Title: Remarkable Lives: Christopher Fox in conversation with Jerome Carson.

Authors: Christopher Fox and Jerome Carson.

Abstract.

Purpose – The purpose of the paper is to provide a profile of Christopher Fox.

Design/methodology/approach – Christopher provides a short biographical account of his life thus far. He is then interviewed by Jerome. He describes how he has coped with serious depression.

Findings – Christopher claims that he owes his own life to two things, Philosophy and his close friend Helena.

Research limitations/implications – The wide diversity of first person accounts shows the necessity of collecting them as they reflect the lived experience of people battling with serious mental health problems. The personal is often lost in the quantitative world of “p values” and statistical tests.

Practical implications – Christopher mentions being helped by numerous informal chats with peers rather than medication and focussed psychological therapies.

Social implications – While Christopher drew much sustenance from the works of Nietzsche, he was most helped by a friend who had been his learning mentor at school. Friendship can be critical in maintaining hope.

Originality/value – Like many before him, Christopher says he “learnt more about myself in the days where I sat in the garden (with peer survivors) than in the collective sessions of therapy, CBT or hospital visits.”

Keywords Recovery Nietzsche Self-harm Philosophy Depression Friendship

Paper type Case study
Introduction

I remember being drawn to Christopher one day when he engaged me in a discussion about Positive Psychology. “Why did everyone have to be so positive? Was it alright to be negative?” He also told me about his interest in Nietzsche. He points out in his interview how he was helped by reading Nietzsche. “I could be what I wanted to be instead of what my illness made me.” The quest to develop a renewed sense of self-identity after the experience of mental illness has been highlighted as one of the four key components of recovery identified by Retta Andresen and her colleagues (Andresen et al, 2003). The others being hope, having a sense of meaning and self-determination. Let Christopher tell the story...

Brief biography of Christopher Fox

Recovery is a word thrown around all too often when in or around mental health, almost as if there is some way of shaking it all off to a state of feeling that nothing had happened. To many people, depression is seen as a self-indulgent, self-inflicted and selfish attitude rather than a legitimate state of mind. But to argue such a point, to me, seems rather absurd. The standard response to hearing someone state they have depression is usually something along the lines of “pull yourself together” or “go out and do something”, and to my surprise I heard it a lot when undergoing therapy and through my visits to the nearby hospital.

My diagnosis of clinical depression came as no surprise to me in 2012. It wasn’t so much that I recognised myself entering a depressed state, but on a much more simple level, I just didn’t care. They could have called me anything and it would have elicited the same emotional response. I had just turned 18 in September, and life just grabbed me with both arms and wouldn’t stop shaking. My mind was a mess with wave after wave of mental tragedies, existential crises, and obtrusive thoughts that just wouldn’t stop. In late January 2013, I was hospitalised after being found by a friend doped up with a variety of the prescription medication I was on, washed down with an unhealthy amount of alcohol, laying in the centre of a busy road. This is what I’m told at least. In February, not long after the incident, I was placed into a supported house project funded by MIND mental health charity, where I stayed for almost 7 months before moving into my own flat to complete my A-Levels. This brings us to today. I am a Psychology undergraduate at the University of Bolton, at least, on the surface.

I wish I could focus more on those years, however, there isn’t much I remember. I mainly wish to talk about what it feels like to be depressed, what it does to your mind, and how it changes your view on life. I will, however, bring in a few experiences that I feel could better illustrate the words I am typing.

If you are religious you may understand this particular thought process a lot easier than others. The first thing that I recognised was the giving of myself over to something else completely. Now, the difference between this and religion is that in religion you hand yourself over to a higher power, somebody who is able to look after and care about you. Depression is the opposite. I handed myself over to my mind, and my mind didn’t like me. It was critical of everything I said, did, saw, heard and thought, and it wasn’t shy about letting me know so either. I had given my body away to an abusive and controlling force, and it knew it.
The thoughts became progressively more negative, violent and disturbing. The impulse for joy and happiness, the very emotions that drive us as humans to achieve, were replaced with a self-bloodlust and hatred for the self. Thoughts clashed when they saw an opportunity. I was fighting with myself constantly, and it was emotionally and physically exhausting, and that is when the self-harm started.

The pain was welcoming in times of great mental turmoil, and even in times of emotionlessness. I cannot think of a time when I didn’t wish to cut. It was the best way of coping in my eyes. A way I could feel something, without having my mind torture itself over the feeling, and my, what a feeling. The easiest way I can describe it is a feeling of complete euphoria, similar to the sigh you release after a long days hard labour, cup of tea in one hand, and pipe in the other. It was just a moment of pure bliss that is not understandable by anyone else but the individual. However, I now realise that this activity merely exaggerated the depression in the long term. The cuts grew deeper, larger, and more visible and are now beyond repair.

