

THE PHENOMENOLOGICAL EXPERIENCE OF DEPRESSION

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March 2005

## ABSTRACT

### The Phenomenological Experience of Depression

Depression is studied using a phenomenological hermeneutic approach. This approach considers the lived experience of depression in terms of existential structures. Four existential structures are used to explore depression: lived space, lived time, lived body and lived relationship. Personal accounts of these four existentials are given based on published autobiographies. The language of psychopathology for depression is explored by comparing 19<sup>th</sup> century phenomenological descriptions with present medical nosologies. The meaning of depression is explored through the hermeneutic method using archetypal symbols. Finally, the connection of the imaginal realm to poetic reverie is discussed in terms of its ability to express the lived experience of depression.

## INTRODUCTION

Darkness descends without call. Unlike the predictable occurrence of night, this darkness comes whenever *it* wants, and does not leave at a foreseen time. This unpredictable and chaotic nature of the dark mood enhances its depth of being. With darkness comes loneliness, an isolation that seems unbearable. Looking out into the world, but feeling separated from the experience of this world. Feeling the frustration of isolation, which enhances the malady of being unable to reach out and communicate to others. This 'illness' creates a glass cage for the subject, where you look, but cannot touch or be touched. Depression is experienced as a 'lack of'. A lack of relating to others, a lack of feeling in touch with oneself, the absence of feeling loved and being able to love, an absence of hope, and these absences, which feed the depression and make recovery seem so distant. It is interesting that phenomenology (e.g. Sokoloski, 2000, p. 33) was the first major Western philosophy that recognized the importance of "the not". Presence is experienced as 'non-absence'. Perhaps this allows some understanding of depression, it provides for absence in contrast to presence in life.

The sufferer feels the need to ask: why me, for what purpose, will the lightness of living return? These questions arise from the part of the sufferer that believes understanding the etiology of depression will assuage the pain. Sometimes the depth of depression extinguishes the desire to even ask these questions. The pain is so severe that all that is sought is an exit. The sufferer looks for the closest doorway to depart the lived world of darkness to enter into the greater unknown of the non-living world. A transition at least offers transformation, which seems so hopeless in the depressed state.

Transformation is an important concept in considering depression, a change in form, a transition from one state to another. What is transformed? Phenomenologically it is the experience of the lived world. The present study considers how the depressed experience their lived world. Deeper understanding of the lived world of the person experiencing depression, perhaps points to that which calls out for transformation.

Depression is a lived experience. It may occur frequently or infrequently in ones life. The severity of depression varies from periodic melancholy to extreme isolation with associated suicidal ideation and/or attempts. The present study explores depression using a phenomenological hermeneutic approach. This methodological approach considers phenomena in terms of ‘lived structures of meaning’, with this method (van Manen, 1980), “we question the world’s very secrets and intimacies which are constitutive of the world, and which bring the world as world into being for us in us.”

The phenomenological approach looks at experience with as little imposed exterior reductive analysis as possible. This is a qualitative methodology that brings one into the lived experience of phenomena, here depression. The hermeneutic dimension brings depth of meaning to the experienced phenomena. This depth arises through association and amplification of experiences. Consideration of language and how it is used plays an important part in this method. Associations with archetypal material bring richness to the study of phenomena. Amplification of material makes the material more meaningful to the reader. This is a challenging approach which (ibid, p. 18) “...is to attempt to accomplish the impossible: to construct a full interpretive description of some aspect of the lifeworld, and yet remain aware that lived life is always more complex than any explication of meaning can reveal.”

Thus, this study will look at depression as a lived experience in terms of phenomenological structures. It will consider the experience of depression from the viewpoint of individuals who live with depression, who have written of their life in this darkest of worlds, and who have found ways to look at depression from a more expansive perspective. The deeper meaning of depression is amplified in terms of archetypal themes from Greek mythology and symbolism in astrology and alchemy. The imaginal world is evoked in reverie, which is often tied to poetry. The final section of this study explores the world of poetic reverie and beauty, and relates these qualities to the process of depression.

