

DEALING WITH DEPRESSION IN A LOCAL CHURCH

A pastoral and counselling article for church leaders, counsellors, care teams, and Christian communities

By Counsellor James Kofi Abbrey

Healing. Growth. Purpose. The Holistic Way.

Core message: Depression is not a sign of spiritual failure. The local church must respond with compassion, prayer, informed pastoral care, wise referral, and sustained community support.

Introduction

Depression is not simply sadness, weakness, laziness, or lack of prayer. It is a serious mental health condition that can affect a person's mood, thinking, sleep, appetite, energy, relationships, worship, work, and daily functioning. It can affect sincere Christians, pastors, leaders, youth, older adults, parents, widows, widowers, and caregivers.

For the local church, the important question is not only, "How do we pray for people?" but also, "How do we become a safe, compassionate, informed, and referral-ready community?" A faithful church does not choose between spiritual care and professional care. It brings both together wisely.

1. Begin with Compassion, Not Condemnation

Many people struggling with depression already feel guilty, ashamed, tired, or spiritually confused. The church must avoid careless statements such as, "Just have more faith," "Stop thinking too much," or "Christians should not be depressed." Such statements may deepen shame and isolation.

A better pastoral response is: "We are sorry you are going through this. You are not alone. God has not abandoned you. We will walk with you and help you find the right support."

"Bear one another's burdens, and so fulfill the law of Christ." - Galatians 6:2

2. Teach the Church That Depression Is Real

Depression may involve persistent low mood, loss of interest, tiredness, poor concentration, sleep difficulties, appetite changes, feelings of worthlessness, and difficulty functioning. It may last for weeks or longer and requires care, not judgement.

The Bible does not hide emotional suffering. Elijah became exhausted and overwhelmed after great spiritual victory. David cried, "Why are you cast down, O my soul?" Job expressed deep anguish in suffering. These examples remind us that emotional pain is not new, and God meets people in their weakness.

3. Create a Church Mental Health Care Team

A local church should not leave depression care to the pastor alone. A small care team can include trained pastoral leaders, counsellors, mature men and women, youth leaders, medical or mental health professionals where available, and trusted prayer leaders.

This team should receive basic training in listening skills, confidentiality, signs of depression, referral pathways, family support, follow-up, and boundaries. The goal is not to turn every church leader into a therapist, but to make the church safer, wiser, and more responsive.

4. Know the Limits of Pastoral Care

Pastoral care is powerful, but it is not a replacement for professional mental health treatment. Prayer, Scripture, fellowship, encouragement, and pastoral presence are important. However, some members may also need counselling, psychotherapy, medical evaluation, or psychiatric support.

A wise church can say, "We will pray with you, walk with you, and also help you access professional support." That is not lack of faith. It is responsible care.

5. Watch for Signs That Require Urgent Support

Church leaders should take urgent concern seriously when a member shows deep hopelessness, severe withdrawal, inability to function, intense emotional distress, or talks as if life has no meaning. In such situations, the person should not be left alone. Trusted family members, appropriate professionals, or emergency support should be involved immediately.

Every local church should maintain a referral list that includes licensed counsellors, clinical psychologists, psychiatrists, mental health nurses, nearby hospitals, emergency contacts, and trusted family support persons.

6. Provide a Safe Listening Ministry

Many depressed people need someone who can listen without rushing to preach, correct, accuse, or advise. Helpful questions include: "Tell me what this has been like for you." "What has been hardest recently?" "How have you been coping?" "Who else knows what you are going through?" "What support would feel helpful this week?"

Avoid arguing with the person's feelings. Avoid spiritualizing everything too quickly. Sometimes the most healing ministry is quiet presence, patient listening, and gentle reassurance.

"Let every person be quick to hear, slow to speak, slow to anger." - James 1:19

7. Use Prayer and Scripture Wisely

Prayer should comfort, not pressure. Scripture should bring hope, not shame. A depressed person may not need a long sermon at first. They may need one verse, spoken gently, with love and patience.

