

# MORMON WOMEN AND DEPRESSION

**O**n February 17, 1979, KSL Television in Salt Lake City aired a one-hour documentary on depression and its effects on Mormon women.

The program generated overwhelming response from viewers—nearly 100 percent positive.

Many requested copies of the program for use in church meetings. Others wanted help in finding therapy for depression. Still others simply thanked program sponsors for openly discussing an issue that had been hidden for so long.

With permission from KSL, Inc., Sunstone prints the full transcript of the documentary. The visual impact of the people who appeared on the program is lost on the printed page, but their words are here preserved for study and reflection.

Parts of the introduction were deleted because of repetition.

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Three Faces of Depression  
Part II (The Woman)

Reporter/Producer: Louise Degn

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Executive Producer: Ed Yeates

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JOANNE RICE (President, Utah Mental Health Association)—The program you are about to see deals with a very real and important mental health problem: depression, a painful and crippling disorder that often goes untreated. As many as 25 percent of the population is estimated as suffering from depression or anxiety at any given time.

KSL Television, in addressing this difficult and sensitive issue, is to be highly commended. They're providing a real and needed service to the residents of Utah.

The participants involved are also to be highly commended for so honestly coming forth and sharing their problems. Because of the stigma still attached to mental illness, many people are reluctant to discuss such disorders.

On behalf of the Mental Health Association, a citizen advocacy organization dedicated to the prevention of mental illness and the promotion of mental health, I want to express appreciation and deep thanks for this public service.

LOUISE DEGN—Good evening. Tonight we are focusing on depression and its effects on one group of people in our community—Mormon women. By choosing this topic, though, we are not saying Mormon women are the only ones who get depressed. We single out Mormon women simply because Mormons make up a great majority of people in our community and by focusing on their issues, this program can help a large number of people. If nothing else, we can let these women know they are not alone, as so many of them think they are.

Depression is not just feeling bad for a day. It is a *clinical illness* that can be caused by such diverse things as chemical imbalances in the body, having a certain personality type, suffering the loss of a loved one or of a job, or simply being unable to cope with the social pressures in one's life. All of these factors can play a part, intertwining with one another, to cause depression.

This program has been in the making for over a year. In that time we've interviewed dozens of experts. For this

program, we chose to interview on film eleven of those people.

DR. LIBBY HIRSH, a psychiatrist at the Copper Mountain Mental Health Center in Salt Lake County. An active Mormon woman and convert to the LDS Church.

DR. CARLFRED BRODERICK, a Mormon stake president in southern California. A marriage counselor. Director of the Marriage and Family Counseling Training Program at the University of Southern California.

DR. RODNEY BURGOYNE, an inactive Mormon, as he describes himself. A psychiatrist. Director of the Emergency Psychiatric Clinic at the University of Southern California Medical Center.

DR. JED ERICKSEN, a Mormon bishop. A social worker. Director of the Psychiatric Emergency Service at the University of Utah Medical Center.

DR. R. JAN STOUT, a Salt Lake psychiatrist, a Mormon. Assistant Clinical Professor of Psychiatry at the University of Utah College of Medicine and former president of the Utah Psychiatric Association.

JAN BARKER, a Sandy, Utah, mother of four and active Mormon woman who suffered a nervous breakdown three years ago but is now recovered.

BONNIE SOBOTKA, an active Mormon woman and mother of eight from Alpine, Utah, who is recovered from a severe depression.

BARBARA SMITH, President of the LDS Church Relief Society.

And a visit to a Relief Society in Provo, Utah, which has developed its own special program to teach women how to deal with stress in their lives.

For our report, we explored five questions:

1. What is depression?
2. Why do Mormon women get depressed?

But our experts say the thing about Mormon women who get depressed is they feel the guilt stronger.

*Louise Degn*



Photography by Kent Miles

3. Do Mormon women get depressed more than other women?
4. Is there anything in Mormonism that helps overcome depression?
5. How can depression be prevented and treated?

*First, a personal experience to illustrate. What is depression?*

JAN BARKER—We were living in northern California. We had not been there long. We had three children, the oldest of whom was two and a half; the youngest, of course, was a new baby. My husband was called to the bishopric. I was very proud, still am very proud.

But I found myself losing control of my temper and my emotions and feeling very lonely. I felt like I mustn't tell anybody these things, you know. I was set out to be super-Mormon-mom and I was going to do it.

I finally went to my family doctor. I was never going to raise my voice to my children and didn't for the first two years of my mothering, and now I am screaming. He said, "Look, you have too many children. The next time you get pregnant, get an abortion." And I thought, "If that's what medical science has to offer me, then obviously that's not the answer."