#### Depression as Lived Experience, The Four Existentials

Phenomenological experiences occur in space and time, and space and time are experienced within our bodies and in our relationship to others. These four structures, lived space, lived time, lived body and lived relationships define four existentials of the phenomenological world (van Manen, 1990, p. 101). All lived experiences fall within these four existential categories. A phenomenologically based psychopathology (e.g. van den Berg, 1972; Keen, 1978) attempts to understand suffering through an individual's lifeworld in terms of these existentials. Thus, rather than imposing an external predetermined list of diagnoses on sufferers, the phenomenologist tries to understand how the sufferer sees *their* world.

To best understand how depressed persons see their world, first hand accounts are used as sources for the four existentials. An indication of the interest in depression is gleaned from the large number of recently published autobiographical accounts of the experience. Perhaps the first and best known of these is William Styron's Darkness

Visible published in 1990. In addition to Styron's moving account, Undercurrents, A Life Beneath the Surface by Manning (1994), The Beast, A Journey through Depression by Thompson (1996) and the interesting anthology Unholy Ghost, writers on depression edited by Nell Casey (2002) were used as sources for lived experiences of depression. Solomon (2002) provides an exhaustive up to date summary on depression in The Noonday Demon, which approaches the phenomena from a personal perspective.

### *Lived Space*

How we experience spatiality is important to how we live and perceive the world. If we see our lived space as threatening and confining we will react to the world differently than if we see our world as spacious and comforting. Our environment produces an affect on us, which, in part, determines how we respond to the environment. How does the depressed person experience space? Here are two first hand observations:

...I did notice that my surroundings took on a different tone at certain times: the shadows of nightfall seemed more somber, my mornings were less buoyant, walks in the woods became less zestful, and there was a moment during my working hours in the late afternoon when a kind of panic and anxiety overtook me... (Styron, 1990, p. 42)

...I had moved back to my house in Connecticut. It was October, and one of the unforgettable features of this stage of my disorder was the way in which my farmhouse...took on for me at that point when my spirits regularly sank to their nadir an almost palpable quality of ominousness. ... I wondered how this friendly place... could almost perceptibly seem so hostile and forbidding. (ibid. p. 45)

The quality here is one where spatial reality takes on a threatening and hostile meaning. Darkness of space reaches out to the depressed one, reinforcing their state of remoteness. The feeling of being small in the presence of large spatial dimensions also appears in accounts from the depressed. A distancing from the perceived object is often

reported, which again reinforces the feeling of being separate from the world. Here the perceived outer world mirrors the inner space of emptiness.

### *Lived Time*

Lived time is different than quantitatively determined physical time. We have all experienced the quickness and slowness of the passage of time. The slow passage that tends to accompany us when we have a task to carry out that we do not want to do, or the quickness of the passage of time when we are enjoying something. Depression tends to heighten the experience of the slowness of time. We wait for the minutes to pass, for the days to pass, in the hope that the next moment may bring some relief and if not relief, then change, a shift in what we experience, with the hope that this shift may transform the suffering. Accounts of the experience of time in a state of depression are that:

There is an excruciating loneliness in waiting out the hours till morning, again and again. Time moves more slowly, and the fact that everyone else is at rest makes me feel so separate, so alone. I long to recover what comes so easily to everyone else. (Manning, 1994, p. 61)

I am afraid. Afraid of managing the desolation of each second. Afraid that I won't make it to the next hour. ... Time used to be something I loved to play with, to tease, to race. (*ibid*, p. 107)

The lived temporality of the depressed expresses a sense of frozenness, a sense of endless waiting. This interior experience of time suggests circularity of the process, a feeling of going nowhere. In alchemy the adepts found that transformation takes time, the work or *opus* must go through a series of stages, and many of these stages need repeating, until certain changes occur. Perhaps this is what occurs in the depressed person, where the inner work begins and proceeds at its own pace, which is not synchronous with exterior time. Sufferer and therapist must recognize and respect the existence of this

lived temporality. Hillman argues that we must honor the process of depression and let it evolve in its own time:

