

coping  
with  
fears  
and  
depression

AN ARTICLE REPRINT SERIES

# COPING WITH PHOBIAS

*There are over 200 listed phobias ranging from acerbophobia (fear of sourness) to xenophobia (fear of strangers). While some may view these fears as a laughing matter, phobia sufferers know just how seriously they can disrupt one's life. But there are ways of coping.*

For a five-year-old child, fear of the dark may be considered quite normal and a phase that will soon be outgrown.

But supposing such fears continue into adulthood or, even worse, someone comes to dread mere everyday occurrences such as a bus ride, a walk down the street, or a visit to a local cinema? Those who have never suffered in this way find such fears very hard to understand, but for the phobia victim the effects are quite devastating—and there are an amazing number of sufferers from this kind of phobia alone.

**What is a Phobia?** A phobia is a fear which is both irrational and exaggerated, a dread that causes flight from an imagined position of danger to a haven for safety.

Tragically, even the realization that the fear is unfounded does little to help the situation, but rather makes the unfortunate individual more frustrated, adding to his already considerable misery. And attempts by friends and relatives to shame sufferers into "getting hold of themselves" do more harm than good. Unsympathetic comments only lend weight to the sufferer's belief that he or she must be "going mad."

But phobia sufferers can be cured and, given proper help and encouragement, they can help one another to overcome the emotional imbalances that trigger their phobias. In fact, in 1970 a Society was formed in Britain by an agoraphobic housewife specifically to help phobics.

Agoraphobia, which affects four times as many women as men, usually occurs between the ages of 15 and 35.

Defined as fear of open spaces, agoraphobia can also be a fear of independence or of loss of security. The cause is very often found to be rooted in an event dating back to early

childhood, or a traumatic episode which may have occurred while emotional resources were low. The average phobic person usually had a mother who kept him or her too close.

School, youth clubs, children's parties and the like always provoked fear or discomfort. Although seemingly at the opposite extreme, claustrophobia (a fear of confined spaces) produces many of the same problems for its sufferers.

The pain or discomfort that the phobia sufferer experiences is real enough. The backache or headache that prevents the unhappy person from taking a journey or inviting friends into the home is very often the effect of a physical illness. As the mind becomes fearful of a situation the body enters a state of heightened activity, resulting in a faster heartbeat, raised blood pressure, accelerated breathing and tightening of the muscles. Just as it is in a case of genuine danger, the body is now prepared for immediate action. But since an emergency does not actually arise, the person becomes more aware of the pounding heart, heavy breathing and tenseness and this in turn can accentuate the discomfort and misery, even leading to further frightening sensations.

**Disruptions of Daily Routine.** Successful individuals, happily married with good career prospects, often find themselves trembling like leaves in the summer breeze when confronted by situations they have previously experienced perhaps dozens of times without question. Take Stephen, for example: a successful up-and-coming executive who had travelled the rush-hour route for seven years. Everything seemed to be "going" for him. Then one day, as he sat among the companions on the 5:45 from town, a tightening in his throat and chest began to worry him.

Several days later the same tightness occurred again and from then on it became a feature of his journey. Stephen thought he must be ill, but a medical examination revealed a physically fit man. But Stephen knew he felt unwell and worried that the tightness in his chest might cause him to be ill on the crowded train. His aversion to the train spread to buses and eventually to cars. Unable to face the journey to work, Stephen left his promising career and sank into misery at home.

Too often such circumstances cause considerable friction in the family. A wife, unaware of the true situation, accuses her husband of letting down in his responsibility to be the provider.

Stephen was more fortunate. His wife did recognize the problem and encouraged him to take short trips which proved "easier"—to immediate relatives or to the less frequented parks. Meanwhile she found a job in order to help with the family needs. By gradually easing back into a "normal" life, supported by a devoted wife, Stephen was able to overcome his fear, and in fact within several months resumed his daily commuting to the city.

Obviously, the degree to which a sufferer is affected varies from individual to individual. Some agoraphobes who dare not venture outside their front door may find their "nerves" so affected that they cannot stay alone in the house either. In extreme cases a wife who is terrified of being alone at home may resort to any ploy in order to get her husband to stay with her. Further difficulties may arise when children need to be taken to or collected from school and mother is in the grip of fright at the prospect of such journeys.