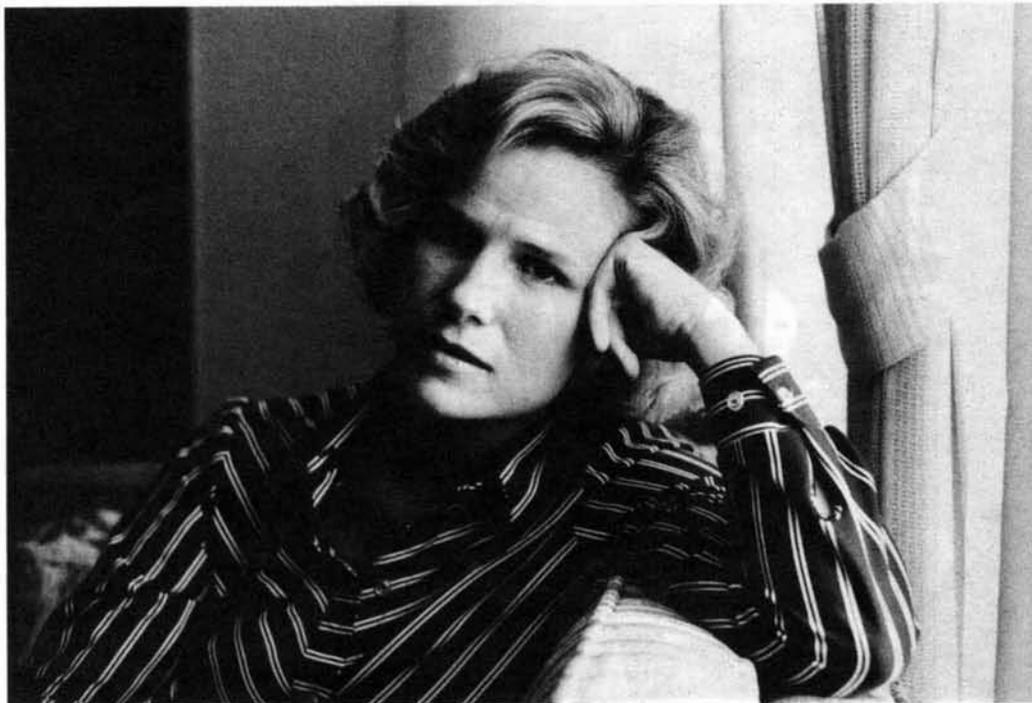
And so we went back to just gutting it out. Husband gone a lot with work and with his being in the bishopric; children sick a lot. Home by myself a lot. My husband stopped teaching in California, and we came to Utah to work on the newspaper here, and things got worse.

Finally—and this is the part that still hurts—was the day I kicked my daughter down the hall. I went to my family doctor. He'd already had me on Valium for my sleeping problems, but I'd never told him how truly out of control I was. And I said, "I'm not handling this, what'll I do?" He quickly picked up on it then, and set an appointment for me with a psychiatrist two days later.

It didn't get better right away with a psychiatrist. A lot of hard things still had to be gone through.

**I was set out to be super-Mormon-Mom and I was going to do it. I finally went to my family doctor.**

*Jan Barker*



I found myself totally responsible for the ward Christmas party by default, several other people having fallen through. And I was Junior Sunday School Coordinator. And I was saying, "I can do that. I can do that. I can do that." The day they took me into the hospital for the first time, everybody was amazed. I had been putting a good face on it.

DR. LIBBY HIRSH (psychiatrist at Salt Lake County's Copper Mountain Mental Health Center, resident at the University of Utah Medical Center, and active LDS convert)—We've had a great many women come in, and these are usually women in their late twenties or early thirties who have grown up all their lives in a very kind of sheltered family atmosphere in one community. They haven't moved around. They've been raised with one set of ideas, with one set of values, and a variety of different teachers along the way who have given them sound principles, but which they have taken as absolute: "This is the way it is and there is no other way."

By the time that these women come here, they have perhaps anywhere between two and eight and sometimes more children. They're exhausted. They never get a chance, really, to have a vacation. They don't get time of their own. And by the time that I see them, there's a great deal of feeling: "What am I doing? Why didn't I ever have any time for me? Did my husband and I really ever get a chance to know each other? And why isn't this working?"

DEGN—You say this is an illness. It's not just feeling low?

BARKER—No. Oh, there's a difference. And, I think, this is the mistake so many people make, thinking that the bandaids, the bromides, the getting-out-in-the-garden, and all those things will work.

When it gets to the point where it's—what do they call it—depressive neurosis, where it's a clinical problem that needs to be treated by things that actually block a chemical process in the brain, then it is an illness.

DEGN—*Why do Mormon women get depressed?*



I see a lot of non-think in some of the ladies who become easily depressed that I have treated.

Dr. Libby Hirsh

DR. JAN STOUT (Salt lake psychiatrist, Mormon professor of psychiatry at the University of Utah Medical School)—We find that a lot of depressed people have some characteristics that are quite similar. Often they are conscientious, hard-working, duty-bound, very responsible. They worry a lot. They get things done.

You could say, well, this is the ideal Mormon woman who has learned to do her job very well.

But they often carry around a lot of shoulds and oughts and feelings of heavy, heavy responsibility.

DEGN—A personality type, then, that makes a person particularly susceptible, combined with stresses, creates for Mormon women a fairly common type of depression?

DR. RODNEY BURGOYNE (inactive Mormon psychiatrist, Director of the Emergency Psychiatric Clinic at the University of Southern California)—It's not an unusual kind of depression; it's one that everybody has—Mormon, non-Mormon. But it's *reactive depression* which is brought on by the stresses that a person lives in. And if the person is a Mormon, then the stresses of Mormonism obviously figure into the stresses.

DEGN—So what are the stresses? Dr. Carlfred Broderick, an LDS stake president and family counselor on the University of Southern California campus, first pointed out to us the strain on Mormon women, the pressure to be perfect.