*The true revolution begins in the individual who can be true to his or her depression. Neither jerking oneself out of it, caught in cycles of hope and despair, nor suffering it through till it turns, nor theologizing it – but discovering the consciousness and depth it wants. So begins the revolution in behalf of soul. (Hillman, 1975, p. 98-99).*

### *Lived Body*

A constant in all lives is the presence of the body. Without embodiment we experience nothing. Embodiment gives form to the lifeworld, it defines the boundaries between the exterior and interior. Depression can alter these perceived boundaries and accentuate the experience of isolation. The level of awareness of body experience varies from person to person, but there is always some body experience. For the depressed, body experiences can be profound, as shown in the following accounts:

I felt a kind of numbness, an enervation, but more particularly an odd fragility-as if my body had actually become frail, hypersensitive and somehow disjointed and clumsy, lacking normal coordination. ... Nothing felt quite right with my corporeal self; there were twitches and pains, ... Given these signs, one can understand how... a connection is made between melancholia and hypochondria... (Styron, 1990, p. 43-44)

Soon evident are the slowed down responses, near paralysis, psychic energy throttled back close to zero. Ultimately, the body is affected and feels sapped, drained. (ibid, p. 47)

During the day, I felt a sense of intolerable grief, as though somebody close to me had died. I couldn't concentrate, the top of my felt like it would blow off... (Karp, 2001, p. 139)

Some people experience depression primarily as a kind of mental misery. Mine has always had a physical component as well. As I saw it, my mind made a choice each day about how to torment my body. One day it was a terrible "grief knot" in my throat. Another brought chest pain that could easily be mistaken for a heart

attack. Sometimes, I felt an awful heaviness in my eyes, pressure in my head, feelings of sadness in my cheeks, shaky hands and legs, or some combination of these things. I was constantly aware of my body, monitoring from minute to minute whether things had become better or worse. (ibid, p 143)

There is a polarity in lived body experiences of depression. Some individuals indicate an enervated feeling, a nervousness that is contained but straining to be released, while others feel a heaviness, a dissociation from the felt sense of the body, or pain in the chest, or legs. The body is carried as an after thought, a leaden mass that does not respond to our wishes. A Saturnine spirit occupies the body, making it feel old and heavy.

Migraines are common in depression, where the sufferer must retreat into physical darkness to escape pain of light. Here the body conspires to drive the depressed into spatial isolation and shadow. Why this polarity between the energetic and lethargic? Perhaps the body can only hold so much within itself then reaches a point where somatically the withheld energy must be released, which is perhaps an outward manifestation of the inner tension.

### *Lived Relationships*

The final existential of lived relationships includes interactions between subject and objects in the lifeworld, where 'objects' includes others. Also included in this category is the relationship of the conscious ego with interior elements of the psyche, for example dream elements and archetypal elements of the unconscious. Relationships within the world provide an existential context for defining oneself. We are ever in relation to the other and react to what is perceived. Relationships transform in response to the other. In depression, the ability to relate seems cut off, it is as if one is looking out into the world, wanting but unable to connect. There is a yearning to yell out to the world

that you are present and desire connection, but are bound and gagged against connection, which heightens feelings of isolation and loneliness. Accounts of this experience are:

My life is so shaky that I cling to structure. I find comfort in the drastic curtailment of the social life that used to give me such pleasure. I shrink from the ring of the phone and the knock of the door. I am worried about being with other people. Of having to 'fake it' for extended periods of time.  
(Manning, 1994, p. 87)

He [William Styron] stopped allowing me to invite guests, arrange celebrations. He wrote in the afternoons and then drank tumblers of whiskey till the wee hours while he listened to certain pieces of Mozart and Beethoven over and over. He talked to me less and less, read to me not at all. Increasingly he became irritated by noise... (Styron, 2001, p. 128)

Depression is such a cruel punishment. There are no fevers, no rashes, no blood tests to send people scurrying in concern. Just the slow erosion of the self, as insidious as any cancer. And, like cancer, it is essentially a solitary experience. A room in hell with only your name on the door. I realize that every person, at some point, takes up residence in one or another of these rooms. But that realization offers no great comfort now. (Manning, 1994, p. 107)

