

Becoming Hospitable and Uplifting Holding Environments for Humanity's Griefs: Depression and the Bahá'í Community

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By Thy glory, O Beloved One, Thou giver of light to the world! The flames of separation have consumed me . . . I ask of Thee, by Thy Most Great Name, O Thou the Desire of the world and the Well-Beloved of mankind, to grant that the breeze of Thine inspiration may sustain my soul, that Thy wondrous voice may reach my ear, that my eyes may behold Thy signs and Thy light as revealed in the manifestations of Thy names and Thine attributes, O Thou within Whose grasp are all things! (Bahá'u'lláh qtd. in *Bahá'í Prayers* 146)

Abstract

As the painstaking unification of the planet unfolds, human suffering is rapidly escalating. The World Health Organization (WHO) now recognizes anxiety and depression-related disorders as the new pan-

demics, debilitating increasingly larger and younger segments of the world's population.¹ People everywhere are searching for solutions; yet, in this time of deep disenchantment, there is also heightened suspicion toward ready answers. As Bahá'ís seek ways to bring Bahá'u'lláh's healing Message to a troubled, disillusioned, and anxious humanity, a question emerges. How can we become beacons of light and encouragement, shed distractions, and build hospitable, healing, and uplifting communities, able to embrace humanity's griefs and point the way forward? This paper focuses on what depression- and anxiety-related conditions can teach us about creating healing spiritual communities.

Resumé

Au fur et à mesure que l'unification de la planète progresse laborieusement, les souffrances humaines s'intensifient rapidement. L'Organisation mondiale de la santé reconnaît maintenant que les troubles anxieux et dépressifs sont les nouvelles pandémies qui affligent des segments de plus en plus importants et de plus en plus jeunes de la population mondiale. Partout dans le monde, les gens cherchent des solutions; pourtant, en cette période de désenchantment profond, on constate une méfiance accrue envers les réponses toutes faites. Alors que les bahá'ís cherchent des moyens de transmettre le message curatif de Bahá'u'lláh à une humanité troublée, désillusionnée et anxieuse, une question se pose. Comment pouvons-nous devenir tels des phares éclairants et rassurants, faire fi des distractions et bâtir des communautés accueillantes et édifiantes, capables

1 See global mental health initiative of the World Health Organization at <http://www.who.int/mediacentre/factsheets/fs220/en/>.

d'entendre le désarroi de l'humanité et d'indiquer la voie à suivre? Ce document examine comment les troubles liés à la dépression et à l'anxiété peuvent nous aider à comprendre comment créer des communautés spirituelles qui sont source de guérison.

Resumen

A medida que se desenvuelve la unificación dolorosa del planeta, el sufrimiento humano está escalando rápidamente. La Organización Mundial de la Salud ahora reconoce desórdenes relacionados a la ansiedad y a la depresión como las nuevas pandemias que están debilitando segmentos cada vez más grandes y más jóvenes de la población mundial. Personas por todas partes están buscando soluciones; sin embargo, en este tiempo de profundo desencanto, también hay mayor sospecha hacia contestaciones listas. A medida que los bahá'ís buscan traer el Mensaje curativo de Bahá'u'lláh a una humanidad inquietada, desilusionada y ansiosa, una pregunta emerge. ¿Cómo podemos ser faros de luz y ánimo, despojar distracciones, y construir comunidades hospitalarias, curativas y edificantes, capaces de abrazar los dolores de la humanidad y apuntar al camino que va hacia adelante? Este ensayo se enfoca en lo que las condiciones relacionadas a la depresión y a la ansiedad nos pueden enseñar acerca de crear comunidades espirituales curativas.

THE POWER OF SOCIAL ENVIRONMENTS

Affective disorders have always been part of the human condition. However, in the context of the complex and turbulent processes of globalization, we witness a fraying of the fabric of

social life, which has led to an escalating global burden of mental disorders. According to the WHO *Mental Health Atlas 2011*, one in four people develop some kind of mental illness at some point in their lives (WHO 2013). This reality has led the World Health Organization to announce a decade of mental health (2013–2020).²

We are social and relational beings, and the rising burden of affective disorders forces us to reexamine seriously the state of our communities and to consider the power of spiritual communities to function as holding environments for individuals. The construct of the holding environment was first articulated by British psychoanalyst Donald Winnicott in the context of the mother-child relationship. Winnicott describes a holding environment as “the continuation of reliable holding in terms of the ever-widening circle of family and school and social life,” which he saw as key to healthy development (238). This concept was further developed by Robert Kegan in the context of relationships among adults, in recognition of the fact that we never cease to need to be emotionally and spiritually held and supported by others (Kegan).

In our current context of vast global shifts, perplexity, and environmental degradation, we experience the emergence of what one theorist

² For a detailed update of the global mental health initiative of the World Health Organization see <http://www.who.int/mediacentre/factsheets/fs220/en/>.

refers to as the “social breakdown syndrome.”³ The significant increases in violence and social isolation and the proliferation of mental disorders and generalized suffering across culture-specific constructions of mental illness cannot be addressed to scale within a purely biomedical framework without a searching examination of the root causes and dynamics of many of these disorders. As recently noted,

[t]he root causes of many seemingly individual symptoms—loneliness, isolation, alienation, anxiety, anomie, low self-esteem, depression, relationship distress, addictions, violence, attention deficit disorders, eating disorders, and others—have been shown to be at least partly influenced by the beliefs, behaviors, and lifestyles generated by the assumptions and values of global capitalism, and particularly individualism, crude materialism, consumerism, greed, commodification, wealth distribution inequities, and labor exploitation. (Mustakova-Possardt and Woodall 91)

3 Adeoye Lambo describes it as a deepening disintegration of the socio-moral fabric of life on the planet, characterized by a rising incidence and prevalence of psychosomatic diseases, mental disorders, anxiety and neurosis, prostitution, crimes, political corruption, and a variety of sexual diseases, including AIDS; the alienation of large segments of society; and the depersonalization of individuals, with large groups of people living precariously on the periphery of society (114).