BRODERICK—We do have a lot of depression in the Church around the issue of not being able to be the perfect Relief Society woman: not grinding your own wheat and making your own bread and having your own garden and taking casseroles over to all the sick and not also being a perfect mother and an ideal housewife and well-groomed and reading the scriptures every day. And being something less than that makes a lot of people depressed who, if their standards weren't quite so high, might be more self-accepting.

BONNIE SOBOTKA (active Mormon mother of eight from Alpine, Utah)—Well, I think there's a lot of stress in our lives that a lot of other people don't have. This perfectionist thing. I mean, you know, to be the perfect mother, the perfect wife, the scriptorian, the best teacher. I mean, I just feel like most of the time most of us feel like they're asking for more than we can give. I don't know who's asking. I'm not sure where it's all coming from.

STOUT—I think in Mormonism the women themselves tend to apply a great deal of pressure on each other. I don't see it coming so high from Church pronouncements of leaders. Some of it is there, but it is largely the women themselves who carry around with them excessive expectations of what they should or should not be as Mormons.

Some of them feel they have to reach this kind of idealized, crystallized, beautiful Mormon woman, which I term the Mother-of-Zion syndrome. This is a woman who is really a myth, a mystique. She doesn't exist at all, in fact. But all Mormon women in almost any ward you wanted to go into would tell you they know a woman who is like that: She's got it all together; her children are well-groomed; she bakes bread every day; she has wonderfully clean things in the house; her husband is happy and whistles off to work; she never complains at any of the Church meetings he goes to; she's supportive and loyal; and not only that: she gets up and reads her scriptures at six in the morning. She's got it all together. And that's a very intimidating thing for the average Mormon woman.

Now, in fact, this woman exists only in the minds of other women. They may try to approximate it. But I've seen too many cases of these super-Mormon women who themselves are depressed or who have private faces, private lives that are quite different from what their ward members see out on the street.

BARKER—Other Mormon women make it very difficult, too. You would hear constantly: You have a wonderful

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Dr. R. Jan Stout



husband. You have beautiful children. Your husband's active in the church. You have everything you need to be happy and you're not happy. And it's the implied "How dare you" that makes it hard to be depressed and be a Mormon woman.

DEGN—Do you think some women in the Church expect too much of themselves?

BARBARA SMITH (President of the Relief Society)—I think we set too many goals all at once. Our real goal is perfection for ourselves. And so, I guess, if you expect perfection in the long range, that's fine. But you must remember you can reach it only one step at a time. Remember, goals are stars to steer by and not sticks to beat yourself with, as I've said before. And I think that's what we have to do. We have to remember where we are and then do something that will help us work towards that achievement.

BRODERICK—Lots of people think they have to be perfect. But not everybody has it in placards on the wall: "Be ye therefore perfect." I always like the Book of Mormon version better where it says: "I would therefore" . . . it sounds more plaintive. . . "I would therefore that ye would be perfect, even as my Father in heaven is perfect." It sounds like He doesn't really expect us to be, but He hopes for it; He would wish it on our behalf.

BARKER—But sometimes our perceptions of our role—and I really think it's our perception of our role as a Mormon woman—is what will get us into trouble. We think we have to be things we truly don't.

Some women in this church may never sew and some may never quilt, but that's okay. I think it was Carol Lynn Pearson who said: "Can I really make it into the Celestial Kingdom if I don't quilt?"

DEGN—In addition to the pressure to be perfect, there is the pressure of raising a family—not unique to Mormon-

ism, but accentuated by the LDS emphasis on large families.

KAREN HADLOCK (active Mormon from Alpine, Utah, who at the time of this interview was undergoing treatment for depression)—I didn't realize the pressures of raising five children. I had three preschool boys under the age of three and a half. And I became very tired and exhausted and not very enthused about life, the fun things I always enjoyed doing. And it was just easier to stay home than to make the effort to bundle my boys up and get out and take them somewhere, to make arrangements with a friend to trade babysitting, or to do something like that.

And I just felt, well, you always have been able to handle the pressures you've had, you'll just stick this one out and pretty soon, in two years, your boys—or at least one of them—will be in school and the pressures will let up. And I developed an attitude that my life was not going to be enjoyable for several years because I felt trapped. And I became less and less able to cope with their needs and the pressures that I found myself under.

SOBOTKA—Well, I think what basically started my depression off was just the basic postnatal depression, which is very common. When I was hospitalized in Salt Lake in the psychiatric ward with it, there were three or four other women there with postnatal depression that had small babies.

After I had my last baby, he was about two or three months old, and I just started feeling really strange inside. It's hard to explain; I felt like I was going crazy. I was really depressed. The family doctor hospitalized me first for depression. I didn't gain anything in the hospital. I just kept getting worse and worse. I just couldn't seem to get any relief.

But I just got to the point where I couldn't do anything at home with the kids, with my husband. I just couldn't function even taking care of the baby. I was in a very deep depression.

HADLOCK—I did feel the pressure of having children. I felt the pressure of wondering how you know when you've had the right number of children. How do you make a moral decision that you don't want any more children and you want to make a permanent decision about that?

SOBOTKA—I just don't think you can say everyone should have a large family. I love my family; I wanted them. But I have a lot of friends who didn't, who don't want big families, but they're having more children than they want because they feel like they should. It's doing things to them that shouldn't be happening.