The word relation derives from the Latin, *relatio*, to carry back. This implies there is someone to do the carrying, there is something to carry and the carrying motion is a return from some separated other, a subject, an object, the other, and motion. What is carried back in relations with others? Perceptions intended from interactions with the other. The mere presence of the other creates a sense of both uniqueness and belonging. The differences with the other helps define who we are, the similarities with the other helps make us feel a part of a greater whole. Holding the sense of parts and whole simultaneously is a phenomenological challenge. Depression closes us off from feeling the whole, feeling that we are an integral part of a greater presence. Depression places us in an isolated room with glass walls, where we look out but cannot connect with the

other. Without connection, we return empty handed from interaction with the other. This exterior emptiness feeds the interior loneliness.

Attempts to communicate this feeling of loneliness to the inexperienced in the lifeworld of depression can lead to irritability. The sufferer feels an exclusivity that can be used to elicit sympathy from others. Freud (1917) found this to be one way the depressed attempts to remain connected to the love object that is lost. For Freud the loss of relationship led to a retroflection of anger to the part of the inner self still identified with the lost love object. This is why the depressed person, unlike the mourning individual feels such deprecation against themselves. It is anger misdirected due to identification, where that which is carried back is unfulfilled anger.

#### Pathologizing Depression

The word pathology is the union of *pathos* and *logos*, and hence denotes the study of suffering. In its modern use, it implies the categorization of suffering, creating a taxonomy of suffering that hopefully aids in the treatment of illness. Psychopathology is based on the diagnostic techniques developed in the medical tradition. The patient presents the clinician with an issue or problem, the clinician then asks the patient specific questions to determine the best category for their illness. Given a category of classification the physician has a diagnosis in hand. A treatment of the illness follows from the diagnosis; where the more specific the diagnosis, the more specific the treatment. Keen describes the limitations of this approach:

...the medical perspective, which seeks out *diseases*, lies behind this language, and modern medicine is fundamentally built on the Cartesian understanding of the body as machine. ... this 'disease concept' still underlies mainstream medical thinking about mental disorders and produces the dehumanization in practice that is embedded in the dehumanization in the language. (Keen, 1978, p. 239)

The development of psychology in the late 19<sup>th</sup> century from the medical sciences led to a medical model of psychopathology. However, the study of suffering need not be limited to this medical model. There is no need to pathologize pathology. Sartre (1963) provides a different view of psychopathology:

I believe that one cannot understand psychological disturbances *from the outside*, on the basis of a positivistic determinism, or reconstruct them with a combination of concepts that remain outside the illness as lived and experienced. I also believe that one cannot study, let alone cure, a neurosis without a fundamental respect for the person of the patient, without a constant effort to grasp the basic situation and to relieve it, without an attempt to rediscover the response of the person to that situation, and ... I regard mental illness as the “way out” that the free organism, in its total unity, invents in order to be able to live through an intolerable situation. (as quoted in Keen, 1978, p. 234)

Following Sartre’s view, illness is explored from the interior outward, rather than standing outside of the client’s world and imposing on the client a predefined pathology. The phenomenological approach to psychopathology (e.g. van den Berg, 1972) asks how the client lives their lifeworld, how they experience their lifeworld in terms of temporality, spatiality, corporeality, and the relational. The therapist attempts to enter the worldview of the sufferer, to understand what the sufferer experiences.

Keen feels that the language of psychopathology can dehumanize the sufferer. Hillman (1990, p. 30) notes that, “...words continually fall ‘mentally ill’ and are usurped by psychopathology, so that we can hardly use them without their new and polluted connotations.” How has the language of psychopathology changed through time? In 1898, Kraepelin compiled a nosology of mental disorders for the medical community. His book on depression includes photos of patients, lengthy descriptions of the feelings of these patients and most importantly transcripts of the patients lived experience of depression. Regarding the patient’s lived space Kraepelin (1921, p. 77) notes that “Their

presentations lack sensuous colouring. The impressions of the external world appear strange, as though from a great distance... ." In terms of lived body, Kraepelin (ibid) notes "...their own body feels as if not belonging to them...", and in terms of lived relationship Kraepelin (1921, p. 78) notes , "...he became shy and retiring, because he cannot any longer look at any one or go among people."