On the other hand, the loss of blood and dignity isn’t my largest problem with depression. The memories, friends, and person I am told I once was and could have been are also vacant, lost in a mess of thoughts I dare not go back inside searching for. There are many things that still intrude on the mind, even as I write. The impulse to cut, for example is still a daily thought process, and it would be so easy to go back to it – but I won’t. I have something now that I didn’t have before, and that is a mountain to look back on and see how far I have come. I have a friend, who since my initial diagnosis has sent me motivational images every day despite her own struggles with life, and that is one of the things that awoke me from my slumber.

Whilst I would love to boast the secret to unlocking the chains of depression, and freeing your mind as so many may dare to express themselves confidently and with conviction, I can’t. I simply don’t know it myself. This brings me back to my first point. I don’t believe in a “recovery” from depression. I do, however, believe you learn to live with it. You suffer such a degrading and character tainting experience with depression that I personally feel you learn to adapt. It may differ person to person, but the numerous drugs I have been prescribed, the amount of treatment provided courtesy of the NHS and MIND, the years of attempted therapy and CBT has led me to the conclusion that the problem I had to overcome was not as simple as was first assumed. It may not have even existed. Whatever the case, I owe my life to two things, Philosophy, and my dear friend Helena.

Christopher in conversation with Jerome

Jerome: Would you mind sharing your thoughts on how Philosophy has been such a help to you?

Christopher: On a very fundamental level, human beings are naturally curious creatures; even more so, I would argue, when contemplating the idea of the self. During my darkest hours I often found myself not only falling to depression, but also into an existential crisis (my own existence was one that took a lot of energy and thought to try and sustain), where the only escape was passing out from mental and physical exhaustion. Now, this questioning of nature and reality was not particularly helpful, however it did lead me onto my road to recovery – as close friends of mine would often refer to me as a nihilist (which, at the time, I held no knowledge of the meaning). This is how I found Nietzsche. An odd choice, perhaps, as Nietzsche borrows a lot of ideas from his rather pessimistic philosophical ancestors, but he was a man I could (at least I thought) relate to on an
emotional level. His ideas and his literary prowess allowed me to stop questioning myself in such a harsh manner. I would just bury myself into the text and feel almost warmed by the fact that all my thinking was being done for me (obviously there were things I disagreed with, but at the time of reading none of that mattered; I had found a ‘friend’).

It wasn’t until a couple of years on that I started noticing that my way of thinking had drastically changed. Instead of thoughts revolving around my own self, they were much broader and encompassed a much wider context. It was a rather beautiful revelation to me (I remember coming to the realisation, and crying in the street), because I had only just come to the realisation that I could be who I wanted to instead of what my ‘illness’ made me, and I think I owe a lot of that to Nietzsche (as well as other philosophers as the years went on). He is a rather unique thinker in that he doesn’t tell you what to think. He teaches you how to think for yourself.

Jerome: In your story you talked about how you partly owed your life to Helena. Can you tell us a bit more about the role she played?

Christopher: The first year of Secondary School I was intensely bullied (partly due to my own clownish behaviour and need to be accepted into some form of group or another), and I was set up with one of, what the school had labelled, ‘Learning Mentors’. These were Year 10’s who helped to coach the newer years, and perhaps the students struggling with lessons, through their year. I can’t remember who mine was specifically, but I remember that being my introduction to ‘Helena’. I would hang around with her, and a group of her friends who later became some of my closest, at break and lunch times during school. As we progressed through time, I became otherwise taken over by depression and she had been the first I had told. Unbeknown to me, she herself had been the victim of a similar mind, suffering from quite severe bipolar (including symptoms such as mania and hallucinations). ‘Helena’ from that day, somewhat, refused to let me stay in my depressed state. She was not going to let me remain being self-defeatist, and, to this day, is convinced I will become nothing less than a success at anything I want to do (In other words, she doesn’t really know what I want to do)! She has gone out of her way to answer my calls at ungodly hours, make herself available for me at the shortest of notices, and perhaps more reassuring has remembered for almost four years now to send me a motivational image every day of the year to remind me that someone does care. We’ve had the most serious discussions, intimate discussions, stupid discussions, absurdly circular discussions – and they haven’t really stopped since the girl I remember getting me out of Geography lessons at school. I honestly feel I couldn’t have survived in the place I was without her. I cannot thank her enough for it.

Jerome: What does the concept of hope mean for you?