DEGN—Several women said that some of their depression was caused because they had too many children too fast. Do you think that's possible?

SMITH—I certainly do. I think it depends upon a woman's emotional stability and her physical condition. And if you don't get enough sleep there's going to be stresses upon your body. You really have to have the sleep, and you have to have the physical health to be able to handle a large number of children. I had seven children myself, and I know there were nights when I thought: "Oh, will this night ever end?" And really, you can have children too fast.

DEGN—Instead of just saying, "Well, the Church told me to have kids and I'm going to have kids," do you think some women need to think more about their individual situations before planning their families?

SMITH—Yes, I think the Brethren have given this counsel. They advise husbands and wives to think very carefully about the number of children they're going to have and to plan so that the mother's health will not be impaired.

DEGN—In addition to the pressure to be perfect and the pressure that comes from raising large families, another pressure on Mormon women comes from involvement in Church programs.

HADLOCK—I took a church job when I moved here—my last baby was three months old—and it put a lot of pressure on me that I couldn't deal with. I had been Beehive Advisor for two years in the ward where we lived before, and I felt

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## Can I really make it into the Celestial Kingdom if I don't quilt?

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like I'd done a really fine job. And I was too worn out and under too much stress to do the job that I expected of myself. And so I put my own pressures on to an extent. I was Mia Maid Advisor; I felt guilty and I felt like I was not measuring up to the needs of the girls. And I felt guilty leaving little children at home who needed me.

DEGN—Is the Church changing the way it's viewing the family and the time demands that are required of the family?

SMITH—Yes, the Church is putting a very definite stress on being able to spend more time with the family. And I think what we are saying is that we would like people really to have one Church job—maybe one responsibility as an officer or a teacher, and then maybe an assignment as a visiting teacher or a home teacher—so that we don't put such a stress on any one person.

HADLOCK—Many women have large families, and they feel like they have to take Church jobs when they have little tiny babies so young. They don't give themselves a chance to get on their feet and get their physical and emotional strength back.

SOBOTKA—We try to keep our homes up and we try to. . . . You're supposed to be into genealogy and you're supposed to. . . . I think that while we're raising our families, it's just unrealistic to be really good at all those things at the same time. I'm not sure you ever could, but especially not while you were trying to raise a family.

DEGN—In addition to the pressures of perfection, child-raising, and church responsibilities, another pressure is that of finding an identity.

HADLOCK—I think LDS women lean too much on their husbands for their identity. I know that's something I've been learning from this depression and from therapy.

And you haven't become an individual in your own right. You haven't taken the time to further your education or an interest, something like that that would really build up your confidence. But you feel guilty taking that time because you feel torn in so many directions.

HIRSH—And I think that is where a lot of these ladies get. . . . may be distorted is the best word. Because what they learn is not so much Church doctrine, but they've been given different people's interpretations along the way. If women overreact to it to the point of absolute rigidity, there can be no room for questioning, no room for thinking, and they get stuck in a mold. If you get stuck in a mold hard enough, and you get worn out by your kids and worn out by your own feelings of "what am I doing, why don't I feel happy?" then it can end up to a point where you get depressed enough that you have to go to the hospital.

SOBOTKA—I don't think we can be everything to everyone. In fact, my doctor said to me, "When you quit trying to be super-mom, you'll have a chance to get well." And I had never thought about it like that before. I was just doing what I thought everyone did. He said, "You're trying to be everything to everyone in that family, to answer every need they have. And you just can't do that."

HIRSH—They don't allow themselves (or at least a lot of them don't) the freedom to look around and question. I don't want to get across that they should always question, but I think they need to think about what they're taught. I see a lot of non-think in some of the ladies who become easily depressed that I have treated.

DEGN—And finally, another stress on Mormon women is the changing role of women in society.

We hear a lot about the women's movement these days. Do the issues there enter in in any way?

STOUT—My wife brought something interesting home from a class she attended. When the instructor asked the class of Mormon women what they had in mind when their children grew up and went away from home, she said to them in kind of a sarcastic way, "Do you want to all become mothers-in-law?" That was the only future they had for themselves unless they could try to identify other things in their lives. So I think a lot of Mormon women are feeling conflict about the changes in social roles and expectations.

DEGN—This young Mormon mother from southern California, who asked that her name not be used, overcame her depression by leaving the LDS Church:

WOMAN—I don't think the Church really encourages women to use their talents as much as they could. They kind of tell you that if you have a talent (such as writing or music or anything else like that) use it within the Church. They don't encourage you to go out and use it in, say, civic organizations, or maybe professionally, or something like that. And that's too bad, too, because I think there are a lot of Mormon women who are very, very talented and have a lot of energy and are not using it. And maybe they're using it in destructive ways like gaining a lot of weight or being very depressed.

BURGOYNE—Mormon women sometimes have stress as a result of having their structure shaken.

Some of the structure that Mormon women have to live with is the idea of what their role is or ought to be in society—such things as, “A woman's place is in the home,” and all of the things that are very much against the women's movement right now. And it's only reasonable that when they experience personal things in their own lives which are in conflict to the stated way they ought to feel according to the creed of Mormonism, it might shake some of their structure.

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I think there is a very good chance I would have committed suicide if it hadn't been for the church.