Contrast these descriptions of 1898 with the American Psychiatric Associations Diagnostic and Statistics Manual (DSM-IV-TR) (2000, p. 349) description of major depression, "Loss of interest or pleasure is nearly always present, at least to some degree...Many individuals report impaired ability to think, concentrate, or make decisions." These descriptions use the language of external observations, while the older language of Kraepelin is more phenomenological. The newer language moves further from the lived experience of the depressed individual.

According to the DSM-IV, depression is categorized as a mood disorder. The word mood derives from the German *Mut* , which means spirit or soul. The word disorder derives from the old French word *désordre* meaning out of line, chaotic. So, mood disorder literally means chaos of the soul. The implications of this go far beyond the medical model's view of illness. What is chaos of ones soul? To answer this question requires entry into the archetypal world of the imaginal, and invokes a spirit of poetic reverie.

## The Imaginal Realm of Depression

Exploring the imaginal world of depression begins with the Greek legend of Chaos. According to Hesoid's Theogony, Chaos was the first god, the formless void of darkness, out of which all things possible arose:

In truth first Chaos came to be, but next wide-bosomed Earth, the ever-sure foundation of all the deathless ones who hold the peaks of snowy Olympus, and dim Tartarus in the depth of the wide-pathed Earth, and Eros, fairest among the deathless gods, who unnerves the limbs and overcomes the mind and wise counsels of all gods and all men within them. (Hesiod, [115-125])

Eros is born from Chaos, a mythic image that brings richness and depth of understanding to the phenomenology of depression. If depression is chaos of the soul, then from this state is born our ability to love. Therein lies the poetic reverie of bringing light into the darkness of our souls. Eros is the god of relationship, the mover towards love. In depression we experience isolation from the exterior, we sink into the interior lived world. We are challenged to look within and experience the gods within. The collective world views relationship as directed outward from subject to outer object, but there is the equally, and at times more, important interior relating, which rests on the imaginal. Lockhart (1983, p. 115) points out that, "... an imaginal relationship with one's own psyche may be the very essence of eros. An eros relationship with one's psyche may be essential for an eros relation with others."

The lived experience of depression, the chaos of soul, incubates the inner creation of Eros. Again, Lockhart points out:

If Chaos is womb to Eros, it must be necessary to stay with Chaos, in Chaos to nurture it, stand it, give it time, energy. It must be necessary to give disconnection and unrelatedness its place, its space, to carry Chaos, to know and feel the body of Chaos, to accept that it belongs, and to realize that suffering all of this is for the purpose of Eros giving birth. (Lockhart, *ibid*)

The reverie of this process is that soul is lost in the void of nothingness. In that dark place where there is no possibility of relating, for there is no perceptible other in this void. Yet Eros is born from this void, the desire to reach out and relate arises from this darkness, yearning to connect with the other, to establish an I-Thou possibility. Eros provides us with the potential for self-reflection and connecting to the other. A sense of our human-ness, establishes itself through this connection. Looking into a mirror returns our image unperturbed, looking at the Other effects our image, and in the process we become more human.

The void can remain in emptiness for so long. Then, the *lumen naturae* begins to glimmer in a soft and almost imperceptible manner. This light is contained within the darkness. The light of stars caught within the darkness of the void. It is the white circle within the darkness of the tai-chi symbol of Taosim, the light, which is pregnant within the darkness, waiting to be born just as Eros is born from the darkness of Chaos. By holding onto this darkness long enough, the opposite appears. Eros awakens from the darkness. We yearn to move towards relationship, and can act on this yearning.

The beginning is signaled by a desire for interior relating, a relating to the gods within, be they images, feelings or sensations. This interior world is manifest with parts of ourselves that are often neglected or unrecognized. Harding (1970, p. 20) suggests it is their calling to us that pulls us into the dark void. Our lack of relating to them leads to their loneliness, which is then transformed into our loneliness. In the process we descend to their world and must offer ourselves to them. If we continue to neglect their call for relation, we sink into that feeling of isolation, irritability and pain, to the world of depression.

