

## Depression: its representation and perceptions

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### Abstract

Depression as a mental disorder has become more common since the early 20th century. This essay tries to illustrate complex changes about depression in his history. Depression, both its course and cure, is portrayed by popular media as well as medical books in an increasingly lighthearted and optimistic way over time. This leads to a common misunderstanding by the general public, family members and even the patients themselves. There is a great discrepancy between how mass media portrays depression and how patients experience it.

### Keywords

Depression, Disorder, Optimism

### 1. Introduction

Depression as a mental disorder has become more common since the early 20th century. Around the world, approximately 350 million people of different ages suffer from depression. 1 The disease is more common in people of younger ages and women. 2 It has gradually become well known to the public because of its increasing prevalence and also because of its serious consequences that can possibly lead to death. However, there is also a more significant cause of its recognition: many falsely use the term too frequently, disregarding its severity and true implications. Depression, both its course and cure, is portrayed by popular media as well as medical books in an increasingly lighthearted and optimistic way over time. This leads to a common misunderstanding by the general public, family members and even the patients themselves. There is a great discrepancy between how mass media portrays depression and how patients experience it.

### 2. Main part

#### 2.1 The origination treatment of depression

Although the disease of depression dated back as far as the 2nd millennium B.C., 3 it was originally known as “melancholia” and first appeared in text in 1303, coined by Chaucer. 4 During this time, like many other diseases, it was considered to be caused by “demonic possession” and was treated by priests. 5 It was initially viewed as a spiritual (mental) disease rather than a physical one. 6 Treatment varied depending on the understandings of the causes of the disease. For instance, since early Chinese, Babylonian and Egyptian civilizations also saw it as “a form of demonic possession,” they treated it with “exorcism techniques,” such as “beatings” and “starvation.” 7 This was done in hopes to “drive demons out of the afflicted person’s body.” 8 On the other hand, “early Roman and Greek doctors thought that depression was both a biological and psychological disease.” 9 They used treatments like “special diets, music, and baths” to ease the symptoms. 10 The Greek Physician Hippocrates claimed, “personality traits and mental illnesses were related to balanced or imbalanced body fluids called humors,” and also asserted, “melancholia was caused by too much black bile,” and therefore used measures like “bathing” and “bloodletting” to treat it. 11 Others, like Cicero, who was a “famous Roman philosopher and statesman,” argued that melancholia was the result of “violent rage, fear and grief.” 12 He offered “a mental explanation rather than a physical one.” 13 The progress of finding the cause of depression reverted many times in history, including in the 5th century AD, when “religious beliefs” (Christianity) prevailed over “scientific thinking.” 14 The ongoing dispute continued during and after the Renaissance period. 15 As shown by continuous debates between

doctors, the causes of “melancholia” and eventually “depression” are intricate and difficult to be determined.

## 2.2 The conception of “depression”

The term “depression” was first placed into categories, distinct from “melancholia,” in the middle of the 19th century by Wilhelm Griesinger (1817 – 1868), who was “an influential German psychiatrist”.<sup>16</sup> He “drew on neurophysiological work” that eventually set “the recently created category, ‘affective insanity,’ within a biomedical framework.”<sup>17</sup> The National Centre for Biotechnology Information website demonstrates that “nineteenth-century biomedical melancholia bears little resemblance to today’s depression.”<sup>18</sup> Melancholia is “a disorder of the emotions where the intellect remains largely unaffected in the early stages of the disease.”<sup>19</sup> However, clinical depression is “a mood disorder characterized by depressed mood, inertia, appetite changes, lethargy, indifference, difficulty thinking and concentrating, feelings of guilt and worthlessness, and thoughts of suicide.”<sup>20</sup> “Depression” is a broad term as it includes many different disorders, such as “Disruptive Mood Dysregulation Disorder” and “Dysthymia.”<sup>21</sup> In these disorders, “Major Depressive Disorder” represents the most recognized condition.<sup>22</sup> The sheer number of disorders makes it simple for the general public to overgeneralize the term and therefore to think of it less carefully. Fatigue, insomnia, significant weight loss and many other symptoms are characteristics of depression.<sup>23</sup> Based on these symptoms, “depression” is more than just simply the dejected feeling after failing an exam, the feeling of sorrow after a friend’s departure to another country, or generally what people usually think they have when they feel downcast for a period of time. There are effective cures, such as antidepressants (medications) and behavioral activation (psychological treatments).<sup>24</sup> This means that patients can potentially lead a normal life if they find a suitable treatment. Nevertheless, depression is a much more perplexing disease as it is caused by many factors instead of a specific microorganism. In severe cases, although treatments may help cure the disease on the surface, patients have varying thoughts, feelings and beliefs that cannot be changed or “cured” by any outside influences.