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DEGN—These are some of the religious pressures a Mormon woman faces in what is called *reactive depression*, that is, reacting to one's environment: the pressures to be perfect, to raise a large family, to fulfill Church assignments, to find one's identity, and to sort out one's place in a changing society.

But there are many other things that can cause depression: personal qualities, tragedies in life, and one's biology or chemical imbalances in the body. This is often treated with simple medication.

BARKER—As I was growing up, my father was an alcoholic. And my family broke apart when I was 11. And families just don't break up, they shatter. So I, at the worst part of my depression, felt like I had a built-in self-destruct, that I was programmed to fail, that there was no way I could succeed. I had a bad self-image.

DR. JED ERICKSON (Mormon bishop, Director of the University of Utah Psychiatric Emergency Service)—We have strong evidence to indicate that there is a thing that we call *endogenous depression*, which may be biological, or perhaps biochemical, in origin. We have evidence to suggest that depression shows up in families much more than we'd expect on the basis of chance, suggesting a possible hereditary kind of transmission.

HIRSH—Well, of course, one of the exciting things, I think, about psychiatry, especially in the last 10 or 20 years, is that as we learn more and more about the really serious forms of mental illness, we find that a lot of them seem to be traced to

biologic illnesses. In other words, it's a physical basis for the illness that interacts with whatever else is going on in a person's environment.

DEGN—It should be pointed out that women are more prone to depression than men: according to one doctor, women are twice as likely to get the illness, and specifically women in two age groups—young mothers and women whose children are leaving home. These factors—gender and age—along with others we've mentioned, such as personality type and biology, have nothing to do with religion. So, the next question we will explore is, *Do Mormon women get more depressed than other women?*

ERICKSEN—Well, I don't think I have any empirical evidence to demonstrate that they do. A significant number of Mormon women do get depressed, but I don't have any concrete evidence to show that it's disproportionate.

HIRSH—I think any kind of a culture where people are taught from a very early age to believe in very rigorous doctrines and to grow up with one set of this-is-the-way-things-are-always-done, then that group by definition is probably more at risk for these kinds of problems. I think they happen everywhere. In other words, I've had other ladies that have come in with the same syndrome, and they're not LDS. So it happens to anyone; but perhaps, let's say, the Mormon population is more at risk.

BURGOYNE—Among those people—Mormon women—who get depressed, you can often trace one of the precipitants of their depression to their lives, as you can with anybody else. And since their lives involve Mormonism, then Mormonism is, at times, a precipitant of their depression. But as compared to other religious people or nonreligious people, I don't think you can say they're any more depressed as a group.

DEGN—Any less depressed?

BURGOYNE—No, I don't think so.

DEGN—Just an average population?

BURGOYNE—Yes, I think they're made up of average people.

DEGN—So depression can come to any woman. But our experts say the thing about Mormon women who get depressed is they feel the guilt stronger.

STOUT—Most people who are depressed are suffering from a larger degree of neurotic guilt than they are from real guilt. They have conjured up a whole raft of things which they conclude are things that they have done wrong—anywhere from saying a sharp word to a Primary teacher 30 years ago to not liking a bishop to smoking a cigarette one time outside the barn down in Lehi. There's a whole variety of things people carry with them for years and years, and they don't let go of them.

HIRSH—We see some difficulties sometimes, or at least I do, in talking with the families and sometimes the patients in terms of helping them understand the biologic nature of their depressive illness. In other words, they may feel, “Well, I'm doing everything right. I'm going to church. I'm attending all my meetings. I'm going to the temple. I'm Relief Society president. I have six kids. I've raised them all. They're all going to college, you know. I've done the best I



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Bonnie Sobotka

can. Why should God strike me down with this illness?"

And if we can help them to understand that it's not a defect or is not because they did something sinful, then many times they'll be able to accept the hospitalization and their illness and their need for ongoing care much more easily.

BURGOYNE—A middle-aged lady who has many children, a very successful husband both financially and in the Church, came for treatment. She didn't know why, except that she was unhappy and cried all the time and that sort of behavior which was very clearly an earmark of depression—she couldn't call it a depression, because she wasn't really depressed. I mean, how could she be depressed? Her husband was prominent in the Church and she had this wonderful family and they were very successful in all spheres and she was very active in everything she did. So by definition she was not depressed.

Over a very short period of time it became clear that the thing that she was unhappy about was that she had virtually no relationship with her husband at all except over the subject of either childrearing—what they should do with their many children and their financial obligations towards them—or the Church or the program that either he or she was putting on in the Church. And there was no close communication between them whatsoever.

Her husband predictably responded both good and bad. Bad in the sense that she dared say there was anything the matter. And good in the sense that when he recognized that there was something wrong, he demonstrated concern and care, and it had a good outcome.

DEGN—Could this have happened to any woman?

BURGOYNE—Sure, sure. The only reason that I think that it was a little more serious with her as a Mormon was that all the way through the treatment she was saying how she shouldn't feel this way. How could she feel this way when her husband was such-and-such and she was such-and-

such? And these feelings just didn't occur if you lived the gospel. Guess what? They do.

DEGN—You and your husband are both active members of the Church. You were married in the temple. You're living the principles of the gospel. How could something like this happen to you?

HADLOCK—That's what I've asked myself. I don't think being active members of the Church makes a great deal of difference. I mean, we're human beings subject to our fallacies and our weaknesses. And some people have the ability to cope better than others.