Eventually, we begin to desire to move towards outer relationship, to carry back the message that we are not alone. We reach out and perceive the world, experience the world as a lived experience. Thus giving birth to the *coniunctio*, the uniting of I and Thou. We emerge out of the darkness, experiencing a joining with the world.

Beauty facilitates this birthing process. Beauty awakens our desire to relate, beauty in the feminine, beauty in the Word. Awakening us to reverie in life, reverie to breath life back into our souls. Living in reverie means celebrating beauty in all forms. Opening awareness to seeing, sensing, hearing, feeling the beauty in the world, this is the concretization of *relatio*, making Eros present in our lives. Bringing soul to Matter, is the immanent *coniunctio*. And with this return, this carrying back of our soul into body, we experience the reverie of life.

Another image of depression occurs in astrology through the planet Saturn (e.g. Greene, 1976). The presence of Saturn brings with it the fallow field, the heaviness and density of life. Ficino (according to Moore, 1990) felt that Saturn also brings the ability to center on an object, to reflect and deepen awareness of that on which is focused, which is a positive aspect of Saturn, the aspect of centeredness. Greene (1976) notes that Saturn and Venus manifest as a wounding relationship. A sense of loss pervades this aspect, lost relationships, relationships never manifested or imagined. The neglectful mother, the absent father, the failed marriage, the experience of melancholy over the missing other, isolation from the world because that special one is absent from life. Saturn overpowers Venus in size and pull. His presence brings doubt in words spoken, mistrust and suspicion.

Venus evokes sensuality, the bodily presence of felt sense. Saturn casts a shadow over these attributes. He looms over and brings forth shame and secrecy. He wants Venus to cover herself. He brings seriousness that smothers the acts of reverie. He is often pictured with a scythe, ready to cut down the enlivened. Venus attempts to seduce Saturn, but his seriousness seems impenetrable. Of course couched within Saturn is a sense of the Trickster. A playfulness buried deep within, the vision of the father who plays with his children, but in a moment falls into rage.

Can Saturn and Venus unite in equality? A special place, a *temenos*, is required for Saturn to meet Venus, a place that insures protection from the outside, an inner chamber where Venus can be herself and embrace Saturn. Saturn begins to let down his wariness and becomes receptive to Venus, and from this union Eros arises to free the soul from darkness. This interior space is within psyche under depression.

Jung pointed out the prescient parallels between the individuation process and alchemy. The alchemical process is the symbolic transforming of lead to gold, where lead, denotes the metal of Saturn and gold is Sol, the new consciousness. The process occurs in stages, where the stages may require many repetitions. imagined is a circular process, endless in nature. Jung notes that,

This work is difficult and strewn with obstacles; the alchemical opus is dangerous. Right at the beginning you meet the "dragon", the chthonic spirit, the "devil" or, as the alchemists called it, the "blackness," the *nigredo*, and this encounter produces suffering. "Matter" suffers right up to the final disappearance of the blackness; in psychological terms, the soul finds itself in the throes of melancholy, locked in a struggle with the "shadow." The mystery of the coniunctio, the central mystery of alchemy, aims precisely at the synthesis of opposites, the assimilation of the blackness, the integration of the devil. For the "awakened" Christian this is a very serious psychic experience, for it is a confrontation with his own "shadow," with the blackness, the *nigredo*, which remains separate and can never be completely integrated into the human personality. (Jung, 1977, p. 228)

The alchemical process mirrors the imagery of Chaos and Eros, and that of Saturn and Venus. First there is descent into darkness, the world of shadow, where suffering is lived. The soul is struggling to find expression. For Jung the mystery of this process is in integration of the devil, the discovery and acceptance of our shadow, our personal chaos. Thus, chaos cannot be avoided, indeed the more we turn away from chaos, the stronger its pull on us. Depression is that pull into darkness, affording us the interior spatial and temporal reality to make a connection, to integrate the devil. From this dark stage of the *nigredo*, arises the *albedo*, the whitening of conscious recognition of the lived experience, but this is not the end, for what is needed to achieve transformation is embodiment. Mere conscious recognition is insufficient to give life, we need a living substance, blood, as symbolized in the *rubedo*, or reddening process bringing life to experiences of the world.

