

Extract from *The Happiness Quest* by Lana Penrose

DIAGNOSIS MURDER

I was soon sat before a GP who abruptly stopped chuckling post small-talk to politely listen to my rant which described my most curious emotional state.

‘Sometimes I bawl for days on end and rock back and forth with my head in my hands. I can’t seem to control it. I’m so unbelievably sad!’

While I was acutely aware of how mad I sounded as each word flew from my lips, he inserted just the right amount of cheeriness as I watched him make a concerted effort to maintain eye contact despite the protests of his pupils, his brain and optic nerves seemingly at war. (I’ve seen this a thousand times since. Tell someone you suffer depression and watch their eyes dart and their smile stretch across their face as though pulled by two fish-hooks. Most take on the look of a serial killer, where the allegedly ‘sane’ take on the look of the deranged.)

He asked me to fill out a questionnaire and for the first time, it was official: I was diagnosed as suffering from Major Depression.

Upon receiving the news, my condition suddenly felt hot, sharp, frightening and much more real than ever before. Major. Depression. Couldn’t they have come up with a less severe title, like Surmountable Inconvenience? I wasn’t even sure I agreed with the prognosis. While my depression was certainly something – the word ‘shit’ springs to mind – it wasn’t 100% debilitating, nor spanning months where I was unable to carry on with my life. That was my understanding of Major Depression. Sure I had a ‘touch’ of its symptoms, dwelled upon death and was in a constant low mood, but outside my more severe bouts, I could certainly survive.

But now that I’d contended with my baffling headspace for years to various degrees, I finally began looking into formal therapy. Little did I know that on average, a depressed person seeks treatment a whole nine years after their first depressive episode. I was into year six, so obviously an early bloomer. Phase One of my Grand Plan had therefore begun...

C IS FOR ... COGNITIVE BEHAVIOURAL THERAPY

From the short-lived therapy I’d experienced in the past with a counsellor in Greece and a Jungian therapist in London who fancied my boots, I knew that someone in whom I trusted was crucial to my healing process and ensuring my comfort levels, which is why I asked to be referred to a pro at the top of his field. After an excruciating two-month wait – interspersed with my usual episodes – I eventually squeezed myself into the inconspicuous offices of a cognitive behaviour giant...

The unassuming therapist to whom I’d been referred was arguably one of the best and highly regarded practitioners in the country. He’d been dealing with people suffering from severe depression and various mental disorders for decades and was former Clinical Director of an anxiety disorders unit at a major Sydney hospital. However, my acute observations didn’t go much past the fact that he appeared to be a cute little man seated behind a school desk. I liked him immediately. Once I explained my predicament and the miraculous workings of my mind, he began untangling my processes.

‘Lana, it sounds to me that when something moderately “bad” happens, you have a tendency to contort things so that you can dwell upon the past.’

He regarded me sweetly and I knew that he was right, for linking anything to painful memories was a specialty of mine, if not my greatest talent. Take the humble cucumber, for example. It was only the previous day that a hapless soul had erroneously added the detestable ingredient to my sandwich. It led to the instant recall of how much I despised the dreaded vegetable, what with its evil smell, taste and texture. I remembered that cu-

cumbers were wildly celebrated in Greece, in the culinary sense, perhaps even sexually. I’d once lived in Greece and it was there that I’d lost the plot, my husband and accidentally dated a heroin addict and now, here I was, sad, single and screwed up in Sydney. See? Too easy. If I tried hard enough, I could link bad memories to anything, including paperclips and head lice.

Anyway, the good doctor calmly explained that I was responding inappropriately to neutral present-day situations. These he called ‘Negative Automatic Thoughts’, or NATs. They came in all shapes and sizes and jumped from behind walls, going BAH! to the detriment of my underwear. They were annoying and disruptive and I should have hated their guts. Instead, I accepted whatever they had to say, wide-eyed and with a slow nod.

So there we all were: NATs, the doctor and me. The doctor was suggesting that it was time to really start challenging such thoughts. He said that I should consider kicking around with Evidence-Based Thought, an ambassador for truth. If a NAT darted out in front of me, a strapping Evidence-Based Thought should be placed between us like a big brother who’d just ridden over the hill on a bicycle. So from what I could gather, it was meant to work like this: I’m handed a cucumber sandwich. A NAT abseils from the ceiling, laughs its shrill laugh and connects the incident to a bad memory. It pokes me in the eye before giving me a wedgy. Instead of buying into its assaults, I was supposed to call for backup. Evidence-Based Thought would gallop into the picture, put the scenario into perspective and save the day by challenging that which was debatable. Foiled, the NAT would pop like a bubble, leaving behind a vague whiff of poo.

Although I’d dumbed it down to an alarming degree, I felt fairly confident that I had grasped what the lovely man had suggested. It was a case of stopping negative thoughts dead in their tracks before entering a maudlin tangent and accessing my infinite cache of misery. After all, at the end of the day, a cucumber couldn’t exactly lodge itself in my retina.

Therapy therefore rolled on with my therapist repeating this same concept to me over and over as I marvelled over my inability to implement it. Bloody hell. It was such a simple thing!...

The good doctor continued ramming it home. He categorically stated that I should never indulge the bad feelings. I shouldn’t attribute reasons for their existence. I should Just Get On With It and stay in the moment. I got what he was saying, but it was still a case of . . .

‘Easier said than done. I was listening to a ballad last night and the song really spoke to me. It was about heartache and summarised the story of my life. Seriously, I could have written the lyrics myself!’

My mind flashed back to the night before. I’d been earnestly indulging in that track, all but perched on a windowsill hugging my knees to my chest as raindrops pelted against the window outside. I’d listened to every single word and cried from the pit of the stomach.

‘Stop!’ beseeched my shrink. ‘That’s exactly what I’m talking about! That’s exactly where your mind needs to be retrained. The moment you start attaching Negative Automatic Thoughts to something neutral, you need to restrain your mind.’

‘Are you suggesting I stop listening to classic rock?’

‘No, not at all! Listen to music, watch movies and read books. Enjoy them wholeheartedly, but don’t apply their content to yourself, your life, your circumstances. Don’t elaborate on them. Just let them be.’

I put a hand to my heart and bowed my head. I would solemnly do my best.