Complicating the search for viable systemic solutions that reach beyond person-centered models is a cacophony of competing worldview prescriptions, each one offering its own unique diagnosis and putative remedy. On the one hand, a growing number of progressive transcultural social scientists seek to develop culturally responsive approaches to health. On the other hand, a still dominant reductionist scientific approach insists on explaining the full complexity of human life on a presumably neutral behavioral level, allowing art, spirituality, and metaphor only on the fringes of science and marginalizing other ontologies and epistemologies.

In close relationship to this reductionist interpretation of reality, knowledge, and human motivation stands a crudely materialistic economic worldview that promotes consumption as the best indicator of societal progress. Within this well-entrenched paradigm there is also a tendency to interpret spiritually informed analyses as little more than vehicles of superstition and population control. The confluence of strident materialist economics, materialist approaches to science, and literalist and fundamentalist approaches to morality and religion produces massive moral incoherence, a global economy based on ruthless exploitation of human and natural resources, a deepening of inequalities related to wealth and access to opportunities for development, and a proliferation of various forms of political and religious extremism. Against the

backdrop of this collective crisis of value and meaning, the age-old human condition of personal suffering resulting from affective disorders of depression and anxiety has become virtually pandemic and, consequently, of global concern.

Depression—the experience of living beneath a blanket of sadness, meaninglessness, and hopelessness, and in a state of physical fatigue and mental fog—can have psychosocial, genetic, and chemical roots that are difficult to disentangle. Genetic vulnerabilities, for example, may be triggered by psychosocial conditions, while psychosocially conditioned mindsets may become embodied in neurochemical abnormalities that also induce depression. The existential suffering that attends depression, as well as the potential for healing, have profound spiritual dimensions that we are only just beginning to appreciate and understand. Thoughtful examination of this condition may illuminate for us the depths and layers of the human predicament, sensitize our souls to the wisdom of the compassionate recognition of our interdependence, and may empower us to discern beyond narrow and limiting expectations of how people should be.

THE NATURE OF CLINICAL DEPRESSION

According to the *Diagnostic and Statistical Manual of Mental Disorders* (5th edition), the common feature of depressive disorders is “the presence of sad, empty, or irritable mood,

accompanied by somatic and cognitive changes that significantly affect the individual’s capacity to function” (155). While there are wide differences in duration, timing, and presumed etiology of depressive disorders, the classic condition in this group of disorders, major depressive disorder, “is characterized by discrete episodes of at least 2-weeks’ duration involving clear-cut changes in affect, cognition, and neuro-vegetative functions” (*DSM-5* 155). When the condition continues for at least two years in adults, it is considered chronic.

Recognizable symptoms of depression are insomnia or hypersomnia; diminished ability to think or concentrate; feelings of worthlessness or excessive guilt; fatigue and loss of energy; frequently observable psychomotor agitation or restlessness, or psychomotor retardation; diminished interest in, or pleasure from, life activities. In addition, the “chronicity of depressive symptoms substantially increases the likelihood of underlying personality, anxiety and substance use disorders” (*DSM-5* 165). Heritability is approximately 40 percent, especially in first-degree family members.

The onset of depression can be associated with situational factors, or a medical condition, or may be comorbid with other mental, behavioral, or substance-abuse disorders. As a separate condition, it most commonly manifests as either major depression or persistent depressive disorder, previously known as dysthymia. In order to better understand the delicate and

dynamic balance of hereditary and environmental factors, as well as the psychosocial and behavioral factors that are often woven into the complex fabric of depression, let us examine a case study that may prove helpful in elucidating this condition.

Emerson is a kind and caring man in his sixties. He loves and deeply appreciates nature, where he says that he feels his spirit connect to the beauty and diversity of God's creation. In nature, his soul finds peace, energy, and freedom. By contrast, in the realm of human interactions, Emerson is reticent, self-conscious, subdued, and constrained. For much of his life, he has struggled with chronic irritability, mental fog, and a sense of worthlessness, as well as sleep disturbances. He easily becomes mentally scattered and physically agitated. He experiences everyday life as predominantly dull and joyless, and his overall tension escalates periodically into bouts of anxiety. Emerson reports a history of feeling inadequate and complains of being unable to express himself.

In Emerson's case, as in most others, the genetic vulnerability and chemical imbalance associated with clinical depression are typically set into motion by a host of stressful environmental and psychosocial factors. The suffering that results can range from mild or moderate to severe and typically goes undiagnosed and untreated for years.

How can a spiritual community provide a healing environment for people like Emerson that allows them to feel at ease—the way Emerson feels in nature?

To explore this question meaningfully, we need to examine Bahá'í ontology, which offers a clear contemporary articulation of the nature and dynamics of reality.

BAHÁ'Í ONTOLOGY AND EPISTEMOLOGY

In accordance with all earlier religious Dispensations, Bahá'í ontology recognizes reality as spiritual in essence, limitless and timeless, originating from a personal Creator, and manifested in an infinite diversity of life systems. As such, it acknowledges the interdependence of all beings: "all beings are linked together like a chain; and mutual aid, assistance, and interaction are among their intrinsic properties and are the cause of their formation, development, and growth . . . [E]very single thing has an effect and influence upon every other, either independently or through a causal chain" ('Abdu'l-Bahá, *Some Answered Questions* 46:6).

If we were to ponder deeply the implications of such interdependence, we would have to conclude that *we are both influencing and being influenced by every human condition in the world, and therefore have to enter into a meaningful and mindful relationship with it*. How is a mindful relationship different from our ordinary ways of relating?

To understand mindful relating, we first have to ponder the nature of the mind. In Bahá'í ontology, the mind is understood as "the power of the human spirit . . . and a necessary attribute thereof" ('Abdu'l-Bahá, *Some*

Answered Questions 55:6). Since the Bahá'í Dispensation upholds the oneness and complementarity of science and religion, it is helpful to correlate this understanding with the most recent scientific understanding of mind. In 2010, an interdisciplinary research team studying the nature of mind at the Mindsight Institute described mind as the embodied and interpersonal process of regulating the flow of energy and information (Siegel 52). According to this groundbreaking understanding, the mind is a lot more than the linear analytical processes associated with left brain function or the direct perception processes associated with right brain function. While brain is the matrix of the mind and, as 'Abdu'l-Bahá points out, "reason has its seat in the brain" (*Divine Philosophy* 96), mind is understood as a dynamic process that encompasses the whole human body as well as its interpersonal space. Such understanding is convergent with the Bahá'í ontological and epistemological understanding of the human spirit as expressing the power to encompass all things ('Abdu'l-Bahá, *Some Answered Questions* ch. 36).