How do archetypal images relate to the phenomenological existentials? The interior lifeworld lives in its own spatiality and temporality. In this realm these structures need not be limited to fixed number, e.g. four dimensions, or linearity. The dreamworld is representative of the imaginal realm, and experience of this 'lived structure' tells us of how 'unreal' this world can be. Yet the existentials of space and time do exist in their unique way, and require us to expand our boundaries of experience.

The inner lived body is likewise a 'reality' of psyche. Here body is formless form, an infinite richness of fantasy and terrifying phantasm, yet lived forms they are. What of interior relationship? Again the dreamworld provides evidence for inner relationality of phenomenal proportions. This perhaps defines depth psychologies at their very core. If the exterior world is multicultural and diverse in ethnicity, the inner world explodes with

a population of multi-imaginal beings interacting on manifold levels. Giving outer expression to this experienced inner world moves us into the world of the poetic.

#### Poetic Reverie, Child of Eros

Imagination provides psyche with a way to explore both real and unreal worlds. It expands the dimensions of the lived existential structures of time, space, body and relating. Imagination is not confined to the ordinary, especially in its language. Bachelard (1971, p. 16) notes that, “The imagination invents more than things and actions, it invents new life, new spirit; it opens eyes to new types of vision.”

Poetry is a language of the imagination. It speaks from the depths of our soul. It is poetry, and art in general, where the imagination has free reign. Imagination encourages unfettered exploration of the world. Poetic expression of depression reveals the deeper meaning of this experience, as evidenced in the following:

As once the wingèd energy of delight  
carried you over childhood's dark abysses,  
now beyond your own life build the great  
arch of unimagined bridges.

Wonders happen if we can succeed  
in passing through the harshest danger;  
but only in a bright and purely granted  
achievement can we realize the wonder.

To work *with* Things in the indescribable  
relationship is not too hard for us;  
the pattern grows more intricate and subtle,  
and being swept along is not enough.

Take your practiced powers and stretch them out  
until they span the chasm between two  
contradictions ... For the god  
wants to know himself in you.  
(Rilke, 1989, p. 261)

Rilke feels that dark abysses are overcome through the reverie of relating, through reaching out to the world and holding the contradictions in life. Jung felt holding the tension of opposites critical to the individuation process. The first step of this process is the descent, which is, “The dread and resistance which every natural human being experiences when it comes to delving too deeply into himself is, at bottom, the fear of the journey to Hades.” (Jung, 1952, p. 336)

In the outer world relationship, the fourth existential, bridges the darkest spaces between ourselves and others. In the inner world, relationship connects the many parts of ourselves into a whole. Reaching this whole within the parts is the goal of individuation. The god who ‘wants to know himself’ is the Self, the centering archetype in Jung’s view. It can also be taken as soul, that aspect of ourselves that seeks union and completion.

The process that evolves is one of descent where the ego is pulled into closer contact with the unconscious, where the ego faces its shadow. This is experienced as a lowering of energy from the outer world. The interior has called and the removal of attention from the outer world leads to a lowering of affect. The inner world is one of chaos, it need not follow the linear and rational way of the outer collective. Its language is imaginal. Confrontation and immersion in this dark world causes fear and anxiety. Its pull is strong and engulfing, this is why the depressed feels trapped in the interior. This tension gives birth to relationality, Eros. At first the relating involves the inner world, and speaks in images. Eventually there is the reaching outward, depression lifts and creativity is released to the world. Bachelard feels the experience of imagination is essential to life:

A being deprived of the function of unreality is neurotic as well as being deprived of the function of the real... If the function of opening out, which is precisely the function of imagination, does not perform well, perception itself remains obtuse. (Bachelard, 1971, p. xlix)

The 'function of unreality' leads to 'opening out' to the world, it opens the doors of perception not possible in the linear, rational collective domain.

Is depression a necessary lived experience? One answer to this question rests in the polarity of nature, with light comes the dark. Again poetry adds depth of meaning to this question, D.H. Lawrence writes in 'The End, The Beginning':

If there were not an utter and absolute dark  
of silence and sheer oblivion  
at the core of everything,  
how terrible the sun would be,  
how ghastly it would be to strike a match, and make a light.

