

Depression – Understood as a collective phenomenon

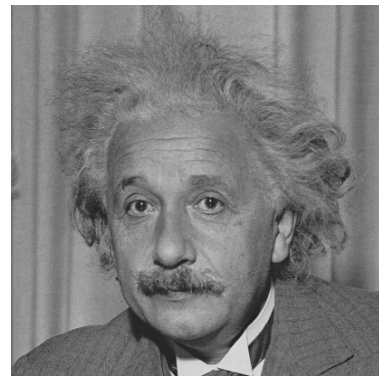
By Richard Wolf Nathan

PROLEGOMENON

Making this topic truly understandable to an audience requires that I remain on the level of personal experience. In this case, experience of one's condition, one's organism, that is, consciousness of the self... as much as possible. Then drawing conclusions as one steps back to reflect and think. We will think about depression using Albert Einstein's method:

“What, precisely, is ‘thinking’? When, on the reception of **sense impressions**, memory pictures emerge, this is not yet ‘thinking’. And when such pictures form sequences, each member of which calls forth another, this too is not yet thinking. When, however, a certain picture turns up in many such sequences, then – precisely by such return – it becomes an organizing element for such sequences, in that it connects sequences in themselves unrelated to each other. [...]... **all our thinking is of this nature of free play with concepts; the justification for this lies in the degree of comprehension of our sensations that we are able to achieve with its aid.**”

“I have no doubt but that our thinking goes on for the most part without use of signs (words) and beyond that to a considerable degree unconsciously. For how, otherwise, should it happen that sometimes we “wonder” quite spontaneously about some experience? This “wondering” appears to occur when an experience comes into conflict with a world of concepts already sufficiently fixed within us. Whenever such a conflict is experienced sharply and intensively it reacts back upon our world of thought in a decisive way. **The development of this world of thought is in a certain sense a continuous flight from ‘wonder’.**”



“A wonder of this kind I experienced as a child of four or five years when my father showed me a compass. That this needle behaved in such a determined way did not at all fit into the kind of occurrences that could find a place in the unconscious world of concepts (efficacy produced by direct **‘touch’**). I can still remember – or at least believe I can remember – that this experience made a deep and lasting impression upon me. **Something deeply hidden had to be behind things.** What man sees before him from infancy causes no reaction of this kind; he is not surprised by the falling of bodies, by wind and rain, nor by the moon, nor by the fact that the moon does not fall down, nor by the differences between living and nonliving matter.”

Albert Einstein, *Autobiographical Notes*, (1949) 1992.
(all boldface type by RWN)

So let's be detectives, using our sensation as Einstein might, and look for the origins of today's persistence and general increase of depression.

Where does such persistence of depression have its origins... despite all those pills and all that therapy? How is it that our culture has such difficulty in soothing the collectivity out of such a depressive **rut** and towards more **fluid being, love and joy**? “... human love presents such a thorny problem to man that he would rather creep into the remotest corner than touch it with his little finger...” C. G. Jung, CW5 par 466, (1910) 1976.

INTRODUCTION – Looking positively at depression



The New Orleans Blues nowadays

In English, *to have the blues*, is to be depressed. The New Orleans Delta **Blues**, that marvelous creation of the repressed, and therefore depressed, Afro-American, is, after all, an expressively creative phenomenon.

A second positive element of depression, I find, is that it serves to reduce anxiety and therefore to avoid feeling overwhelmed by the world, a catastrophic feeling avoided at all costs, as the father of neuro-psychology Kurt Goldstein reminds us. After all, we are being constantly bombarded from without by very good reasons to be anxious. Just to name a few:

- Terrorism bombings
- Hurricanes
- Floods
- Pandemic worldwide fatal infections
- Economic collapse
- Environmental collapse
- Famine
- Contamination and modification of the food supply
- Incompetent political leadership
- War

A third positive element of depression: a route back in time seeking a return to the body and the senses. "... What robs Nature of its glamour, and life of its joy, is the habit of looking back for

something that used to be outside, **instead of looking inside**, into the depths of the depressive state. [...] a relapse into the past caused by depression in the present. Depression should therefore be regarded as an unconscious compensation whose content must be made conscious if it is to be fully effective. This can only be done by consciously regressing along with the depressive tendency and integrating the memories so activated into the conscious mind – **which was what the depression was aiming at in the first place.**” (C.G. Jung, CW5, par 625. All boldface type by RWN)

What do we do at a personal level to resist being persistently stimulated by all this anxiety generating external general breakdown of collective harmony? Where must we look to find personal internal stability? Good question!