Helpful Scriptures include Psalm 34:18, Matthew 11:28, Isaiah 41:10, Romans 8:38-39, and 2 Corinthians 1:3-4.

Scripture	Pastoral Emphasis
Psalms 34:18	The Lord is near to the brokenhearted and saves the crushed in spirit.
Matthew 11:28	Come to me, all who labor and are heavy laden, and I will give you rest.
Isaiah 41:10	Fear not, for I am with you.
Romans 8:38-39	Nothing can separate us from the love of God in Christ Jesus.
2 Corinthians 1:3-4	God comforts us so that we may comfort others.

8. Reduce Stigma Through Teaching

A local church should teach openly about mental health during sermons, Bible studies, women's meetings, men's fellowships, youth gatherings, leadership training, and premarital or family-life programmes.

Possible teaching themes include: "Depression Is Not Disgrace," "God Cares for the Brokenhearted," "When Faith and Feelings Are in Conflict," "Helping Without Judging," and "Prayer, Counselling, and Medical Care Can Work Together."

9. Support the Family

Depression affects the whole family. Spouses, parents, adult children, and caregivers may feel confused, tired, frustrated, or helpless. The church can help families understand that depression is not laziness, stubbornness, or deliberate rejection.

Families should be encouraged to listen patiently, reduce harsh criticism, encourage treatment, support healthy routines, avoid blaming language, pray with sensitivity, watch for worsening signs, and seek help early.

10. Encourage Healthy Rhythms

For mild depression and recovery support, healthy rhythms can help. These include rest, sunlight, walking, worship, supportive fellowship, balanced eating, reduced isolation, meaningful activity, and keeping counselling or medical appointments. These practices do not replace professional treatment when it is needed, but they can support healing.

In 1 Kings 19, God ministered to Elijah through rest, food, presence, and renewed purpose. This reminds us that spiritual care can include practical bodily care.

11. Care for Pastors and Caregivers Too

Pastors and caregivers may also struggle with emotional exhaustion, burnout, grief, family pressure, and hidden depression. A healthy church must ask: Who pastors the pastor? Who supports the caregivers? Do our leaders rest? Do we provide supervision or debriefing for those handling painful cases?

A church that cares for the wounded must also care for those who carry the wounded.

A Simple Church Response Model

Step	Church Practice
Recognize	Notice changes in mood, energy, attendance, appearance, relationships, or functioning.
Respond	Approach the person gently, respectfully, and privately.
Listen	Allow the person to speak without judgement, arguments, or hurried advice.
Refer	Connect the person to professional help where symptoms are severe, persistent, or risky.
Remain	Continue pastoral support, prayer, follow-up, and community care.

Closing Reflection

A church that deals well with depression does not choose between faith and professional care. It prays, listens, teaches, refers, and continues to love.

The local church must become a place where the wounded can say: "I am struggling, but I am not rejected. I am weak, but I am not worthless. I am depressed, but I am not abandoned. I am receiving help, and God is still with me."

Selected References and Further Reading

- World Health Organization. Depression fact sheet. <https://www.who.int/news-room/fact-sheets/detail/depression>
- National Institute of Mental Health. Depression. <https://www.nimh.nih.gov/health/topics/depression>
- Substance Abuse and Mental Health Services Administration. Mental health resources for community and faith leaders. <https://www.samhsa.gov/mental-health/what-is-mental-health/how-to-talk/community-and-faith-leaders>
- Mayo Clinic. Depression diagnosis and treatment. <https://www.mayoclinic.org/diseases-conditions/depression/diagnosis-treatment/drc-20356013>

- The Holy Bible: 1 Kings 19:4-8; Psalm 34:18; Psalm 42:5; Matthew 11:28; Galatians 6:2; James 1:19; Romans 8:38-39; 2 Corinthians 1:3-4.

Prepared as a church mental health awareness article by Counsellor James Kofi Abbrey.