Thoughts can race through the phobia sufferer's turbulent mind: "What if I faint in the street?" or,

"Supposing I am taken ill?" Indeed for many of those who fear they will be sick while out, the "cure" they find acceptable is to make sure they vomit before leaving home.

**A Way of Escape.** A continuing fear of an agoraphobic sufferer is that he cannot escape a given situation. For example, assuming the effort has been made to board the vehicle, a conductor's call to "move right down the bus" can be a sign for panic as the victim gets further from the only exit.

Similarly, if enough courage is plucked up to visit the theatre, the agoraphobic may become terror-stricken if the way out of the building is not close at hand.

Of course, until the root cause of the problem is discovered and worked on, the poor sufferer is as bewildered as everyone else over the sudden welling up of fear which invariably leads to bouts of deep depression and feelings of utter defeat. Because of the illogicality of the whole situation the victim is often brought to tears in the knowledge that his or her family is being affected without any real understanding on their part of what is going on.

The fear of being unable to escape is also a feature of claustrophobia. As with the agoraphobic sufferer, a seat in the middle of a theatre row is like a prison. Sweaty palms, tight muscles, difficult breathing, and an embarrassing tremble are familiar sensations to these individuals. Visits to the local football stadium are also out for the claustrophobe, and stairs are always preferable to the close confines of elevators. This need to escape also impairs decision-making, and the very lack of decisive action accentuates the problem. A fear of being trapped even by his own decisions—of being committed to a position from which escape is difficult—prevents the sufferer from taking the very initiative which would extricate him from the situation which is giving rise to his problem.

**Rehabilitating Phobia Sufferers.** Sadly, phobia sufferers become very inward-looking and self-centred. Mrs. Katharine Fisher, president of The Phobics Society in Britain, explains: "Although each cause of a phobia is unique, with many different root causes, the one common

thing I've found is that sufferers become selfish." The phobia so overshadows all else that the person devotes every waking moment to the avoidance of the object of his fear. The result is total introversion.

Mrs. Fisher, a former agoraphobic housewife, founded The Phobics Society in 1970 with the aim of promoting the relief and rehabilitation of sufferers of phobic illnesses. Now, with over two thousand members and branches throughout Britain, the organization gives advice and encouragement to phobics who had previously perhaps considered themselves "freaks."

Hand-in-hand with the lack of outgoing concern which the phobic sufferer develops, is intolerance of the difficulties of others. Agoraphobes tend to view the problems and phobias that other people suffer, as less debilitating than their own. Chronic agoraphobes are inclined to regard those who suffer a milder form of agoraphobia as having no problem at all.

**Cure Is Possible.** Many parents are naturally concerned that their children will inherit their phobias. Fortunately there is little evidence to show that phobias are passed on by heredity. But a child is influenced by his environment and may well sense his parent's fear. In fact, as mentioned before, the typical phobic person comes from a fearful mother overly protective of her children. Obviously a child is going to suffer if the home situation is strained, and this should give added incentive to the sufferer to conquer the problem.

Taking steps to avoid the need to travel by public transport may mitigate the discomfort, but ultimately will not solve the problem. Nor will telephoning for a shop to deliver groceries be beneficial in the long run. The phobic himself has to face up to his fear.

There are now various methods of treatment available. Each case must be considered separately, but sympathetic desensitization has proven to be effective in some instances. This works not only for agoraphobics but for those who have a fear of spiders, animals, or any other "visible" problem. In this method of treatment, the patient is slowly introduced into the situation that causes the panic to develop.

Initially, less frightening situations are tackled, but then the intensity is stepped up. In time the patient builds confidence and successfully overcomes his disability.

This might mean, for instance, that the agoraphobic sufferer will first undertake a walk from the front door to the garden gate. Having achieved success in this, a journey to a neighbour's house could then be attempted. This can be followed by trips to the corner, the next street, and then further afield. Eventually the goal of the sufferer is attained.

Such desensitization can also take place in laboratory situations where pictures of the object of fear are shown. For example, someone who fears insects, is shown, over a period of time, increasingly larger pictures of the offending creatures. When the patient can cope with the anxiety caused by the photographs, then the real life situation can be confronted. The process is long and cannot be hurried. Therapists involved in this desensitization treatment believe about eight percent of patients can be helped by it.