To answer this we must, as good culture detectives, first determine where and how internal stability at a bodily level broke down in the history of our culture and collectivity.

THE ORGANISM IS A STORYTELLER

There exists a body of ancient and still living stories and myths in which the organism over time in the West describes the origins of its present condition.

This is a story of five organismic epochs which describe the breakdown due to several thousand years of increasing anxiety and the eventual attempts at recovery of the organism’s internal sense of itself:

- Epoch of Primordial (original) biological Background
- Epoch of Sparagmos (**fragmentation**)
- Epoch of the Emergence of a Biological **Protective** Synthesis... armoring to protect and isolate the primordial background
- Epoch of **Re-emergence** of the Primordial (original) **Background**
- Epoch of the Ongoing Journey of the Unfragmented Whole ... **fullness of being**

We all have playing within us at any given time all five epochs.

PRIMORDIAL BACKGROUND

In the oldest stories of the oldest peoples in the West that I have tracked down, the one common theme is that stress and anxiety at first provoke breakdown of the organism in terms of tearing apart and asunder of the body. However, in these stories, the body comes back together.

SPARAGMOS

As cycles of environmental breakdown, famine and war become dominant characteristics of culture in the west anxiety and stress lead to an apparently permanent condition of fragmentation of internally derived sense. This is always expressed in terms of the **tearing apart of the body**. As the Fertile Crescent of North Africa turns to desert and famine and war proliferate, Isis and Osiris, who were ONE, split apart into vegetative being and sensation... Isis, and Mind and perception... Osiris. Then Osiris is torn into eighteen separated bodily parts. One part, the head, and thus thought, becomes dominant. All this beginning by at least 3000 BC.

The same occurs in Greek culture as the original primordial culture falters... only 80 generations ago. Pentheus, king of Athens, denies vegetative being and internal sense personified by the cult of

Dionysus which has just arrived on the Greek peninsula. The priestesses of Dionysus, led by Pentheus's mother, Agave, chase Pentheus up a tree. In Euripides *Bacchae* (late fifth century) Agave then says:

“Maenads, make a circle about the trunk and grip it with your hands. Unless we take this climbing beast, he will reveal the secrets of the god.’ With that, thousands of hands tore the fir tree from the earth, and down, down from his high perch fell Pentheus, tumbling to the ground, sobbing and screaming as he fell, for he knew his end was near. His own mother, like a priestess with her victim, fell upon him first. But snatching off his wig and snood so she would recognize his face, he touched her cheeks, screaming, ‘No, no, Mother! I am Pentheus, your own son, the child you bore to Echion! Pity me, spare me, Mother! I have done a wrong, but do not kill your own son for my offense.’ But she was foaming at the mouth, and her crazed eyes rolling with frenzy. She was mad, stark mad, possessed by Bacchus. Ignoring his cries of pity, she seized his left arm at the wrist; then, planting her foot upon his chest, she pulled, wrenching away the arm at the shoulder – not by her own strength, for the god had put inhuman power in her hands. Ino, meanwhile, on the other side, was scratching off his flesh. Then Autonoe and the whole horde of Bacchae swarmed upon him. Shouts everywhere, he screaming with what little breath was left, they shrieking in triumph. One tore off an arm, another a foot still warm in its shoe. His ribs were clawed clean of flesh and every hand was smeared with blood as they played ball with scraps of Pentheus’ body. The pitiful remains lie scattered, one piece among the sharp rocks, others lying lost among the leaves in the depths of the forest. His mother picking up his head, impaled it on her wand.” Euripides, *The Bacchae*, 1105-1140, Trad. Wiliamn Arrowsmith, 1964.



