

INTRODUCTION

LORD, THE ONE YOU LOVE IS SICK

“Come to me, all you who labor and are burdened, and I will give you rest. Take my yoke upon you and learn from me, for I am meek and humble of heart; and you will find rest for yourselves. For my yoke is easy, and my burden light” (Mt 11:28–30). I frequently call to mind these words of Jesus to bring me peace amid the emotional turmoil and mental health struggles of my daily life. Jesus Christ is the answer to every question we find ourselves asking out of the depths of our hearts. But what does that mean? Recognizing the power of a relationship with Christ in our lives, the sufficiency of his grace for all our needs, and the strength and hope found in his Passion, Death, and Resurrection is an incredible first step. But too often we hear or acknowledge that he is the answer and then try to figure out what comes next on our own.

In our own life experience, we can see how there must be another step after accepting faith that Jesus wants us to take to find healing and peace. We feel paralyzed with anxiety and pray for relief but find none. We feel bedridden with depression and cry out to God for help, but we see no results. We become terrorized by our past traumas and beg for peace from above, but we still find ourselves plagued. We feel left with contemplating other deep, painful questions: *Why would God allow these symptoms into my life? Is God not healing me because I'm not praying hard enough or believing in him enough? Why would an all-loving God permit this kind of suffering for me?*

In Christian circles we often hear, “God loves you exactly as you are, but he loves you too much to leave you that way.” I’ve contemplated this phrase and how it applies to our journey toward mental wellness.

St. Paul famously says in Romans 8:28, “We know that all things work for good for those who love God, who are called according to his purpose,” and that line, too, is quickly tossed in the general direction of those who are suffering. While God may bring something good out of our suffering, that distant good isn’t the entire story. God loves us too much to allow us to stay in those things that bring us pain, doubt, and suffering and that inhibit our ability to experience his peace.

As we go through this book, we do so while contemplating different words from St. Paul, where he gives us a lifeline of hope, a connection to the loving God we all seek when we’re traveling through the darkness: “First of all, then, I ask that supplications, prayers, petitions, and thanksgivings be offered for everyone . . . that we may lead a quiet and tranquil life in all devotion and dignity. This is good and pleasing to God our savior, who wills everyone to be saved and to come to knowledge of the truth” (1 Tm 2:1–4).

God wills that everyone be saved, not just from sin and evil but also from depression, anxiety, past trauma, difficult relationships, heartbreak, addiction, and everything else that brings us pain, suffering, and separation from the love and peace God so desperately wants to give us.

First, we must come to the knowledge of that truth.

Then we have to live it and learn to see where in our lives God’s saving peace is waiting to heal us.

Let’s go on the journey together.

My name is Tommy. I’m a mental health professional, a husband, and a father of five boys, and I’m here to fill the void of Catholic conversations about mental health. I graduated with a master of arts in clinical psychology in 2005, and after collecting more than three thousand hours of clinical training, I became a licensed marriage and family therapist in 2009 and since then have been working closely with individuals and their family members as they experience the ups and downs of persistent mental health symptoms.

Most importantly, I’ve lived with mental health symptoms myself, and I’ve learned that one key to living with these symptoms is being open about them and their causes. I’ve experienced grief to the point of praying God would take my life. I’ve walked through anxiety and fear

that have led to panic attacks. I've heard God's call to bring compassion and comfort to those who are trying their best with the suffering life brings, and I pray that he will give all of us the grace to answer that call for ourselves and all our sisters and brothers.

Lord, the One You Love Is Sick

In the Gospel of John, we encounter a story about Jesus that helps us feel the depths of his humanity like few others:

Now a man was ill, Lazarus from Bethany, the village of Mary and her sister Martha. Mary was the one who had anointed the Lord with perfumed oil and dried his feet with her hair; it was her brother Lazarus who was ill. So the sisters sent word to him, saying, "*Master, the one you love is ill. . . .*" Now Jesus loved Martha and her sister and Lazarus. So when he heard that he was ill, he remained for two days in the place where he was. Then after this he said to his disciples, "Let us go back to Judea. . . ."

When Jesus arrived, he found that Lazarus had already been in the tomb for four days. . . . When Martha heard that Jesus was coming, she went to meet him; but Mary sat at home. Martha said to Jesus, "*Lord, if you had been here, my brother would not have died. [But] even now I know that whatever you ask of God, God will give you.*" Jesus said to her, "Your brother will rise. . . ."