**"Self-Help" Desensitization.** Since the fear of the agoraphobe is to be in a public place, even the visit to a therapist's treatment room can present a problem. But, fortunately, patients can practice "self-help" desensitization in the "safety" of their own homes. Following advice from respected authorities, sufferers visualize their panic situation. By learning to relax and allowing rational, positive thoughts to overcome the emotional upheaval of the phobia, these patients can progress to the point where facing the "live" situation becomes possible.

Therapists have observed that when the patient's family can also be involved in his treatment a relapse is less likely. A husband, for example, can help his wife to overcome a fear of shopping in a crowded store—not by badgering her, or becoming impatient with her "problem," but by encouraging her and finding ways to enable her to gradually take on her full role in the family. Even the unmarried can gain help by meeting with, and receiving encouragement from, other members of the phobic "family."

As with many psychological and emotional illnesses, relaxation plays

a key part in the treatment and is something all patients can learn to do on their own. To an overactive mind relaxation can be hard work, but in the end, if a phobic sufferer is to be cured—and it *is* possible—the individual must make a determined effort himself. The going will probably be tough, but then the intensity of the phobia could have built up over many years and cannot be erased overnight. But perseverance will bring its rewards.

**Beware of Overconfidence.** Katharine Fisher is now able to lecture before groups of people, but a few years ago she was unable to even set foot outside her own home. However, she warns against overconfidence.

“Very often you’ll have three good days, but for some reason the next day will be a problem. The secret is to remember that most of your fellow-sufferers have experienced the same. Realizing that this is quite normal can boost confidence. And three steps forward to one step back still means progress.”

Mrs. Fisher spoke recently about others who had overcome their problems and were now regaining their joy for living. One woman, for example, had just travelled on a bus for the first time in four years. At her destination she had found the most crowded store and remained there for an hour, followed by further time in another shop. Another person is now

able to attend evening classes and do volunteer work.

Another woman who was a “prisoner” in her own home for eight years is now enjoying a normal family life. Previously her husband had to stay at home to look after the family. He even had to buy his wife’s clothes for her. But now she can handle these situations herself.

A will to succeed, determination, and an understanding family are all ingredients for breaking through the barrier and enjoying a life free from irrational fear. There can indeed be hope, and sufferers can take heart that many former phobics have won the battle and are now enjoying their human potential more fully. □

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## Depression

# OVERCOMING THE GRAY MENACE

*Fifteen percent of all Americans aged 18 to 74 suffer symptoms of serious depression. Depression has been called the “common cold” of mental illness, and some have even gone so far as to label it the “social disease of the seventies.” Here’s how you can take steps to avoid experiencing this debilitating condition.*

These days a lot of us walk around in a gray haze. We’re restless, bored, half-there—nothing turns us on. We’re bone tired most of the day, but wake up at three in the morning and can’t go back to sleep. Or we go to bed early, get up late, and take a nap in the afternoon. Some of us have crying spells for no particular reason except we feel like it. Others of us lose interest in food, or find comfort in overeating, overdrinking, or popping whatever kind of pill alleviates the angst.

These out-of-the-ordinary behavior patterns are often signs of depression—a malady so often unrecognized and yet so common that it probably affects all of us at one time or another.

**Women the Victims.** If you’re a woman, you’re twice as likely to find yourself depressed as your male counterpart. Experts have a good idea why this is so, and the reasons aren’t what you might expect.

For instance, some have speculated that a woman’s hormonal balance may predispose her toward gloomy feelings at certain times in her life. But studies linking depression with female hormonal activity have so far proven inconclusive.

Dr. Gerald Klerman, one of the world’s leading experts on the causes and cures of depression, believes that “the basic problems of many women are essentially the same as those that lead to

depression in both men and women of all ages. Depression takes hold when wishes and reality don’t meet expectations” (Angela Stephens, “Women and Depression.” *Coronet*, September 1972). Victims feel hopeless and helpless; life has lost its sparkle.

Most sociologists concur that the “second-class” social standing of many women has depressing psychological consequences. Klerman and Dr. Myrna Weissman of Yale explain that such social inequities “lead to legal and economic helplessness, dependency on others, chronically low esteem, low aspirations and ultimately clinical depression.” Such disadvantaged social standing is also a factor in the depression expe-

rienced by certain minorities who find themselves in the same situation.