Pentheus torn to pieces

PROTECTIVE ARMOURING

We are only now beginning to understand how the organism over the last 5000 years, which is only about 160 generations, reduces anxiety to remain functional. In a conversation at my home in Italy Barbara Goodrich Dunn and I identified three kinds of depression:

1. Endogenous... biologically based and most often having a genetic component
2. Characterological... arising from and based upon the organism's historical interaction with its environment and is developmentally based. And is therefore treated differently from endogenous depression
3. Situational... associated with loss; loss of a loved one, loss of a job. Could be associated with an ego blow or abuse

Endogenous depression is often a depression of long-standing which indicates biological causes and medication solutions. When someone has a severe endogenous depression, psychotherapy may not be able to touch it without the aid of meditation to provide the internal means to be able to respond to therapy. In essence in these cases, medication forms a floor so that someone can work with their feelings without their becoming overwhelmed or flooded. A *correct* medication forms some minimal resilience. For example, when you are unable to even get out of bed in the morning, and/or are paralyzed at the prospect of leaving the house, medication is indicated.

Characterological depression is an adaptation in childhood to environmental stresses beyond one's control that cannot be dealt with in any other way than depressing the organism. This kind of depression can be a response to abandonment, abuse, or being the object of excessive control. These kinds of depressions have different experiential components: for example, there are depressions characterized by a sense of fogginess and lostness. A different kind of depression is characterized by a sense of being in a swamp or morass. A third kind is characterized by a feeling of being in darkness and cold. And finally, there is a kind of depression characterized by a feeling of ANGER. All of these are depressions that need **long term psychotherapy**.

Situational depression, if the first two conditions are not present, resolves itself. Unless trauma is present, for instance with rape, which is a traumatic experience, in which case a resulting depression cannot resolve itself on its own. Loss, the main constituent of situational depression, is a normal part of life. Situational depression resolves itself because a healthy organism has a resilience and can sustain a moderate amount of loss and trauma and eventually return to normal equilibrium.

The definition of clinical depression in the DSMIV indicates that clinical depression is diagnosed after three weeks. Thus we might look at the difference between situational depression and other types in terms of the length of time someone experiences the depression. Is the situation provoking the depression ongoing? When I am losing my job over a period of time, and I am depressed, I cannot diagnose the depression as clinical, since by getting another job I can eliminate the noxious stimulus. Or, if I am a woman and my husband has left me the divorce is going on and I am depressed. If six months after losing my job and perhaps having found a new one, or six months after a divorce, and I am still depressed, one can begin to look at the depression as clinical or characterological..

BACKGROUND RE-EMERGENCE

So. How do we regain access to the background? Good question! By working with the immobilized body via sensory awareness, breathing, self-mobilization and direct contact:

Collapsed – this person has no energy to sustain mobilization of the internal background which lies dormant. Therefore the work is to build a whole system. This person is not blocked, he/she simply never had.

Compressed – This person's organism has learned to depress or compress impulses that would otherwise naturally emerge from the background. The work is to decompress the organism so that underlying original impulses are sensed, then bringing the impulses into action.

Deadened – this person is dominated by cold and alienated depression. He/she needs to be invited into his/her own body through prolonged periods of nurturing touch.

Rigid – This is an angry person. He/she needs to experience the anger which emerges as a defense against a broken heart. Decompression of the rigidity through direct touch leads to discovery of the underlying broken heart.

In a sense depression immobilizes the body, leading to a general sense of paralysis.

CONCLUSION: FULLNESS OF BEING... Direct touch, the vegetative core and the realm of immediacy

When working with our patients there must always remain the background assumption that some however hidden nucleus of the client never fragmented. And thus, that nurturing direct touch is eventually received... resulting in real contact... that genuine sphere of immediacy and resonance Kurt Goldstein describes, can emerge.

When touching a part, even one in isolation... we are always touching the whole. Touching and styling interventions changes nature when we are aware in our own being... sentience... of the long organismic epoch of sparagmos: which tells of the lengths the organism can go to isolate its vegetative core leading to reduction of being and head dominance. **If we succeed in transmitting this fact through direct contact we relieve the enormous collective historical load landing upon each new individual. Then a sphere of immediacy may spontaneously emerge... in which this special sphere of somatic unity, always potentially present in the background, though too often ignored, is more likely to occur between therapist and patient.**

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