From such an understanding follows that relating mindfully to all beings, whom we influence and by whom we are influenced, requires an intentional and fully awakened presence. As 'Abdu'l-Bahá reminds us, "character [is] highly communicable" (*Some Answered Questions* 57:8). Much recent research has elucidated this spiritual teaching about the role of cultivating an awakened presence in the dynamics

of individual and collective health.

RESEARCH ON THE POWER OF MIND, MINDSETS, AND HEART

By the closing years of the twentieth century, biomedical science had discovered that "our internal chemicals, the neuropeptides and their receptors, are the actual biological underpinnings of our awareness, manifesting themselves as our emotions, beliefs, and expectations" (Pert 9). Western mind-body medicine had begun to discern that the mind, spirit, and emotions are, in fact, unified with the physical body in what Deepak Chopra has called "one intelligent system" (qtd. in Pert 9). An explosion of mindfulness studies started to show that moment by moment, through its powers of thought, imagination, understanding, and memory, the human mind constructs models of reality that have profound implications for biochemical functioning and, therefore, for mood and behavior.⁴

These models of reality contain mostly unexamined, implicit, and impactful beliefs and assumptions about how we establish and express personal power in social contexts and about what constitutes justice as well as

4 See, for example, Ruth A. Baer's *Mindfulness-Based Treatment Approaches*, Richard Carlson and Joseph Bailey's *Slowing Down to the Speed of Life*, and Francesco Pagnini and Ellen Langer's "Perceived Control and Mindfulness: Implications for Clinical Practice."

love in human relationships.⁵ However faulty or inaccurate such inner models may be, they function as lenses through which we perceive what happens to us. The mind and body experience these mind-created models of life as reality, and we are often unaware of our cognitive distortions.

We do not grow up being deliberately taught how to use the mind in a balanced way and how to avoid cognitive distortions as much as possible. To the contrary, during our formative years, we grow up in mostly imbalanced human contexts where we may well encounter destructive thinking patterns modeled by powerful adults. Through frequent exposure to them, these thinking patterns become mindsets⁶ that render us relatively blind to other ways of seeing reality. Such mindsets often generate depression and anxiety, but they can also account for exploitative or guarded and superficial relating to others. Any of these mindsets will compromise our health.

Mindfulness studies have shown that we can reverse these adverse mindsets through the remarkable neuroplasticity of the human brain and the ability of thought to change

the brain's physical wiring. In the case of depression, "[...]ust thinking about depressive thoughts in a new way can dial down activity in one part of the brain that underlies depression and increase it in another, leading to clinical improvement" (Begley qtd. in Masumian 28).

A growing body of research points to the power of cultivating a focus on gratitude to protect us from the impact of negative mindsets: "Gratefulness will push fear and anxiety out of your consciousness. It's a powerful cleansing agent for your psyche, dissolving any resentment" (Sanders qtd. in Masumian 93).⁷

Intentionally established spiritual practices of meditation and contemplative self-reflection correct the cognitive distortions of mindsets and cultivate a clearer perception of reality over time, resulting in a healthier experience of life.⁸ Further, studies increasingly recognize that meditation and contemplative spiritual practices are "heart-centered."⁹ Because all spiritual traditions associate the heart with a deeper intelligence linked to

7 See, for example, Robert Emmons' *Thanks! How the New Science of Gratitude Can Make You Happier*.

8 See, for instance, Baer's *Mindfulness-Based Treatment Approaches*, Herbert Benson's *The Relaxation Response*, Lissa Rankin's *Mind Over Medicine*, and Daniel J. Siegel's *Mindsight*.

9 See John Kabat-Zinn's *Full Catastrophe Living* and Farnaz Masumian's *The Divine Art of Meditation*.

5 For an in-depth discussion of how we construct these core human concepts, see William Hatcher's *Love, Power, and Justice*.

6 For further discussion of the dynamics of mindsets and unhealthy "normal" mental habits, see George Pransky's *The Relationship Handbook* and Rick Hanson's *Buddha's Brain*.

quieting the discursive mind, there have been interesting hypotheses put forth exploring potential connections between the metaphorical spiritual heart, the physical heart, and the brain, as well as the possible significance of such connections for human wellbeing.¹⁰

In 1991, neurocardiologist J. Andrew Armour theorized that the physical heart possesses its own complex nervous system that perceives, processes, and retains information independently of the brain. Meanwhile, Gary Schwartz, professor of psychology and psychiatry at Yale University, and Linda Russek, Harvard research psychologist, began to publish their own conclusion that the heart stores energy and information that may contribute to one's sense of self (Schwartz and Russek). At about the same time, physicians such as Larry Dossey and Bernie Siegel were beginning to suggest a connection between successful healing and aligning brain processing with the energetic information flow of the heart through a range of spiritual practices.

In convergence with this emergent broader understanding of mind and human energy and information systems, some heart surgeons, psychiatrists, and psychologists began to describe cases where heart transplant patients reported experiencing

memories from the life of the heart donor (Pearsall 7). Also reported were cases where the patient adopted new personality traits akin to characteristics possessed by the heart donor (Bunzel et al.; Pearsall 122–24).

Clinical psychologist Paul Pearsall summarizes the research up to 1998 that points consistently to the presence of two intelligences in the human being—brain intelligence and heart intelligence—and he discusses the importance of the proper alignment of the two (Pearsall 17–18, 172–73). He interprets the findings as suggesting that the physical heart is a powerful energetic center, which communicates energetically with other bodily systems, information that, he concludes, may be stored even at the cellular level in the heart. His hypothesis is explained in the following excerpt:

If information is carried in the energy of the heart and circulates within the cells, and if energy cannot be destroyed, whatever memories of a life experience anyone has ever had may be able to become our own individual memories. Unlike the more individual and personal information stored by your brain, cellular memories may be experienced as representations of universal, archetypal, infinitely shared memories that represent the collective unconscious. (Pearsall 106)

10 See, for example, the research on heart-brain communication and degrees of coherence carried out by the HeartMath Institute.