## 2.3 Styron’s idea on depression

Despite the difference in time, depression had similar symptoms and occurred in similar forms since the early 1900s. The experiences of depression patients, at that time, are unquestionably linked to those that are affected by the disease today. In William Styron’s biography “Darkness Visible” (1900), he describes the disease as “a disorder of mood, so mysteriously painful and elusive in the way it becomes known to the self – to the mediating intellect – as to verge close to being beyond description.”<sup>25</sup> The adjective “painful” usually refers to pain being felt physically, however through its use here Styron emphasizes how even though depression is a mental illness its detrimental effects can inflict pain physically on the body. Through the use of powerful diction, Styron maintains that the disease extends well beyond “a disorder of mood” into one in which its agony and apprehensiveness cause the sick person to experience a feeling “beyond description.”<sup>26</sup> The fact that depressed persons often find trouble articulating their thoughts and experiences is one of the possible reasons why the experience of having depression is often misunderstood. Simply by describing in great detail his feelings and experiences as a depressed person, Styron’s illness narrative suggests that it is hard for people unaffected by depression to understand the true distress that depressed persons like him feel.

Furthermore, Styron claims that “there are decent popular works which intelligently point the way toward treatment and cure, demonstrating how certain therapies – psychotherapy or pharmacology, or a combination of these – can indeed restore people to health in all but the most persistent and devastating cases; but the wisest books among them underscore the hard truth that serious depressions do not disappear overnight.”<sup>27</sup> This clearly shows not only how curing depression is not as simple as it seems and instead is a process that still “remains a great mystery” but also how “popular works” dating from the 1990s already depict the cure for depression as effective and easy to obtain.<sup>28</sup> Also, as Styron points out, his “situation was just the reverse” of what most people experience.<sup>29</sup> This paints a greater picture that since many depressed persons are in different situations a common cure is

definitely not effective for everyone and therefore will not guarantee the return to a normal state of mind for all of them. Though the shift from “specificity” to “universalism” in the late 19th century and the increasing importance of the laboratory revolutionized treatment of diseases caused by specific microorganisms significantly and led them down a new path, these concepts do not play a notable role in finding the causes of and cure to mental illnesses in that every patient is doubtlessly different in many ways (psychologically and physiologically).<sup>30</sup> Again, this means that a unified treatment will not work well all the time and therefore is not a highly functional cure.

In addition, Styron suggests that “depression afflicts millions directly, and millions more who are relatives or friends of victims.”<sup>31</sup> This highlights the severity of the disease in that the depressed persons’ great suffering can lead to influence on their close relatives and friends. As mental illness is not infectious, unlike contagious diseases such as malaria or tuberculosis, it can strictly not be passed on from person to person. However, as Styron points out, many others are affected, and this underscores the extremity of the torment and trauma that the depressed persons suffer from since their auras spread widely.

Styron’s experience of the disease is similar to an illness narrative of Lewis Wolpert which also illustrates his indescribable experience of depression. He clearly states, “It was not just feeling very low, depressed in the commonly used sense of the world.”<sup>32</sup> It was “more terrible even than watching my wife die of cancer.”<sup>33</sup> This comparison clarifies his deep agony that is even worse than the feeling of losing a lost one. In this way, he also corrects the flawed understanding of “depression” by the general public. In a similar fashion, Wolpert asserts “depression is very upsetting not only for the sufferer but for those who live with the victim.”<sup>34</sup> This confirms the statement that depression is “a frightening and disabling illness” and not simply an unhappy mood.<sup>35</sup> As Kleinman, who wrote extensively on illness narratives, points out, “Illness refers to how the sick person and the members of the family or wider social network perceive, live with, and respond to symptoms and disability.”<sup>36</sup> This statement fits disease into the large puzzle of society, pointing out how illness not only affects the sick but also people close to them, emphasizing the complexity of it and showing how it is without doubt not only affecting the patient. The quote by Kleinman, “the illness experience includes categorizing and explaining, in common-sense ways accessible to all lay persons in the social group, the forms of distress caused by those pathophysiological processes,” illustrates this point.<sup>37</sup> As Wolpert makes clear, depression is an “illness” rather than a “disease” as it circumscribes many aspects in the depressed persons lives, such as social stigma, relationship with others and even the course of their everyday lives, instead of only affecting them biologically.