But the very sun himself is pivoted  
upon the core of pure oblivion  
so is a candle, even as a match.

And if there were not an absolute, utter forgetting  
and a ceasing to know, a perfect ceasing to know  
and a silent, sheer cessation of all awareness  
how terrible life would be!  
how terrible it would be to think and know, to have consciousness!

But dipped, once dipped in dark oblivion  
the soul has peace, inward and lovely peace. (Lawrence, 1971, p. 144)

Lawrence suggests the light of being would be unbearable without darkness to temper its brilliance. The oblivion of darkness provides a peaceful place for the soul to restore itself. The experience of depression creates this place of 'dark oblivion' where 'the soul has peace', perhaps this is the value of depression, providing an inner spatiality and temporality for the soul to rejuvenate, where the soul can speak its language of image. According to Gaudin (1971), "Imagination always reaches beyond what is given: it magnifies and deepens, it gathers the whole world into a simple image and the whole subject within its reverie." (as quoted in Bachelard, 1971, p. xlix)

Reverie is a lived state of openness to the world, it is living the phenomena that surround us. A relating both within and without that transcends normality. Reverie evokes the imaginal in everyday life. Poetry gives voice to the imagination, its language are images, springing from the soul. The connection to depression is found in the following, “What is the source of our suffering? It lies in the fact that we hesitated to speak... It was born in the moments when we accumulated silent things within us.” (Bachelard, 1971, p. lix) If the soul cannot speak its language of poetic reverie, then suffering exists. The soul must gather silent things within the unconscious, waiting to give birth to Eros.

It is fitting to end this phenomenological reverie of depression with a poem. It evokes the image of ‘the edge’, the boundary between conscious and unconscious, between shadow and light, between real and unreal, literal and imaginal.

#### In A Dark Time

In a dark time, the eye begins to see,  
 I meet my shadow in the deepening shade;  
 I hear my echo in the echoing wood-  
 A lord of nature weeping to a tree.  
 I live between the heron and the wren,  
 Beasts of the hill and serpents of the den.

What’s madness but nobility of soul  
 At odds with circumstance? The day’s on fire!  
 I know the purity of pure despair,  
 My shadow pinned against a sweating wall.  
 That place among the rocks-is it a cave,  
 Or winding path? The edge is what I have... (Roethke, 1992)

## Conclusion

The lived world of depression has been explored in varied ways. The effect of this illness on lived -space, -time, -body and relations from autobiographical accounts indicate that the lived world supports the inner experience. The space and time experiences confirm the confined experience of depression. Separation occurs from body and others, which also accentuates the feelings of isolation. Using these first hand accounts of the experience of depression allows us to view the world from the sufferer's perspective, and this brings more understanding of the experience itself.

Current diagnoses employ the medical model to understand illness. This approach imposes predefined categories on the sufferer, and in the process separates the therapist from the experience of the client. A phenomenological approach to diagnosis avoids this problem. Language contains a power beyond its ability to convey information. Language used in a more human sense can help convey the feelings of suffering. It is important for the therapist to be aware of how they use language in understanding their client's world. It is argued that the language of imagination can bring greater depth to the process of diagnosis.

An exploration of the imaginal language of depression through Greek mythology, astrological and alchemical symbolism provides a hermeneutic approach for adding more depth of understanding. Depression is 'Chaos of the soul', and out of Chaos is born Eros, our ability to relate and express. The presence of love and compassion in the healing process is imperative for a true appreciation of the suffering experienced. The symbolism provided by this approach brings us closer to understanding the reasons for depression.

Finally, poetic reverie is the child of Eros. Poetry is a language of the soul and provides us with a means of relating experiences in an imaginal way. Poets have used this language to describe aspects of depression. Perhaps poetic reverie can be used as a way of working with the depressed. What would happen if the sufferer were asked to read poetry, to write poetry? Would this open them to the imaginal in a new way? Perhaps treating the soul requires us to speak in its language.

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