Earlier, pioneer physiologists John and Beatrice Lacey had theorized that

the physical heart communicates extensive information to the brain along different pathways and thus might significantly affect how we perceive and react to the world around us (Lacey and Lacey).

All of this theoretical discourse seemed to suggest that the nervous system controlling the heart might communicate with the brain. It further indicated that when the physical heart enters into highly coherent heart rhythms (described as smooth, harmonious sine waves), there might occur a sort of attunement between heart rate and brain waves.¹¹ Strikingly, such attunement between heart and brain was observed in people whose spiritual practice focused on cultivating the metaphorical heart (the affective experiences alluded to in scripture in such as striving to possess a “pure heart”) through the practice of developing positive spiritual attitudes and attributes, such as gratitude, love, and caring.

Positive psychology research confirms that practicing positive spiritual attributes broaden and build our ability to appreciate multiple points of view (empathy) and facilitate capacities for problem-solving (creativity), thus possibly enabling us to access a deeper and more comprehensive expression of our intelligence.¹²

¹¹ See HeartMath Institute research reported in the documentaries *The Living Matrix* and *Missing Links*.

¹² See Barbara Fredrickson, also Snyder and Lopez

Much of this recent research elucidates the mind/body/spirit connection, discussed in detail in the Bahá'í Writings. Prior to the Bahá'í Writings, as Henry Weil points out, “little was known of the spiritual factors that account for man’s station at the apex of creation” (35). Hindu and Buddhist Scriptures emphasized the need to train the human mind, without articulating explicitly the nature and dynamics of the human spirit and its relationship to Spirit:

The mind is wavering and restless, difficult to guard and restrain; let the wise man straighten his mind. (*Dhammapada* 3:30)

For him who has conquered the mind, the mind is the best of friends; but for one who has failed to do so, his mind will remain the greatest enemy. (*Bhagavad Gita* 6:6)

For the first time in the history of revealed knowledge, in the nineteenth century the Bahá'í Dispensation explained the nature and dynamics of the human spirit and its powers.

BAHÁ'Í UNDERSTANDING OF THE POWERS OF THE HUMAN SPIRIT

‘Abdu’l-Bahá distinguishes five degrees of spirit. The first three pertain to the realm of creation. They are the vegetable spirit of growth through the combination of elements; the animal spirit, which expresses the power

of senses; and the human spirit, or the rational soul, which is an emanation from the Unknowable Divine. The relationship between the rational soul, the mind, and the body is described in the following way:

For the mind to manifest itself, the human body must be whole; and a sound mind cannot be but in a sound body, whereas the soul dependeth not upon the body. It is through the power of the soul that the mind comprehendeth, imagineth and exerteth its influence, whilst the soul is a power that is free. The mind comprehendeth the abstract by the aid of the concrete, but the soul hath limitless manifestations of its own. The mind is circumscribed, the soul limitless. ("Tablet to August Forel" 8)

In this dialectical understanding of human reality as a dynamic between mind, body, and soul, in which each plays a fundamental role, biochemical sicknesses are understood as "hindrances that interpose themselves between [one's] soul and [one's] body" (Bahá'u'lláh, *Gleanings* 80:2).

Consistent with earlier Hindu and Buddhist traditions, 'Abdu'l-Bahá emphasized the role of mind in our perceptions of reality: "All we see around us is the work of mind" (*Abdu'l-Bahá in London* 95). His teachings underscore the importance of cultivating a disciplined mind that reasons well and makes responsible decisions. However,

the Bahá'í Writings identify another power of the human soul in addition to the reasoning mind—that of inner vision:

This is a power that encompasses all created things, comprehends their realities, unravels their hidden mysteries, and brings them under its control. It even understands things that have no outward existence, that is, intelligible, imperceptible, and unseen realities such as the mind, the spirit, human attributes and qualities, love and sorrow—all of which are intelligible realities. ('Abdu'l-Bahá, *Some Answered Questions* 48:4)

'Abdu'l-Bahá clarifies that when the faculty of inner vision is applied to the physical world, it manifests as intuition and insight, and it discovers creative solutions. When it is applied to the spiritual realm, it manifests as spiritual discernment.¹³ In addition, He anticipates much recent psychological research in making clear that the reasoning mind has to quiet down in order for the faculty of inner vision to open up. Psychological studies now confirm that as we quiet our mental chatter, slow down the discursive mind, and drop into what Kabat-Zinn describes as "heart-fullness" and what Tara Brach calls listening to life as "one of the great templates for pure

13 See Henry Weil, *Drops from the Ocean*

wakefulness and awareness,” we relax into the present moment, known in wisdom traditions as the “eternal now,” and thus access our inner vision.¹⁴ This spiritual power of inner vision appears to be what the research quoted earlier attempts to understand in terms of the connections between the metaphorical heart, the physical heart, and the brain, as well as their alignment in meditation and mindfulness practices.

‘Abdu’l-Bahá explains the process of the full activation of inner vision through what He describes as the fourth degree of spirit—the spirit of faith. The spirit of faith is distinguished from faith. While faith is a loving and trusting relationship of a human being to spiritual reality and to our Creator, the spirit of faith originates with God.¹⁵

[T]his spirit [of faith] proceeds from the breath of the Holy Spirit, and . . . becomes the cause of everlasting life . . .

The fifth degree of spirit is the Holy Spirit. (‘Abdu’l-Bahá, *Some Answered Questions* 36:6–7)

[T]he human spirit, unless it be assisted by the spirit of faith, cannot become acquainted with the divine mysteries and the heavenly

realities. (‘Abdu’l-Bahá, *Some Answered Questions* 55:5)

Hence, when touched by the spirit of faith, the human spirit draws closer to its full potential to encompass reality. This understanding of the role of faith in enhancing the capacities of soul helps make clear why spiritual communities would be natural holding environments with strong healing potential for people who suffer from affective disorders.