When Jesus saw her weeping and the Jews who had come with her weeping, he became perturbed and deeply troubled, and said, "Where have you laid him?" They said to him, "Sir, come and see." *And Jesus wept. . . .*

And Jesus raised his eyes and said, "Father, I thank you for hearing me. I know that you always hear me; but because of the crowd here I have said this, that they may believe that you sent me." And when he had said this, he cried out in a loud voice, "Lazarus, come out!" The dead man came out, tied hand and foot with burial bands, and his face was wrapped in a cloth. So Jesus said to them, "Untie him and let him go." (Jn 11:1–3, 5–7, 17, 20–23, 33–35, 41–44; emphasis added)

There are three lines from that story that I go back to again and again, especially in times of suffering.

Master, the one you love is ill. The words of the sisters of Lazarus constitute the simplest prayer I can think of when we or someone we love is suffering. It reminds me of the words of the Blessed Virgin Mary at the wedding feast at Cana: "They have no wine" (Jn 2:3). These statements, these intercessions made to Jesus by those he loved, provide us with a blueprint for how we should be reaching out to him in our time of need. There's no need for poetic language; there's no need for long explanations; in fact, there's no need even for asking for a specific solution. Jesus knows what we need before we ask, before the thought is even in our minds, and he knows—far better than we could even imagine—what would be best for us in any given situation.

Lord, if you had been here, my brother would not have died. This statement became a prayer of sorts for me during our greatest trial, the death of our son. The words of Lazarus's sister are ones that we all use at certain points in our lives, when suffering and darkness descend on us and we're left wondering where God can be found in it all. We're told that all we need to do is ask and it will be given to us. And while that's most certainly true, we often misunderstand it to mean that everything will work out the way we want it to, which is most certainly not the case, and we're left calling out to Jesus, "Lord, if you had been here, my brother would not have died."

Jesus responds to us, just as he did in the gospel story, by reminding us that everything "is for the glory of God, that the Son of God may be glorified through it" (Jn 11:4). It's hard for us to hear and to incorporate into our hearts, but everything that happens to us is meant for the glory of God. That doesn't always make things easier, though, which is why I always come back to *And Jesus wept*.

Didn't Jesus know that he was going to raise his friend Lazarus from the dead? Of course. Didn't Jesus realize that pain and suffering here in this world is nothing compared to the glory awaiting us on the other side? Undoubtedly, he did. And yet he *still* wept over the death of his friend? Assuredly.

Even though Jesus has defeated death, even though Jesus presents to all of us an eternal life that will make up for all our pain and anguish, he still understands the sorrow and weeps with us. There is no claim in the Christian faith that because we have faith we won't experience the sorrow associated with suffering. Quite the opposite. Instead, the Christian faith claims that Christ weeps and suffers with us, and that brings us comfort.

How to Use This Book

This is *not* meant to be a self-help book.

While there are coping skills within this book for the various mental health experiences we may be going through, this book doesn't intend to solve all our problems. It's meant to remind us that we are not alone. Others are suffering just like us. My hope is that this book provides the impetus for *our* Catholic Church to bring our mental health struggles out into the open *without* stigma and *with* a plan for moving forward.

Each chapter in the book is dedicated to a different mental health experience we may be going through. In the case of the section on relationships, those experiences are not strictly a mental health experience, but they are emotions and experiences that can negatively affect our mental health, and they deserve to be discussed. Each contains a reflection; an explanation of what the symptoms or diagnosis actually is; practical, healthy coping skills we can all try; a brief exploration of what our faith and the saints have to say about the experience; and a list of key points we can all look to when the idea of reading an entire chapter seems overwhelming.

This book is less about having an answer for everything and more about trying to foster a Catholic community where we all suffer together, unafraid to walk forward with our sisters and brothers through their valley of tears. With that in mind, if you find yourself in a situation where you recognize you need more help than this book can provide, please flip to the "Resources" section in the back and reach out to the ones that most fit your needs. You are never alone. Help and hope are always out there.

As Servant of God Dorothy Day once wrote, “We have all known the long loneliness and we have learned that the only solution is love and that love comes with community.”¹ If this book paves the way for the growth of community for those of us Catholics struggling with our mental health, it will have accomplished more than I ever could have dreamed.

Why St. Dymphna?

Many times I have been asked various questions about St. Dymphna, the patron saint of those suffering from mental illness and those who care for them. Why is *she* the patron of mental health when it seems as though she was simply the victim of a homicidal mentally ill father? How did she become associated with interceding for those suffering from mental illness? How in the world do you pronounce her name?!

Dymphna was born in seventh-century Ireland, the daughter of a Christian mother and a pagan father named Damon who reigned over Oriel, a small kingdom on the north side of the island. Dymphna was just fourteen years old when her mother became sick and died. Dymphna had recently taken a vow of chastity, dedicating her life to Christ, thanks to her mother's witness to the faith.