A well-known American nightclub comedian has built his entire routine around the line, "I just don't get no respect." If a lot of women were to verbalize their innermost feelings, they might echo that saying. For while many realize that motherhood and child rearing is the most important vocation in the world, others seem to tacitly relegate that occupation to the bottom of the heap. In our society the absence of financial remuneration—in the form of a paycheck—is often associated with the relative unimportance of the activity. Unsalariated housewives often "don't get no respect" in spite of the nobility of their occupation.

**A Loss of Self-Respect.** Many women feel that they are "out of a job"—useless to society because they no longer perform a truly respected function. As Dr. Willard Gaylin writes, such a loss of self-respect is extremely depressing: "Since self-love and self-respect are such essential ingredients of human functioning, their absence threatens our survival. When individuals feel unloved, unwanted, and unworthy they may slip into depression, that most dangerous of psychological states" ("Caring Makes the Difference," *Psychology Today*, August 1976).

Gaylin goes on to say that "depression can be precipitated by the loss or removal of *anything* that we overvalue in terms of our own security. To the degree that our sense of worth or security is dependent on love, money, social position, power or drugs—to that extent we will be threatened by its loss. When our reliance is so preponderant, the absence becomes so threatening that we despair of our survival. That is the despair we call depression."

Woman's formerly vital-to-survival role as homemaker has diminished in status in recent decades, and the diminution of a respected female role or social position has brought on a widespread tendency toward despair for many. In a rapidly changing society such as ours, many women are caught in a terrible bind, and even those who aren't obviously affected may feel a certain uneasiness as to where they stand.

Dr. Phyllis Chesler, author of *Women and Madness*, says she believes "women [receive disapproval] whether they fully accept . . . or violently reject . . . their traditional place in society."



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She describes their role as being "self-sacrificing, altruistic—but with an altruism borne of low self-esteem—eternally guilty. . . . Women are 'crazy' whether they act out their devalued female role or reject their sex roles. If a woman fully acts out the housewife role, she is considered 'silly' and often slumps into a deep depression and many attempt suicide." But Dr. Chesler also notes that women who drastically reject that basic role are considered aggressive, threatening and less than feminine.

**Respecting Human Dignity.** Willard Gaylin describes the female plight: "A society that treats any serious segment of its population, whether blacks, women, or youth, with distaste or disrespect, runs the risk of convincing that group of its own inadequacy. . . . When we feel 'not acceptable' into the symbolic family of a majority society, when we are made to feel like some alien 'other,' we tend to see those privileged and secure representatives of that society, if not the society itself, as alien and hostile. This deprivation may be tolerable if there is some pathway to privilege and approval, regardless of how tortuous and difficult. When the path is barred, however, or so obscured that it seems not present, despair can ensue. . . . It can lead to the destruction of self via drugs or the destruction of others through the rage of impotence and frustration" (*op. cit.*).

Dr. Jessie Bernard, American sociologist, a leading expert in the field of family relations, and author of the book *The Future of Marriage*, adds her observation: "The characteristic illness of married women today is depression. It has become almost their natural state."

But as we have read, it's not just "being a housewife" that brings about depression in women. It's doing a job that "don't get no respect."

A lot of mothers desperately need encouragement—need to know that even though they're doing a job that our society frequently fails to appreciate, they are performing a function necessary to the stability and even the survival of that society.

**Assert Yourself.** But how can a woman (or anybody who is depressed) banish the feeling of inadequacy she is bound to have at one time or another?

One new strategy for self-respect that has been written and talked about

a great deal lately is *assertion* or assertiveness therapy. (Assertiveness does *not* mean aggressiveness.) (A plethora of books and magazine articles dealing with the subject is available.)

Dr. Herbert Fensterheim, assistant professor of psychiatry at New York Medical College, defines assertion as being open, direct, honest and *appropriate* about what you feel and think. He says that "when you don't assert yourself, you eventually lose control of your life, tend to get moody, depressed, and are given to outbursts of anger."

Many women in our society have been conditioned to be unassertive, chameleonlike, manipulative, and generally dishonest with themselves and

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## Many mothers desperately need to be told that they are performing a function necessary to the survival of our society.