Christopher: I would hope it would mean quite a lot. It’s quite difficult to explain, but I think when you’ve been in a dark room for so long you start to stop wishing to see light, and start to question whether there actually is such a thing as light. When you are released into light, you are just happy to be there, overwhelmed by the whole experience, so much so that you don’t have any hopes anymore, because you’ve already reached your goal. Now, it would be ridiculous for me to proclaim that I have no hope – but I will say that the experience is fairly new to me (as I was once that man in a dark room). It is a rather strange feeling, though, at points it feels rather childish to think to myself “Oh, I wish one day I could…” or “I hope I can do this…”, when in actuality these things are all possibilities that can be achieved through a certain set of circumstances. I much prefer the term
‘aims’ (perhaps even ‘goals’) to ‘hope’, as aims imply that I am working directly toward the event/feeling/situation rather than just wishing it would occur. However, perhaps I am being too bitter. Hope is a way in which humanity can strive for better, or justify the struggles they are going through – and I suppose the fact that struggle does exist is justification enough for hope to also follow suit, but there is only so far it can go. As previously stated, there comes a point where you stop hoping and start to question its very existence.

Jerome: What changes would you most like to see in mental health services?

Christopher: I think that there is a monumental amount of stress placed on mental health services in this country; monetary and physically. We have an extraordinary amount of people that suffer from mental health issues, and not anywhere near enough specialists to help them. The NHS is slowly being pulled apart, and money being sucked out from some of the most important parts of our once proud and inspiring Welfare State. What is also sad is that at one of the monthly meetings, my GP asked about the state of mental health services in this country and was confronted with the rebuttal “What mental health services?” as if they did not exist in any plausible manner. The main problem is, mental health is such a deep and personal issue that there is no quick, uniform manner of approaching it. There is no such thing as a “pill that heals all”. Our understanding of these issues is also not expanding fast enough to stop the huge tide of mental health issues that are overcoming more and more people with each generation born. Whilst part of me wants to argue for ‘therapists in the first instance, must be a friend; in the second, a therapist’, but I just cannot see a way in which they could be safely, effectively or efficiently employed in the current scheme of things. If I could, however, hope to see a change in the mental health services it would be this. That no one person would ever be put in a position that they do not wish to be placed into, asked to talk when they do not wish to, or asked questions that do not warrant answers. The amount of damage that can be done through words alone, and the context in which they are spoken, has been witnessed and suffered by me from an early age, and I wouldn’t ever wish it upon anyone else.

Jerome: What are your views on the use of medication for mental health problems?

Christopher: I am, amazingly, on the fence about medication. I believe it has its place, but I don’t believe that place is in every home. Medication didn’t work for me, personally, but I know a lot of people who swear by it – and I can see visible positive effects of it on their behaviour and attitude towards life in general, and it is truly astonishing the extent to which one drug can change a person’s attitude. This is, however, the area I know least about in mental health, and am only basing this on hunch rather than scientific findings – but I’ve always believed that my depression was not based on a chemical problem, but one of mind-set and experience. This was reaffirmed (but in no way proven) by my, somewhat, overpowering and controlling of depression. I had managed to alter my mind-set.

To move back to the point at hand, I have nothing against medication for mental health problems, so long as the medications are safe, and not over prescribed – because I can tell you from first-hand experience, that needing a 7x5 set of tablets for the week is not exactly the most inspiring prospect for a man who has just tried to take his own life.
Jerome: How do you think services can best help promote recovery, which is the goal of many services, when you say you do not believe in recovery from depression? Is there a better term than recovery?

Christopher: As I stated in my initial statement, I think that recovery is the wrong term due to its connotations, it’s rather misleading (at least in my view). I have nothing wrong with the concept of recovery, of course, and envy those who can say they have indeed fully recovered, however I remain sceptical of the severity of the issue in the first instance, as I cannot comprehend a complete return to form after such a devastating experience as depression. Maybe that is just a personal issue, and perhaps I’m just being pedantic.

I don’t conclude, however, that the use of the term “recovery” in mental health is in any way bad. The use of the word can inspire hope in an individual. I just feel as though it shouldn’t be the ultimate goal of mental health services. In an ideal world, a full recovery would be perfect, but in our real world seems to me rather unrealistic. I believe the focus should not be placed on returning the individual to a socially acceptable state, at least initially, but rather helping the individual become comfortable with themselves, ergo inspiring confidence and a myriad of other traits that can be evoked in order to enable the individual to use their mental health issue in a positive and constructive light. I, for example, take solace in critique and scepticism, whereas I know a few who have adopted their “issue” into a comedy piece, helping to inspire others as well as bring about joy.

As for coining a better term than “recovery” goes, I find myself in a rather difficult position. There are few words with similar meaning and similar positive connotations attached. As stated, it is a word that can evoke hope in individuals (specifically with physical issues), so as such, perhaps the word itself isn’t the issue. The real problem I have is the focus and emphasis that is placed upon it under the flag of “recovery”. How do I personally get rid of the external and internal scars that depression has so cruelly provided? Furthermore, why should I? This ‘illness’ was a major part of my life, and changed me beyond belief, for both positive and negative, and whilst I would not wish it upon anyone, I would also not wish to go back and stop it. I wouldn’t be where I am, as strong as I am now, as determined as I am now without it. I didn’t need to recover, I needed to use the experiences to my advantage and push.