SOBOTKA—I had a wonderful father, but one of his favorite sayings was: "If you're good, you'll have blessings, more blessings than you can imagine. And if you're bad, you won't have them. And it's just as simple as that." That just isn't true. You know, people that are really good have problems, too.

ERICKSEN—I think LDS families who are active in the Church have the idea that if they live their lives according to their standards, the way they've been taught, that then all will go well for them. There may be a fallacy in that reasoning, recognizing that all of us human beings are subject to difficult vicissitudes of everyday living. And the fact that we're LDS, we live standards, doesn't prevent us from being subject to those and they may exact an adjustment toll in the lives of people.

DEGN—Elements of a person's religion may bring on stresses that aggravate or cause depression. But can that religion also provide some of the strengths and the tools in dealing with depression? *So, the fourth question we ask is: Is there anything in Mormonism that helps overcome depression? That helps others prevent it?*

BRODERICK—There are three elements that are impressive to me. One is the knowledge of who you are. The concept that you are a prince or princess in the household of

God who is cared about and who has some track record **already before you came here so there must be something good about me or why would I be in the Church?** I think that's a very powerful concept. I think we have a very lively concept of prayer and of God.

Probably the most important thing about the Church is that it doesn't leave its members isolated. Isolation is the most devastating cause of both depression and suicide on the one hand and things like wife abuse, child abuse, and aggression on the other hand.

BURGOYNE—It's hard to feel totally alone when you're a good member of the Church because there are so many people, at least on the surface and superficially, who are going to be your friends and help. That's a big help.

DEGN—Do you think your Mormon religion—it's so much a part of you, as you said before—gave you any strengths to help you overcome depression?

WOMAN—Yes, it did. Yes, I hadn't ever thought about it, but it has. Because I've been taught that there is a God, a very loving God. I do believe very much in a loving God who loves me and will watch over me. And so in the back of my mind, I've always felt that there's someone watching over me and taking care of me and someone I can talk to and pray to. And I still believe that there's a life after death, and some of the things that were happening to me that caused me to be depressed had to do with people dying, and that helped a lot to know, to feel, to really believe that there is a life after death and believe in a God. It did help. And I think if I hadn't been raised a Mormon that I wouldn't have had that.

DEGN—How did your Mormon religion help you?

HADLOCK—How has it helped me? It's given me a lot of faith and a lot of strength. I feel like I have strength from the Lord to help me. But I found out that I was hoping all along that someone could take this pain and this hurt away but that was not possible.

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*Dr. Jed Ericksen*

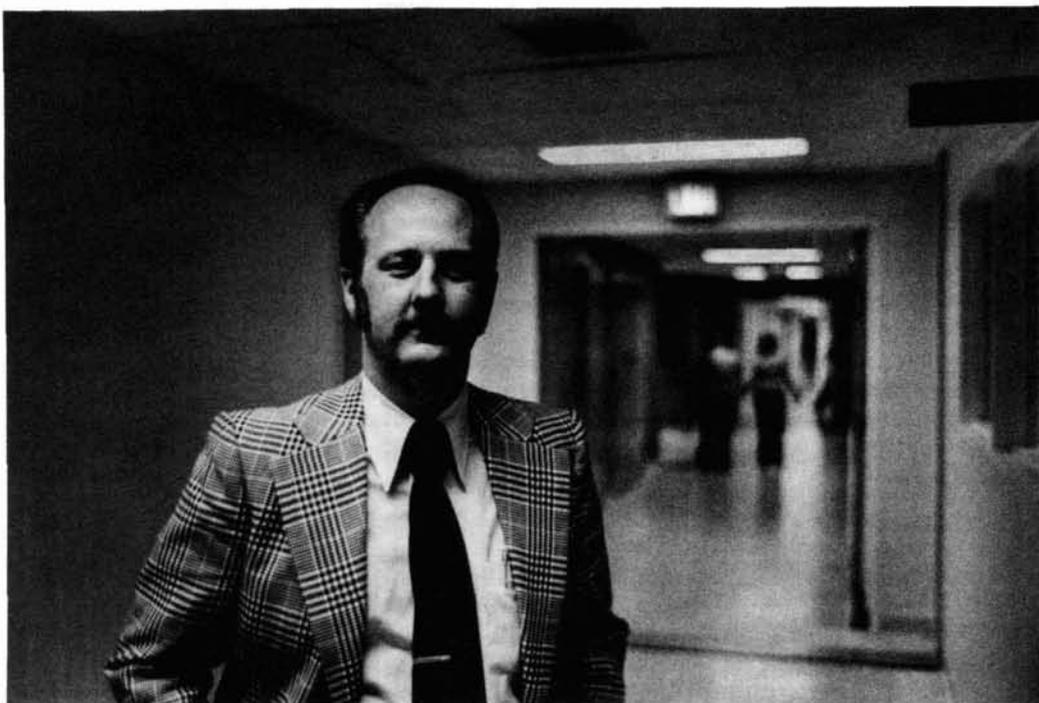
BARKER—Little experiences. The very first time I went to the hospital only one of my friends was even aware of what was going on, but she knew that I hated myself and she knew that I thought that I would never, ever make it to the Celestial Kingdom. And other people were calling, and calls to a person in the hospital going through this make a demand on them that's very hard. But this dear friend wrote a note and all it said was: "Sweet friend, I love you. I know your heart." And since then, I've decided that that's what the Savior's saying: "Sweet friend, I know what it's like to be afraid, to be lonely, and to think you cannot do it." But he's saying to every soul on earth, "I know your heart. I know you can do it." And that perception, that light on it I would never have had without the gospel. I could never have come through it without bitterness without the gospel.