In summary, an abundance of recent research has confirmed Bahá'í understanding that meditation and God-centered practices of prayer and contemplation cultivate in individuals and communities a deeply healing spirit of loving-kindness and compassion (Masumian; Newberg and Waldman). Bahá'í scholar Mírzá Abu’l-Faḍl emphasizes the role of concentration in this kind of spiritual growth:

‘Abdu’l-Bahá said that there is in man a power of concentration not fully developed, which power rightly directed can lead him to great heights of knowledge, understanding and illumination. Prayer and supplication are the ladder, He said, “by which the soul ascends and as the power of sustained communion with God develops the capacity to receive the influx of the Holy Spirit and to penetrate, the hidden mystery unfolds.” (qtd. in Masumian 13)

14 See Hanson’s *Buddha’s Brain*, Siegel’s *Mindsight*, and Thich Nhat Hanh’s *Peace Is Every Step*.

15 See Henry Weil, *Drops from the Ocean*

DEPRESSION
AND THE BAHÁ'Í COMMUNITY

Now that we have examined the role of mind, mindsets, heart, and faith in health and healing, we return to the example of Emerson in order to better appreciate both the individual's capacity to heal and the community's capacity to serve as a healing holding environment.

THE EMERSON CASE STUDY

Having grown up in an emotionally and spiritually deprived context of poverty, alcoholism, and silent suffering, Emerson developed many thinking habits that are associated with the cognitive bias of learned helplessness.¹⁶ This cognitive filter paralyzed Emerson's constructive engagement in social contexts, and, at various points in his life, his distorted perceptions may have triggered his genetic predisposition to develop or maintain depression. Over time, Emerson's tendency to become depressed gave rise to seemingly permanent personality characteristics, such as defensiveness and a distrustful attitude toward others. These unattractive personality traits can interfere with his capacity to care for himself and maintain meaningful intimate relationships.

Indeed, Emerson's condition is

16 For more on this cognitive bias, see William R. Miller and Martin Seligman's "Depression and Learned Helplessness in Man" and Seligman's *Helplessness*.

more common than we realize. Many people are apt to be on a continuum from minimal to strong predisposition to the "thought storms" that can develop into depression and anxiety disorders. A wide range of different modalities of integrating spirituality into treatment can be understood from the point of view of the above discussion as seeking to engage the powers of the soul to uplift the mind.¹⁷ The physiological dynamics of that appear to be that brain activity aligns with heart activity, and this brain-heart entrainment unlocks a highly intelligent flow of awareness and insight, which facilitates the reconstruction of cognitive distortions and the transformation of suffering into opportunities for growth.¹⁸

In the case of Emerson, who identifies himself as being Bahá'í, prayer, meditation, mind/body martial arts practices, and the steadfast spiritual commitment and support of his family have gradually strengthened his resilience in spite of clinical depression. He has successfully overcome challenging circumstances and built a constructive life using his talents, even as he remains somewhat closed off in his own world and struggles with issues of faith.

17 See, for instance, Miller's *Integrating Spirituality into Treatment* and the National Institute for Healthcare Research's *Scientific Research on Spirituality and Health*.

18 See McCraty, Tiller and Atkinson's *Head-Heart Entrainment: A Preliminary Study*.

Emerson's constant wrestling with depression may make it more difficult for someone like him to connect with Bahá'u'lláh's counsel: "My Calamity is My providence, outwardly it is fire and vengeance, but inwardly it is light and mercy" (Arabic Hidden Words no. 51). However, through spiritual self-education and the steady emotional and spiritual support of his family—and, to some extent, the support of his spiritual community—as well as through his psychotherapeutic work, Emerson is gradually beginning to internalize a different model of reality, one based on a belief in a benevolent, spiritually interconnected and dynamic universe whose Creator cares deeply for him, even as social reality may not be benevolent. This allows him to begin to break the intractable barrier between his sensitive soul and his insecure and withdrawn personality. Even if Emerson must struggle with depression throughout his life, he can increasingly find some measure of strength and can develop more enduring relationships with others who accept him in his full humanity. This healing process for both Emerson and his family typically requires not just the efforts of the individual, but also the presence of genuinely "holding" spiritual communities.

A SPIRITUAL COMMUNITY AS A HOLDING ENVIRONMENT

The psychological concept of a holding environment, introduced at the beginning of this paper, offers a more

detailed understanding of how a spiritual community can play a critical part in recognizing and nurturing families dealing with affective disorders.

First, it is important to clarify why a spiritual community, relative to many other types of communities, may have a special role as a holding environment.

With the rapid and intense global fraying of social relations discussed in the beginning of this paper, more and more people are recognizing the need for a third type of education in addition to the two widely recognized ones—material and intellectual.¹⁹ As 'Abdu'l-Bahá clarifies, "material education aims at the growth and development of the body," while human education "must so educate human minds and thoughts that they may become capable of substantive progress; that science and knowledge may expand" (*Some Answered Questions* 3:5; 3:10). Spiritual education, however, enables intelligence and comprehension to "apprehend the metaphysical world"; it so educates the human reality that it may become the manifestation of divine blessings" (*Some Answered Questions* 3:11). 'Abdu'l-Bahá describes these "divine blessings" as

heavenly bounties, heartfelt emotions, the love and knowledge of God, the education of the people,

¹⁹ For more on this subject, see *Century of Light* and *One Common Faith*, two documents commissioned by the Universal House of Justice.

the perceptions of the mind, and the discoveries of science. They consist in justice and equity, truthfulness and benevolence, inner courage and innate humanity, safeguarding the rights of others and preserving the sanctity of covenants and agreements. They consist in rectitude of conduct under all circumstances, love of truth under all conditions, self-abnegation for the good of all people, kindness and compassion for all nations, obedience to the teachings of God, service to the heavenly Kingdom, guidance for all mankind, and education for all races and nations. This is the felicity of the human world! (*Some Answered Questions* 15:7)

Spiritual communities that seek to cultivate these “divine blessings” have always existed. However, in this “age of anxiety” and “empty self” (Jackson qtd. in Hanley 26–27), there is a growing effort to seek solutions to “the failure of religious institutions to assist humanity in dealing with challenges whose essential nature is spiritual and moral” (Universal House of Justice, *One Common Faith* ii). We witness intensifying efforts to free the religious spirit “from the shackles that have so far prevented it from bringing to bear the healing influence of which it is capable” (Universal House of Justice, *One Common Faith* iii). We see growing efforts to build spiritual learning communities, referred to in the Buddhist tradition as “sanghas,” as well

as a growing recognition in the social sciences of the need for the systematic cultivation of the above qualities of spirit.²⁰ As people seek to create spiritual holding environments of a new kind, let us explore the nature and dynamics of an authentically holding spiritual community.

