Bible. This topic is well covered in Scripture, and should be addressed directly and boldly. counselees through Romans 1:21-32 is a powerful place to begin when counseling on this issue: "For although they knew God, they did not honor Him as God or give thanks to Him, but they became futile in their thinking, and their foolish hearts were darkened." Ultimately, sexual immorality is an issue of the and а problem of

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Foolishness/Folly

Much of what makes up the description of "mania" may be summarized by the word The psalmist cries out, "My foolishness. wounds stink and fester because of my foolishness. I am utterly bowed down and prostrate; all the day I go about mourning. For my sides are filled with burning, and there is no soundness in my flesh. I am feeble and crushed. I groan because of the tumult of my heart" (Psalm 38:5-8). He is offering a powerful word-picture of what transpires when one chooses to live according to foolishness. David makes the bold claim, "The fool says in his heart, 'There is no God" (Psalm 14:1). The final analysis for the fool (whether he is Christian or not) is that he lives as if God does not exist. He or she partakes in behavior, thinking, and desires that would not be tolerated for one moment should he or she recognize God's presence in every moment. Paul warns believers to avoid foolish and unwise living, and points to an active life of continuous worship as the means to do so (Ephesians 5:15-20). Boldly confronting foolishness in this context, and lovingly teaching people to live a life of worship moment-by-moment serve to move counselees from fleshly ruled lives (exemplified by corruption and death), towards living a life according to the desires of the Holy Spirit (producing life and peace).

Idolatry

See description under "Major Depressive Disorder"

COUNSELING RECOMMENDATIONS:

- People citing a diagnosis of "bipolar disorder" often exhibit low levels of self-discipline. Therefore it is important to make sure to outline a proper sleep schedule with them so that they may receive proper rest. Discuss with such individuals biblical teaching on self-control and sleep.
- > Teach counselees to worship in the midst of depression versus becoming fixated on a cure for depression.
- > Do not counsel individuals to cease taking medication prescribed by a physician. Instead, refer a counselee to his or her physician with appropriate questions to ask the doctor (See Fitzpatrick and Hendrickson, 2006).
- Resist temptations to "be the hero". When unsure about counseling or direction regarding a counselee, consult others (counselors or pastors) who have experience dealing with those citing a diagnosis of "bipolar disorder", and grow from listening to his or her guidance.

UNPACKING "BIPOLAR DISORDER": REFERENCES AND RESOURCES

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RECOMMENDED ABC RESOURCES:

Go to: www.christiancounseling.com

Listed are a few resources that may be helpful in ministering to individuals citing "bipolar disorder":

HANDOUTS

- ✓ Heart of the Matter Series
- ✓ Depravity versus Deprivation
- ✓ Victory Over Anxiety
- ✓ Wisdom versus Foolishness
- ✓ Everyday Stress and Tension
- ✓ Walking by Faith Not by Sight
- ✓ No Suicide Contract

ASSESSMENTS

- ✓ Anxiety Assessment
- ✓ Depression Assessment
- ✓ Fear of Man Assessment
- ✓ Stress Tolerance
- ✓ Peace Assessment
- ✓ General Well-Being
- ✓ Spiritual Life Assessment