SOBOTKA—I received many blessings from the priesthood. Even though they certainly didn't cure me, now my feeling is that my Heavenly Father helped me in a different way than I was expecting him to help me. He gave me all the aids and all the helps that were available and possible around here. Some very special people in my neighborhood helped me get through it. And then he helped me get myself well so I had confidence in myself, where if it had been some miracle healing from those blessings, I don't think I would have had the confidence within myself that I have.

Many nights my husband gave me a special blessing in the evenings on especially hard nights and it brought us very close together through that.

DEGN—What about the doctrine—did it give you any security or comfort?

SOBOTKA—Well, this isn't a very positive statement, but I will say it. I think there is a very good chance I would have committed suicide if it hadn't been for the Church. But because I knew there was a hereafter, because I knew I would meet my father there, I didn't think he would be very happy to see me under those circumstances.



DEGN—You're speaking of your own father?

SOBOTKA—My own father has passed away. Yes.

BARKER—My husband's unwillingness to leave me when I begged him to was one thing that helped. Because of his commitment to our temple marriage he said, "I do not have that option." This when I had changed totally, when I had been sick for two years. He thought I'd never be better. He thought this was the way life would go on for us until we died. And yet he would not leave because of his commitment. He fought for me. He fought hard for me and for my sanity. And that was because of the gospel.

Degn—*The final question we want to explore in this report is how can depression be prevented, be treated?*

Talking it out, to realize one is not alone in having a depressive illness, to learn more about the symptoms, the treatments—this is what is happening in one unusual Relief Society class in the Edgemont 14th Ward in Provo. Teacher Dorothy Bramhall lists four stresses which women face: perfectionism, receiving no rewards for the job of mother, lack of nurturing from husbands, and loneliness.

DOROTHY BRAMHALL (Relief Society teacher)—So somehow we think colds and flu and everything else are not our fault. But somehow we feel that depression is our fault.

CLASS MEMBER—But it's when the stress gets to the point where we reach a point almost of apathy where we say we don't care or we can't function any more. And maybe it's just for a period of hours or for a period of a couple of days where we feel that way. But it's when everything just loads in on you and you suddenly say, "I quit," or "I give up," or "I don't care."

DEGN—This course on depression was created by stake board member Carol Lee Hawkins. Her job as Stake Specialist for Varied Interests was to come up with a course of study on anything except homemaking. She would teach the course to ward leaders and then they would run it once a month in their own wards as an optional miniclass on homemaking day. She chose to create a class on depression.

CAROL LEE HAWKINS—I saw a lot of stress on women and I guess I felt sort of victimized by myself, by a lot of my circumstances around me. And I saw what it was doing to myself and other women. And I didn't like what it was doing. And so I thought in other areas of medicine and education there are skills that we can learn to help us. And so I thought in mental health it's the same. There are skills that we can incorporate in our lives to help us cope with these situations that are inevitable.

DEGN—This Relief Society class is designed to help. But there are many things in a woman's environment that do not help.

BARKER—Misguided people with their misguided advice. I never through it all doubted the truthfulness of the gospel. But, oh, sometimes people could hurt. The nurse who said, "If you'd been reading your scriptures, it wouldn't have happened." The women who say, "Well, I had exactly the same thing and all I had to do was just stop thinking about it so much." Or the people who say, "Just get up in the morning and put a smile on your face." It's so simplistic, and they just don't know the nature of the thing they're dealing with. And yet when you feel that your opinions are worth

absolutely nothing, you expect these things and think you must be doing something terribly wrong.

DEGN—So those things hurt. But the most important thing for treatment all the women said is: "Go get help."

Are there lots of women that you're aware of in the Church who are going through depression?

BARKER—I feel that there are. And I feel that they don't get better as fast as they should because they're so reluctant to say, "Help me." They're so reluctant to leave themselves wide open for criticism.

SOBOTKA—Well, the first thing is that if you ever feel like you are having some problems, I wouldn't get real bad before I sought help. And I would make sure I was going to

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someone good because that's really, really important. Sometimes a lot of woman have just a touch of depression, and they can go two or three times to a doctor to get help and that's the end of it. But if they stay at home and try to work it out themselves—or sometimes with some counseling from someone from the Church who isn't qualified—I think that's when it really turns into a big problem.

NEIL HADLOCK (Karen Hadlock's husband, an active Church member)—It came right to the critical period. We took Karen into the emergency room at the hospital five months ago; it had to go pretty far with us before we got help. And I think that's unfortunate. I think if these things are picked up earlier, if a husband can even see his wife losing interest in things and see that she's not coping quite right. I think it's important to talk to someone.

DEGN—You say go for help. Are you speaking about a bishop or a professional counselor?

N. HADLOCK—I think you know, if you go to your bishop, you can sense where his abilities fail. And I think he can help you in some things, but I think when you find yourself in depression, you really need to see a professional person and get some help.

DEGN—In the treatment of depression, many attitudes have to be changed. One of the most important that must be developed, our experts say, is the ability to say "no" intelligently.