Individuals who struggle with affective disorders often feel they are pushing hard uphill to engage in community life. In confidential therapeutic settings, they may frequently express deep misgivings about their spiritual capabilities. They believe that they either must not know how to pray and meditate or that their prayers are not being answered given that they do not experience significant alleviation of their symptoms. Such thoughts tend to exacerbate the depressed person’s proneness to low self-esteem and discouragement. In that regard, the Universal House of Justice writes to an individual believer: “Your feeling that you are to blame for your depression is itself a challenge that you need to overcome. When we turn to ourselves we can often see nothing but shortcomings and failures which then contribute to dismay and depression” (*Coping with Life’s Trials*).

How can we help our loved ones and community members who struggle with depression to truly discover the regenerative power of prayer, meditation, service to others, and deepening in the Word of God? How can

²⁰ See Snyder and Lopez, *Handbook of Positive Psychology*

we accompany each other and create genuine holding environments that help all of us activate our inner vision without eventually becoming afflicted with what might be termed “compassion fatigue”?

As Jewish philosopher Martin Buber wrote, all life is a meeting. At any moment at which we enter into mind-heart alignment and truly and meaningfully meet another person in what Buber describes as an “I–Thou experience,”²¹ we uplift our own hearts and those of others who are suffering. The veils lift, and the light shines upon us as together we “find shelter in the heart of existence” (Bahá'u'lláh, *Gems* 49). Such meetings of minds and hearts have been referred to as “authentic communication.”²²

AUTHENTIC COMMUNICATION

To grasp more deeply the process of authentic communication as it

21 An “I–Thou” experience refers to an intentional movement beyond simple linear verbal information exchange with the “other” and the recognition of our ultimate meaningful interrelatedness, thus reverently attuning ourselves to seeing and honoring the soul of the person with whom we are communicating. Such an orientation to the interpersonal space suggests consciously drawing on what was discussed earlier in this paper as the energetic and cellular archetypal wisdom of the heart.

22 See the cited work of Emmanuel Levinas, and also of Charles Taylor

takes place in our relationships, let us examine Winnicott’s psychological constructs of “the true self” and “the false self” and how they develop in the matrix of mother–child interactions. A caring mother responds to the physical and emotional needs of her baby with enough attunement that the baby can learn to feel safe, whole, and vibrant in its own body and in the world. The “true self” that develops in such a context is a sense of being alive and real in one’s own body and mind, which allows spontaneous, unforced, and creative feelings, as well as real closeness with others.²³

In contrast, if a baby’s caregiver is unattuned to the infant’s emotional needs and conditions or, worse yet, depressed, abusive, or an alcoholic, the baby tends to focus its energies and actions on finding ways to get a positive response from the distracted and unhappy caregiver by trying to please, constantly seeking to anticipate the demands of the caregiver, and becoming excessively compliant. This defense mechanism of compliance forces the child to put undue attention into controlling or avoiding its own feelings for fear of creating further unhappiness in the caregiver. Eventually, the forming person tends to lose his or her sense of realness and meaning and learns to live in a flat, defensive stance—its “false self.”

In the above sense, there is a true self and a false self in each one of us. The true self expresses our innate

23 See *Winnicott on the Child*

health and creativity; and while it is usually restrained and governed (at least somewhat), it gives a person a sense of being alive, engaged, real, creative, and relational. That true self aspires toward truth, beauty, and goodness, and it searches, in all of its encounters with reality, for that ultimate understanding of truth, beauty, and goodness that constitutes spiritual education. For those who belong to religious or mystical traditions, this search usually entails a quest to find, love, and obey God. The adult developmental dynamic that Wade describes of continuing to seek an increasingly deeper alignment between our sense of our true self and social standards often sets us on a course of seeking to grasp how Manifestations of God in the human realm—such as Zoroaster, Buddha, Jesus, Mohammad, Bahá'u'lláh—may illuminate the nature of the ultimate true self, as well as the path to advancing human civilization toward spiritual justice.

In health, our internal life and our spontaneous feelings are not dominated or blocked by an excessively compliant false self, while a reasonable measure of compliance assists us in adapting to our environments. We strive, moment by moment, to connect with one another through our true selves; we seek to be aware of our various learned masks as they creep into communication, and we gently release these distortions as we continue to open up inner spaciousness and hospitality to encounters between souls. Such authentic encounters sustain

and enrich the life energy of all participants and protect from compassion fatigue.

Recent educational research has described how authentic communication can lead to developmental shifts, described as “head-to-heart shifts” (Cotten). According to Emmanuel Levinas, an authentic encounter with another person overcomes the unethical unconscious tendency to assimilate another person into the “totality” of our own assumptions and beliefs. My research on optimal adult development showed that people who strive to overcome this tendency to assimilate others into their own frame of reference are motivated to seek more authentic relationships with others through their attraction to truth, beauty, and goodness. The deeper that attraction, the more morally coherent a person appears to be and the more optimal the state of his or her personal development and relationships (Mustakova-Possardt, *Critical Consciousness*).²⁴

As we observed in Emerson's case, characteristic of the psychosocial aspects of depression is that the person tends to have significant difficulties accessing and expressing that alive and real part of himself or herself; hence, Emerson's recurring feelings of emptiness and irritability and his tendency

24 For a more extensive discussion of authentic relating, see pgs. 57–59 of Glen Cotten's “The Role of Authentic Communication in Moral Development and Transformative Education: Reflections on a Case Study.”

to be unreflective and over-accommodating in close relationships, resulting in subsequent chronic resentment and relative lack of authentic communication. Exposure to nature, on the other hand, releases Emerson from the internalized pressure to over-accommodate and allows him to access the spontaneous aliveness and joy of his real self. For this reason, a growing number of treatment modalities rely on emphasizing healing and experiential aliveness through mind/body practices and a closer contact with nature.