After her mother's death, Dymphna's father began to spiral into grief and bereavement, to the point where her father's friends recommended he get remarried as a way to move forward. He agreed, but he vowed only to marry someone who had the beauty of his deceased wife. His friends scoured the land nearby to find a woman of matching beauty, but they came up empty, which led Dymphna's father to fall deeper into grief and eventually into a madness that focused his desires on Dymphna. He was unceasing in his efforts to convince her to marry him, but she pushed back and eventually escaped with her spiritual director to Geel, Belgium. It was there that she gained the reputation of compassion and kindness that would directly lead to her becoming the patron saint for those suffering from mental illness.

An article from fellow Dymphna fan Anne Thériault shares what happened next:

Dymphna . . . use[d] her considerable resources to build a hospice for the poor and sick. According to some versions of her legend, this hospice particularly served those with mental or neurological illnesses. If this is true, Dymphna would have been centuries ahead of the rest of Europe. Most medieval hospices turned away people with mental illness, believing them to be contagious or possessed or both. But Dymphna seemed determined to help others who suffered the way her father did.²

Dymphna's compassion and charity would eventually be her undoing, however, as her father's friends eventually discovered her whereabouts and her father, ever-deepening into his madness, tracked her down:

After finding her, Damon had her priest executed in front of her. But even that didn't convince Dymphna to marry him, so Damon beheaded her with his own sword. . . .

Some traditions hold that mentally ill patients from her hospice also witnessed Dymphna's death, and they were immediately, miraculously cured. As this story spread, Geel became a place of pilgrimage for the "mad"—anyone with mental illness, epilepsy, neurological disorders and cognitive differences. Pilgrims flocked to Dymphna's burial site, and more cures were recorded. At some point, she began to be venerated as a local saint.³

With all that, two of the questions I've frequently been asked about this heroic saint have been answered.

The pronunciation of her name, on the other hand? Well, I'll just keep trying my best . . .

DEPRESSION

1. ANHEDONIA

LORD, THE ONE YOU LOVE FEELS NOTHING

Sitting on the couch, blankly staring ahead, the noise of three young children playing right in front of me in the living room became nothing more than background static. Our oldest walked up to me to ask if he could play video games. I just nodded, unable to speak, or rather not really caring enough to say anything in reply. Our youngest spilled a package of crackers on the entryway floor, and I just cleaned it up. No words were said. No emotion was felt.

This was a daily routine in our home in the days and weeks following the death of our newborn in the spring of 2016. Sure, there were tears, anger, a feeling of hopelessness. But above everything else, there was *nothing*.

I felt numb.

When most of us think of depression, we tend to think of uncontrollable sobbing, persistent negative thinking about ourselves and our situation, and still more uncontrollable sobbing. While those are certainly painful symptoms to deal with, perhaps the most troubling effects of depression in our lives are apathy and anhedonia.

Sitting on that couch all those years ago, overcome by a complete lack of feeling, I was living in a moment where I didn't care about anything and I was completely unable to experience any kind of joy or pleasure. When we're depressed, it's precisely this lack of feeling that brings us to our knees. In feeling heartbreak, balling our eyes out, and experiencing the searing pain of depression, we're at least feeling

something. When we're in that place where we feel nothing and nothing brings us even a hint of pleasure, we're lost, we're desperate, and we need help.

Depression Isn't Just Feeling Sad

We often use the term *depressed* interchangeably with the experience of feeling sad, which has led our culture as a whole to see depression as much less serious than it is. Also, it has reinforced the idea that people should be able to just “get over” their depression because “Look at me! I was sad earlier this week and I just decided to feel better!”

It's vital for us to understand exactly what the word *depression* means. According to the *Diagnostic and Statistical Manual of Mental Disorders*, the guidebook of the mental health profession, to be diagnosed with major depressive disorder requires at least five symptoms to be present in a two-week period. These symptoms include depressed mood, diminished interest or loss of pleasure in almost all activities (anhedonia), significant weight change, recurrent thoughts of death, and more.¹ In this chapter, we're specifically looking at anhedonia, the inability to feel or even be interested in pleasure.

It can sound minor at face value, but if you really stop to think about all the brief and seemingly insignificant moments of pleasure you have throughout your days, you can start to understand how awful you would feel if those moments and experiences were snatched away. On the website Psych Central, Margarita Tartakovsky conveyed one author's description of his anhedonia: “I couldn't laugh, I couldn't cry, I couldn't think clearly. My head was in a black cloud and nothing in the outside world had any impact. The only relief that came was through sleep, and my biggest dread was waking up knowing that I had to get through another 15 hours before I could sleep again.”²

So What Do We Do?