STOUT—Mormon women have traditionally been taught that it's difficult to say "no." And yet saying "no" can be a very healthy thing if it's done appropriately. One shouldn't do it just as a sign of rebellion or negativism or fear. "No" should be a reasoned kind of response. But that's maybe one very important thing to teach a depressed Mormon woman: the ability to say "no."

SOBOTKA—I can say "no" now, where I had a hard time. I don't only mean Church positions, which I can say "no" to now a lot easier with less guilt. And I can say "no" to my husband if I don't want to do something instead of feeling like I have to. The other day I had a call from a lady from

school. I had signed up to help with one party for the school for the year, and I was called and approached to be the room mother. And I said, "No, there's no way. I said I'd help with a party." But a few years ago I probably would have felt I'd have to go ahead and do that.

BARKER—Simplifying. I truly believe that although the misguided little visiting teachers will say, "Get out and do more and do this and do this and do this and stop thinking about it." It's not right. This is the time to simplify your life. This is the time to cut out the things that are causing anxiety to the greatest extent that you can. You can't cut out your family or your children. And I didn't give up my Church callings; personally, I felt that I needed that, too, although there were some elements of anxiety there. But my bishop simplified for me by cutting my callings down to one—which was a great relief.

DEGN—Is there a time when a woman should tell her bishop "No"?

SMITH—I think she should very often discuss with her bishop her problems before she will accept a responsibility. Because if he could understand her situation, her health, her mental frame of mind, the responsibility she has with her children, the problems she might be having as far as financial resources, those things need to be a part of the decision that's made. And I think most bishops would not put more stress upon a woman than she would be able to handle if he just understood.

BARKER—That's a big lesson for a Mormon woman to learn to say, "I don't think I can take that on. I don't think I can take that luncheon on, but I'll be glad to do this little part or this small something." It's not cutting out altogether, but it's simplifying.

DEGN—Another very important attitude for a woman to develop, our people said, is to perceive herself as an important individual.

SOBOTKA—One of the most important things that I learned is that I'm a person first, a wife and a mother second. It's not all one thing. And I'm justified in having needs and justified in buying something for myself. And I don't have to explain everything I do and answer to my children and my husband for every little minute of my day.

K. HADLOCK—Take time for you. Find something that you really love. Sometimes it's just easier not to take the time. Sometimes it's easier to stay home. Maybe you're too tired. I've heard women say, "The joy of doing the things I loved to do is gone because it just seems like too much effort." But it's important to make that effort. It's important that you don't let yourself slide.

SOBOTKA—I feel like I had such an identity crisis during this time. And I think partly it was because I was swallowed up in trying to be the mother, in trying to be the wife and not the person. And so, do your own thing. When the doctor told me to take one day a week and go out and do something that I wanted to do, I could not think of anything. I mean, I couldn't think of anything. I hadn't thought about something like that for so long that I couldn't come up with a thing. They kept trying to help me find something that I would enjoy doing. And so, that's kind of sad to think that you can't do that.

DEGN—And now, in conclusion, some final thoughts on getting better from one who's been through it and from one, at the time of this interview, who was still on the way.

What made you better?

BARKER—The Lord made me better. The Lord loves me. People prayed about me. Good help, professional help, time, medication. But I truly feel that I would have committed suicide had it not been for the gospel. Had I not known that I would still be me after death, that I would still be me with all my problems but only that I would be cut off from the people I loved even though I felt that I didn't deserve to be with them, I would have committed suicide. So the gospel saved my life.

DEGN—How do you feel now?

K. HADLOCK—How do I feel right now? I had three good days this week and I started to sink today. I go up and down and I have to have faith that gradually the good days will come more often than the bad days. And it's not the type of thing—I don't know how to make women realize—it's not the type of thing where you just have a discouraging day. It's a real mental anguish. It's a real pain. It's a real suffering.

DEGN—Do you see the end?

K. HADLOCK—Some days I do. Some days I have a hard time.

DEGN—This reaction is common for people going through a depression. They feel they *never* will see the end. But the American Mental Health Association says 90 percent of depression can be treated successfully.

To summarize then. Women seem to get depressed more than men do. Two age groups are hit harder than others—early motherhood and ending motherhood.

Mormon women are just as vulnerable to this, some would say more so, others would say just the same. Certain pressures that Mormon woman must deal with are the pressure to be perfect, the pressure over raising a family, of church jobs, the pressure in finding an identity, and their role in society. But other pressures in other societies can do the same for other women.

Biology can also aggravate or cause a depression. Certain personality types are more prone. Traumatic life experiences can also trigger a depression.

One thing about Mormon depression, though, is the women seem more *guilty* about having this problem, and, therefore, more reluctant to seek help.

But just as their religion might be a source of some of their pressure, it is also a source of some of their help—providing structure, friendship and answers.

The treating of depression often involves going for professional help, learning to say "no," to take time for oneself, to establish one's identity and, often, to regulate the biological imbalances in the body.

Tonight we explored how depression affects one group in our community: Mormon women. This is not to say they are the only ones who have problems. Our purpose was to help this large group of women and their families in our community understand their illness and help them overcome it, so that they need not suffer needlessly thinking they are alone in this trauma or that there is no help, so that even more of them may become part of the 90 percent in this country who can be treated successfully for this illness we call depression.