In view of the above discussion of authentic communication, it clearly takes courage from the members of a spiritual community to choose to relate fully, with awareness of learned masks, and a willingness to keep releasing them. In community life, we encounter many variations of the barriers and masks. Accepting these as opportunities to learn how not to react to other people's masks by resorting to our own is a wonderful spiritual gift for all of us. As we persevere in returning to authentic communication with courage and a commitment to empathy and imagination one mindful moment at a time, we gradually grow to experience our communities as spiritual holding environments for all of us. Such courage translates into creating healthier communities and ultimately more social health.

HUMAN HEALTH AS A
RELATIONAL PHENOMENON:
A SOCIAL HEALTH APPROACH

The above discussion of affective disorders in relation to spiritual communities illustrates that we are relational beings and that much of our suffering, as well as much of our healing, happens in the context of relationships—relationships with ourselves, with loved ones and community, with nature, with society, and with God. The awareness of this aspect of our ontology can assist in liberating us from the purely individualistic understanding of emotional health and empower us to begin to think of it more in terms of degrees of social health.

Social health can be understood as a deeper reality of coherent and shared moral meaning and ethical and moral purpose, both of which allow a collective to intentionally uplift, unify, and support healthy interdependent living (Mustakova-Possardt, "Understanding Human Health as Social Health"). Authentic communication across constructions of meaning and life purpose creates moral coherence and social health in a human collective.

A convergence of research across a wide range of fields increasingly recognizes coherence as a central concept in health—both individual and collective.²⁵ The coherence of our beliefs, attitudes, and states of mind and heart

²⁵ See Childre and Martin, McTaggart, Mustakova-Possardt and Woodall, *One Common Faith*, Poppo and Chang.

in a particular sociohistorical context is a dynamic condition, which reflects degrees of our use of free will toward awareness and authenticity from moment to moment. Hence, our moral coherence as a community is a synergistic collective product of the condition of each individual.

In a pervasive global context of crude materialism, it is not easy to find organizations, communities, and entities that aspire toward moral coherence and social health, even as global trends toward collective spiritual awakening are beginning to change organizational life (Bourne). Even spiritually minded organizations and communities can be afflicted by an inflated “sense of their own specialness” (Roche qtd. in Masumian 37) and therefore by degrees of incoherence between their claims and aspirations and the actual experience of community life and relationships. Such incoherence is often reflected in unspoken judgments about people with special challenges, as well as rigidity in applying religious and spiritual guidance. The result is the development of superficial interpersonal and community relationships. In this way, people who struggle with particular emotional or mental health vulnerabilities in our midst may serve as the canary in the mine, alerting us to the need to become more attuned to one another, more authentic in our relating, and more morally coherent.

If we return to the example of Emerson, spiritual discernment—the result of activating the inner vision

of the soul—would allow the members of a spiritual community to see Emerson’s quiet suffering, as well as the suffering of his family, and to understand its reality without feeling the need to judge. Such understanding would allow Emerson’s fellow Bahá’ís and their administrative bodies to communicate authentically while upholding standards of Bahá’í conduct and due process and would protect suffering families from a formalistic and avoidant approach.

Every group, community, and social setting faces the challenge of finding coherence—psychological, moral, spiritual, and social—amidst the reality of human interdependence.²⁶ The more we engage together to create coherence, relying on an epistemology of deep listening and authentic communication across our diversity, the more human suffering is likely to be greatly reduced. This is perhaps why in the opening Hidden Word, Bahá’u’lláh addresses us by saying: “O son of spirit! My first counsel is this: Possess a pure, kindly and radiant heart, that thine may be a sovereignty ancient, imperishable and everlasting” (Arabic no. 1). The choice to seek coherence is an act of free will.

26 For some cultural analyses of the struggle to find coherence in the Western context, see Robert N. Bellah et al.’s *Habits of the Heart* and Charles Taylor’s *The Ethics of Authenticity*. For global analyses of the struggle toward coherence, see *Century of Light* and *One Common Faith*.

FREE WILL AND THE STRUGGLE TO
EMERGE VICTORIOUS

The exercise of free will is a power of the soul that we must aspire to develop deliberately. For example, choosing to learn skills of mindful self-regulation, emotional intelligence, spiritual self-reflection, and body awareness can give people who are depression-prone the leverage to discern early the onset of habitual and destructive patterns of thought and to intensify resilient practices of redirecting their minds and activating their spiritual energies through meditation, prayer, and contemplation.²⁷ Choosing to integrate into one's life age-old healing practices—such as qi gong, yoga, tai chi, acupuncture—which rely on stimulating the energetic coherence of living systems, is yet another powerful way to exercise free will in the direction of greater health.²⁸

The same applies to those of us who live, work, or serve with people struggling with affective disorders. For all of us, regular exercises of individual and communal prayer and meditation, in communities that have established a pattern of devotional life, may serve to “soften the hardened clay” out of which well-entrenched undermining patterns of thought are molded and

27 See Feinstein, Eden, and Craig; Masumian.

28 For more details, refer to see Fritz-Albert Popp and Jiin-Ju Chang's “Mechanism of Interaction between Electromagnetic Fields and Living Systems.”

to cultivate spiritual habits of heart. Bahá'u'lláh addresses us as follows:

Ye are even as the bird which soareth, with the full force of its mighty wings and with complete and joyous confidence, through the immensity of the heavens, until, impelled to satisfy its hunger, it turneth longingly to the water and clay of the earth below it, and, having been entrapped in the mesh of its desire, findeth itself impotent to resume its flight to the realms whence it came. Powerless to shake off the burden weighing on its sullied wings, that bird, hitherto an inmate of the heavens, is now forced to seek a dwelling-place upon the dust . . . hindered from soaring in the heavens of My divine knowledge. (*Gleanings* 153:6)

The daily cultivation and consolidation of skills of mindfulness and spiritual reflection can serve as wind under the wings of the birds of our souls—helping us lift ourselves again and again above the mire of self-limiting beliefs and superficial attitudes. In any human predicament, when the spirit of faith touches the heart, we begin to realize a renewed power of will despite all conditions. We gain renewed strength to “divest ourselves of all that we have taken from each other,” such as our conditioned perceptual filters (Bahá'u'lláh, *Gems* 15).