Although the sources only present the opinions of two depressed persons, both argue the intense torment of depression and hence presumably represent a large number of others who have varying experiences but feel the same misery. These diaries and articles all serve as insights to a depressed person’s feelings, as deeply and thoroughly as the descriptions written by them will allow. They are precious sources precisely because their diaries are written perhaps as means of ameliorating pain and pressure from the disease or for other reasons that primarily serve the authors well. This means that they are authentic instead of trying to achieve particular purposes like many propaganda or advertisements. These very personal illness narratives are sources that reveal truths about the actual illness experience and point out the faults of how depression is considered by the general public and possibly professionals in the health care field.

#### **2.4 Contrast description about Depression on Massmedia**

The serious nature and consequences of depression is also emphasized in a newspaper article from Boston Globe on August 12th, 1984. The title “Study: Many fail to recover from major depression” itself suggests that this article is not only scientific in the sense that it is a study, but also that the cure for depression is unquestionably despairing.<sup>38</sup> The article calls to attention the despondent future of the disease by stating facts and using emotive language. For instance, the use of statistics in “about one-fifth of people who seek treatment for a major depressive episode, and who had no prior history of chronic minor depression, fail to recover even after two years, a new study has found” alerts the

public of how difficult the task of curing depression is and how it is not nearly effective enough. 39 The article is also not hesitant to point out that “the long-term outlook for some people with major depression may be worse than previously thought” and that “major depression is a debilitating medical condition far more severe than the everyday depression many people experience from time to time.” 40 The fact that these statements were made imply that before the article was released, the public was already regarding the cure and future of depression too confidently and ignorantly and thus needed to be corrected and, more importantly, alerted. The thoughts of the general public already contrast greatly with the description of the experiences of the depressed persons, and this false perception continues into the future, gaining increasing momentum.

Optimism among the public is at its peak in contemporary times and may continue to increase. To illustrate, contemporary sources portray the disease falsely, in a too hopeful and general way, ignoring or rejecting its complex and somewhat despairing nature. Even widely known and professional sources often simplify the disease into “introduction to disease,” “cause,” “symptoms” and “cure” that can be explained superficially in only a few pages. Specifically, the publication by the National Institute of Mental Health about depression revised in 2008 lasts only a little longer than twenty pages. Included in its contents are questions like “What is depression,” “What are the symptoms of depression” and “How is depression detected and treated?” 41 Each question is answered within one page in clear, concise scientific jargon, including specific names of therapies that are used to treat depression. Although this demonstrates that the source is reliable and organized, it characterizes depression like any other contagious disease that can be defined plainly by the microorganism that causes it. This oversimplification from dependable sources may be one of the most important features that shape public views and understanding today.

In a similar fashion, popular media websites that are not medical-based also portray depression as too common and normal, completely overlooking its alarming characteristics. From an image on the website of “The Philosophy of Everything,” a quote says, “the best cure for depression is a dose of sunlight, walking and thinking nothing.” 42 Taking these measures will certainly not cure depression. They may not even help alleviate the pain slightly. The quote depicts depression as a disease that can be easily recovered from and suggests that it is not a serious problem at all. The webpage generally proposes that depression is directly linked to “boredom” since it asserts, “in a state of depression people don’t feel like engaging in any activities whatsoever.” 43 This oversimplification of depression can lead to serious consequences, such as how the public now views it as less severe and simple to treat. Additionally, the “treatment” or “cure” it proposes is to “remove the negative thoughts and replace them with positive ones” which will cause “your state of mind” to change “almost instantly.” 44 This is entirely contradictory to the scientific explanations since most depressed persons cannot control their state of mind and most cases of depression cannot be cured in a short period of time. Both sources are influential, and both oversimplify depression, leading to detrimental consequences.

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#### 4. Conclusion

Compared to the revolutionary changes of many infectious diseases, depression has experienced much more complex changes in its history. It slowly progressed from a disease associated with evil and imbalance to one that is regarded by the public as merely a phase that almost everyone has to go through. Although its prevalence is increasing at a rapid rate, its significance and position in the hearts of the general public is diminishing. The main causes of this trend can be attributed to erroneous depictions of the disease by popular media despite the efforts made to illustrate the misery of depression from the depressed persons' point of view. How society will react to and treat depression in the future is undeniably an insoluble question. Depression is the big enemy of human being and we have to fight with that. We should have enough strength to fight with depression. We really are stronger than what we think.

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