Jerome: In terms of people with lived experience, have any individuals impressed you?

Christopher: Oh, absolutely. In my time at the recovery house, it was rare that I wasn’t impressed with somebody else’s life and choices. It was one of the most eye opening experiences of my life. A house full of individual who suffered a variety of mental health issues sounds as fun as it was. From the first day we all banded together, and became friends quite quickly; to the point where we all stopped seeing the therapists, or joining in the CBT sessions in favour of a cup of tea, a cigarette and a few chairs in the garden exchanging laughs, jokes, coping mechanisms, stories of our grand pasts and occasionally we played card games to keep the conversation more lively. I can honestly say that I learnt more about myself in the days where I sat in the garden than in the collective sessions of therapy, CBT or hospital visits put together. We helped each other out when we were down, not just one or two of us, everyone was working together to provide the best social support we could. There wasn’t one person you couldn’t rely on in this mad, but as real as any, friendship. They are all impressive in my eyes, and all of them are still going stronger than ever (I know, as I’m still in contact with all of them).
Looking even closer to home, there is Helena, of course, but I feel I have already exhausted that dialogue. However, I cannot stress enough how much I owe to her.

Jerome: What challenges lie ahead for you? What do you most want to achieve in the future?

Christopher: I’ll start with the second question and flow into the challenges I may face, as I feel it would read a lot smoother. I have two major goals for my life. My first is far worldlier than the second. I want to become a Primary school teacher, a rather odd choice perhaps for someone with such a dark past, but hear me out. I have a great deal of admiration for creativity and imagination, and feel that Primary school children are the perfect embodiment of that, before it is ordered out of them at Secondary level education. Furthermore, I hold no shame in admitting, that I find children far easier to work with than adults. For a start, there are no politics involved. Adult human beings can be cruel and vindictive, manipulative and spiteful, whereas a child only goes so far before you can see that they are actually unable to go any further. My second goal in life, the slightly more unrealistic one, is to be comfortable. Notice the lack of the word happy, just the presence of the word comfort. I don’t want an extraordinary life, just a life I can call my own, no mass of wealth, or excess of lust or any kind of vice – I just want to be comfortable with me, my surroundings, my situation. Yes, it sounds rather plain and boring, but I’ve had enough “excitement” in this chapter to last the book and I’d just like to slowly recline into my chair and breathe a sigh of relief.

As far as challenges ahead of me, I don’t really enjoy speculating and often take each day as it comes, but I do have back up plans in case of specific situations. If I were to speculate on specific challenges, I feel that I may slip into a state of paranoia, as I often do in my dreams as of late. All I am going to say is I don’t expect a steady incline. Life is a filled with ups and downs, I just don’t focus on the downs until they reach me, and then I can deal with them.

Jerome: What would you most like to be remembered for?

Christopher: Now I am forced into a state of egocentrism. I honestly can’t think of anything. You have me speechless for a moment, and it’s not because I am a pessimist (although I am) but rather because it is a difficult question. In the first instance, why should I be remembered? I haven’t yet contributed anything to society, or achieved any great feat like so many men and women have done before me. Whilst I would like my name to travel to the furthest regions of the earth, it would only be to inflict senseless mental anguish upon those who doubted me and those who hurt me (not a threat!). It’s rather sad, I know, but please remember, there is more to my life than I have displayed here, and there is far worse experiences kept in the pits of my mind that not even I dare reach into.

I suppose it may be best for me not to be remembered other than through the legacy I should one day leave my children. I should like a family one day, so perhaps to be remembered as a loving father, and a fun loving grandfather would be more than enough to satisfy my ego.

Conclusion

Peter Chadwick has talked about the importance of ordinary social discourse in helping the recovery process (Chadwick, 2012). Christopher certainly feels that the hours of conversation with fellow travellers was instrumental in his own recovery journey. He was also fortunate to have a “learning mentor” at school, who has supported him for several years and he tells us, “sent him motivational
images every day.” A previous client of mine once stated that “friends were God’s excuse for family.” This friend, Helena, helped Christopher more than any mental health professional. It reminds us of the importance of social support systems in helping people deal with life’s travails. A person supported copes. A person without support struggles. We are all searching for some meaning in this life. Christopher has found that Philosophy has been a great help to him in finding meaning in his own life.

References


About the authors

Christopher Fox is in the second year of his Psychology degree at the University of Bolton, Bolton, UK.

Jerome Carson is Professor of Psychology in the School of Education and Psychology at the University of Bolton, Bolton, UK. Jerome is the corresponding author and can be contacted at: J.Carson@bolton.ac.uk