Thus, our journey toward healing begins. The path of self-knowledge

and recognition of “that which lea-
deth unto loftiness or lowliness”
(Bahá'u'lláh, *Tablets* 34–35) is a long
and arduous road, and none of us are
exempt from experiencing depression
at some point on our journey, even
as we strive to “soar to the realm of
guidance” (Bahá'u'lláh, *Gems* 15).

People with depression have a spe-
cial challenge in terms of the exercise
of their free will, as do their caregiv-
ers, who have to bear the burden of
helping to create an ongoing holding
environment for their depressed loved
ones, often without being held them-
selves by spiritual communities. The
more deeply we accept that we are all
on a continuum in terms of learning
how to live with less unnecessary wor-
ry, anxiety, and judgments, mindfully
aware of each moment's potentiality,
the more deeply we can support each
other's efforts. Such an attitude of hu-
mility and community goes a long way
in overcoming a depressed person's
tendency to feel like a special failure,
as well as our tendency to silently as-
sume that if they had more faith they
would not suffer so much. We pray:

O Thou the Compassionate God.
Bestow upon me a heart which,
like unto a glass, may be illumined
with the light of Thy love, and
confer upon me thoughts which
may change this world into a rose
garden through the outpourings
of heavenly grace. Thou art the
Compassionate, the Merciful! Thou
art the Great beneficent God!
(‘Abdu’l-Bahá qtd. in *Bahá'í Prayers*
72).

CONCLUSION: CULTIVATING HAPPINESS

In order to create healing spiritual
communities, we have to tap purpose-
fully into the spiritual powers of the
human mind as an emanation of the
soul. Prayer and meditation release
into our bodies and brains dopamine
and serotonin—neurotransmitters
that create “a sense of joy, calm and
safety” and relieve “symptoms of ten-
sion, sadness and anxiety” (Newberg
and Waldman qtd. in Masumian 24).
Such an intentional and steady orien-
tation allows us to cultivate happiness
without denying or suppressing the
unavoidable human experiences of
grief, loss, and suffering that are such
an integral part of living. When we
cultivate spiritual discernment, we can
develop a healthy relationship to inner
darkness and pain, letting them pass
through and be fully felt, while mind-
fully resisting the temptation to turn
them into narratives of learned help-
lessness. As we practice remaining
open to life from moment to moment
(as beautifully described by Michael
A. Singer in *The Untethered Soul*), we
discover that joy is a natural condition,
which bubbles up in every moment
that we are not too layered with false
beliefs.

Thus, we learn to channel spirit
into our lives by communing authenti-
cally with every aspect of life and with
others. John E. Esslemont writes:

each individual has his share in
determining the state of that so-
cial “atmosphere.” It may not be

possible for everyone, in the present state of the world, to attain to perfect health, but it is possible for everyone to become a “willing channel” for the health-giving power of the Holy Spirit and thus to exert a healing, helpful influence both on his own body and on all with whom he comes in contact. (113)

We do not have to feel healthy or even good in order to become willing channels “for the health-giving power of the Holy Spirit” (Esslemont 113). At the core of our ability to participate in creating healing spiritual communities is keenness of vision—our readiness to discern how our personal filters may tend to distort clear perception. The Bahá'í Writings appeal to humanity in this age to cultivate a new and keener mind through the intentional development of both the powers of the mind and the inner vision of the heart:

We cherish the hope that through the loving-kindness of the All-Wise, the All-Knowing, obscuring dust may be dispelled and the power of perception enhanced, that the people may discover the purpose for which they have been called into being. In this Day whatsoever serveth to reduce blindness and to increase vision is worthy of consideration. This vision acteth as the agent and guide for true knowledge. Indeed in the estimation of men of

wisdom keenness of understanding is due to keenness of vision. (Bahá'u'lláh, *Tablets* 35)

Because the human heart is deeply sensitive to its social environment, our relentless striving to speak to each other from a place of truth and joy constitutes the first and most fundamental step in transforming the world into a safer place for all. That step can only be practiced one moment at a time. Bahá'u'lláh reminds us that

the cause of ascent is lightness, and the cause of lightness is heat . . . He hath therefore kindled with the mystic hand that Fire that dieth not and sent it forth into the world, that this divine Fire might, by the heat of the love of God, guide and attract all mankind to the abode of the incomparable Friend. (*Tabernacle* 71)

Thus, whenever our interactions leave us feeling dense, entangled, weighed down, and cold, we have an opportunity to pause and access again our love of God, from which flows light. In this way, moment by moment, we re-orient ourselves to “the royal Falcon on the arm of the Almighty,” who “unfold[s] the drooping wings of every broken bird and start[s] it on its flight” (Bahá'u'lláh, *Tabernacle* 29).

As we embrace this understanding, all of us can begin to fulfill the three main characteristics of a holding environment for others—the ability to support, to challenge, and to remain in place as a reliable resource over time

(Kegan). In a Bahá'í community context, to challenge and support each other and ourselves may be understood as aspiring to *live* the Bahá'í teachings authentically, avoiding judgments, truly opening our hearts to seeing and meeting each soul where they are, and together opening up meaningful paths of service to society in which every soul can participate and thus lay aside its own burden.

In our ongoing growth as spiritual communities, the most suffering souls serve as wonderful litmus tests for the vibrancy of deeper love in a community. We become co-creators of holding environments that foster the wellbeing of all. In this shared growth process, it helps to remember that “[t]he power of God can entirely transmute our characters and make of us beings entirely unlike our previous selves” (passage from a letter written on behalf of Shoghi Effendi, 22 November 1941, qtd. in *Coping with Life's Trials* 5).

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