Depression attacks our concentration, focus, and motivation, so we're quite literally impaired in our ability to come up with solutions when we're in the midst of it. So, first, don't be hard on yourself if you can't come up with healthy skills and actually do them on the fly! Instead,

we write down *when we're feeling well* a list of healthy coping skills that work for us.

Next, realize that not every coping skill you hear or read about is going to help you. You have to find the skills that resonate with you, that speak to you, that you have tried and found to be helpful. I'm focusing here on those that help us directly cope with this distressing experience of anhedonia and the lack of feeling anything; however, they can also be helpful with other symptoms of depression.

Physical activity is an important coping skill. Obviously, we don't have much motivation to be physically active when we're feeling depressed, but even starting out small can have huge benefits to our mental health when we're stuck in this situation. We get an uptick in adrenaline in response to physical activity, which can be one physical way to combat what anhedonia is doing to us.

Prayer is another go-to coping skill for anhedonia. Depression can inhibit our ability to feel motivated to pray. However, as many Catholic spiritual giants can attest to, prayer when we feel unmotivated, unmoved, and uninterested can have huge spiritual benefits, as it helps us connect with God, put our experience into words, and sometimes focus on others instead of our own depression. Having a recurring prayer schedule that you engage in when you're feeling good can come in handy when you need that stability and quiet time for meditation when you're not feeling it.

Interacting with others is another coping skill that sounds impossible when we're mired in the dark hopelessness. Yet meaningful social interactions can be a savior when we're experiencing anhedonia. In fact, the effect on our brain from positive social interaction or physical touch from someone we care about can completely turn things around. According to the professionals at Tree House Recovery, "Physical connection with other humans like hugs, holding, or even intercourse produces the neurotransmitter oxytocin. Although it is frequently called the 'love hormone' oxytocin also decreases cortisol levels. And since high cortisol levels produce symptoms of depression and anhedonia, lowering cortisol levels will also decrease those symptoms."³

Is There Healing and Relief Out There?

There is always hope, even when our lives become so overwhelmingly dark that we can no longer see it. While coping skills can and will help, they also take time and practice. So we must practice our coping skills when we're feeling well. But how do we know when it's time to get help? How do we know when it's time to get started with talk therapy? How do we know when it's time for us to consider taking medication for our mental health symptoms?

These are hard questions to answer, *and* there are different answers for each person who asks them. We begin by assessing whether our mental health symptoms are impairing our ability to function:

- Are we still connecting with family and friends, or are we isolating more than before?
- Are we still getting up on time, getting to work, and focusing during our workday?
- Are we attending classes at school and getting our schoolwork done as before?
- Are we maintaining our housing, or is our mental health experience leading us to no longer care about making rent payments?
- Are we showering, brushing our teeth, and just generally taking care of ourselves like before?
- Are we still exercising, eating as well as we normally would, and taking all medications prescribed to us as they are prescribed?
- Are we noticing that we're using substances way more than before? Are we getting involved in risky behavior leading to interactions with the police?

When we start to answer yes to these questions, we know that it's time to reach out for help. Ideally we will reach out for help *just before* we start answering yes to these types of questions, but it can be really hard to recognize that we're heading in that direction until we see an objective reality that we can name.

All that being said, we should feel free to reach out for help and explore options for therapy or medication for our mental health *at*

any time. We don't need to wait to reach a specific level of suffering. And exploring options in therapy or medication doesn't mean we're committed to doing so for the foreseeable future.

In fact, getting involved in therapy when we're well is healthy. It's helpful to have an outside perspective on our lives, one that isn't attached to us emotionally, to help give us a different way of looking at things. The same can be said of medication. If you feel as though you might need medication to help with your mental health experience, explore options with your doctor before you're in a crisis.

There *is* healing, hope, and opportunity for relief out there. If you're coping with anhedonia and mired in the inability to feel anything at all, please realize that you're not alone and you can feel again.

What the Bible Says about Anhedonia

The enemy has pursued my soul;
 he has crushed my life to the ground.
He has made me dwell in darkness
 like those long dead.
My spirit is faint within me;
 my heart despairs.
I remember the days of old;
 I ponder all your deeds;
 the works of your hands I recall.
I stretch out my hands toward you,
 my soul to you like a parched land.
Hasten to answer me, LORD;
 for my spirit fails me.
Do not hide your face from me,
 lest I become like those descending to the pit.

—Psalm 143:3–7

When it comes to depression, hopelessness, and anhedonia, we have a precious friend in the psalms. The psalms can help us find the words for prayer that can be difficult to formulate on our own when we're struggling with depression. They aren't afraid to convey the feelings we experience as human beings. They don't hold back in describing difficult feelings and in sharing those feelings directly with God. Sometimes we