

**PERSPECTIVE
USING COMMON SENSE IN FACING DEPRESSION
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I am writing this perspective with the hope that it will help give people a better understanding of depression. An understanding of the illness and appropriate treatment can ease severe pain, expedite the healing process and possibly save lives. A misunderstanding of the illness can cause irreversible harm and even death. I have witnessed much misunderstanding.

Over the years, I have heard guidance encouraging depressed members of this organization to “overcome their lazy natures,” chant many hours a day to “raise their basic life tendencies,” and “do a vigorous gongyo to increase their energy.” In the past, I had even heard people suggest chanting instead of therapy. While chanting and doing gongyo obviously have positive effects in our lives, they are not a substitute for medical treatment.

We are not religious fanatics. Buddhism does not teach us to “just chant” in lieu of receiving needed professional treatment. A cancer patient might be encouraged to chant more to challenge his illness, but he would hardly be encouraged to “just chant” and forego any chemotherapy or radiation therapy that might help. Why, then, are depressed people in many cases advised to “just chant”?

The answer probably lies in the fact that depression is misunderstood by society as a whole. Clinical depression, that is depression that is clinically diagnosed, is not “the blues” or “a mood swing.” It cannot be “shaken off” and it does not “just go away.” It is a biological illness related to unbalanced brain chemistry that affects the entire body: thoughts, feelings, behavior, physical health and appearance. The brain, like any other organ of the body, can become ill.

Furthermore, depression is an illness that can be treated. The medications used to treat depression are not mood elevators. (They have no effect on people without depression.) They simply restore the brain’s chemistry to its normal state.

In spite of the ability to treat this illness, of the many millions of Americans who suffer from depression in any given year, 80 percent can be effectively treated, but only 30 percent seek help and of that number, slightly more than half are accurately diagnosed and receive appropriate treatment. Every year, 30,000 people die of suicide nationally. The number one cause of suicide is untreated depression. (SAVE Suicide Awareness Voice of Education, www.save.org).

Recently, it was my pleasure to attend a lecture at the Chicago Culture Center given by Dr. Yoichi Kawada, Soka Gakkai vice president and director of the Institute of Oriental Philosophy, who spoke in part about depression. He first explained that in general as we continue to do gongyo, we improve in mind and spirit. As our physical functions become healthier, our mental functions naturally do, too.

Dr. Kawada then stressed, though, the importance of treatment for a person suffering from clinical depression, bipolar disorder or any other mental illness. Before attempting anything else, that person first must be able to live in a stable, normal manner. Dr. Kawada explained that medical treatment alleviates feelings of desperation, restores psychic energy and allows a person’s life to regenerate to its natural level.

He also pointed out the importance of patience, both on the part of the depressed person and people offering encouragement. Pushing a person to do things — telling him he must

chant a certain number of hours or chastising him for not doing gongyo twice a day—would be detrimental and could cause a relapse back into depression. Likewise, the depressed person cannot benefit from telling himself “I have to do gongyo” or “I’m going to cure this with daimoku.” This kind of pressure causes the opposite result.

If a person receives medical treatment and is patient with himself, both his mental health and his practice will improve, Dr. Kawada stated. Then the person will continue to improve, far past what doctors expect.

I was so happy and relieved to hear Dr. Kawada’s lecture about practical, common sense treatment of depression that incorporates—but does not solely rely on—the practice of Nichiren Daishonin’s Buddhism.

I am not a medical professional, but as a Buddhist and SGI member who is being treated for clinical depression, I am an expert on the subject. I know that pressure only hurts. I know that people can be chanting daimoku and doing gongyo regularly and still be depressed and even suicidal.

I urge such people who suffer from depression to seek professional help from a licensed psychotherapist and psychiatrist. If you are one such person and are tempted to rely solely on your Buddhist practice for recovery from such an illness, I hope that you will remember that this Buddhism does not teach us to suffer needlessly, and does teach us to use common sense.