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others in expressing what they feel about how they are treated. To use a minority analogy, they "shuffle" around those who have greater power or social position. They may feel anger at having to act this way to cope, but such anger is carefully hidden and perhaps never exposed.

That anger boils and bubbles underneath until it emerges as a psychosomatic symptom of some sort, or depression. (For more on how emotions can affect your health, write for the free booklet *Principles of Healthful Living*.) Dr. Helen A. DeRosis and Victoria Pellegrino write that "anger . . . is one of the most important features of depression that has to be dealt with. All depressions are loaded with angry feelings, and unless they are relieved in one way or another, it is almost impossible to overcome feeling depressed" (*The*

*Book of Hope*, MacMillan Publishing Company, 1976, p. 40).

They suggest that a depressed person be honest with herself, realize she is angry, and express that anger in a safe and appropriate way. In other words, *do* something about what she feels instead of stewing over it or suppressing it or ignoring it.

**How to Cope.** If you are depressed, there are several other things besides releasing negative emotions that can help you cope with a bout of depression. First, if you feel listless or paralyzed, force yourself to get up and move. Exercise at least once a day. Get out of the house if at all possible. Find somebody you can trust, and open up to them—talk about what's troubling you. Let your family and friends know you are not up to par, and don't overextend yourself socially. It helps to see people, but usually it's better to keep visits short and uncomplicated.

Set one or more short-range goals and plan how you're going to achieve them. Or find some activity you like and do it on a regular basis so you have something to look forward to.

If you are a homemaker, realize that you have an important and honorable role in society. There is nothing intrinsically "second class" about a domestic role in life! Homemaking is a vitally important profession in any human society, and it also often provides unique opportunities in the form of relatively abundant leisure time which can be put to pleasant use.

And above all, remember that depressions are not permanent. They do go away. Dr. Aaron T. Beck, director of the Mood Clinic at the Hospital of the University of Pennsylvania, has worked with depressed people for 20 years. He says that "the real tragedy of depression is not that it is hopeless, but that it isn't. Not at all. So little of all the suffering is necessary. The great majority of patients, if they don't commit suicide, will come out of it, at least until the next crisis. You'll get complete recovery from an episode 70% to 95% of the time. Among kids, 95%. . . . And apart from that, therapy can help."

Depression may be a "gray menace" but it can be conquered on an individual basis. And someday a healthy society that values individual dignity and respects the worth of each member of the family unit will replace today's dehumanizing, depression-producing system. □

## Suicide

# THE DEADLY PLAGUE

The grisly headlines greet us daily: "Superstar Overdoses," "Executive Blows Brains Out," "Jilted Lover Leaps from Fifteenth Floor." Every year millions of people around the world decide life is no longer worth living and act accordingly.

But suicide—one of the world's biggest health hazards—can be prevented. If each of us were more aware of certain deadly danger signals in ourselves and others, many if not most suicide attempts would never take place.

Following are some questions about suicide that you may not have wanted to ask. They are questions about a subject which makes a lot of people queasy or embarrassed, but the answers are important—they could mean the difference between life and death for you or someone you know and love.

**Why do people commit suicide?** Nobody in his right mind really wants to die, but many of us would desperately like to change the way we live. As long as we believe such change is possible, we can usually endure whatever curves life throws us. Most suicidal people, on the other hand, have come to the point where they believe nothing will ever improve. They have developed a feeling of hopelessness—a belief that they aren't able to control their lives or their environments in order to improve their painful lot in life. In fact, one study of suicide attempters reveals that fully 96 percent felt their problems were insoluble.

**Does depression cause suicide?** Deep depression does precede nearly all suicide attempts. But many who suffer from depression never commit suicide. As stated above, a feeling of hopelessness is the missing link between depression and suicide.

This feeling is also a common denominator in other self-destructive activities like alcoholism, drug addiction, and reckless or accident-prone behavior. Experiments with rats have

demonstrated that those animals conditioned to believe struggle against pain (a repeated electric shock) is futile won't swim when placed in a container of water. They, like some people, have been taught to give up on life—to lose all hope of controlling their environment. Rats are not people, and this is not exactly suicide, but it illustrates the point.

**What causes hopelessness?** Just like the rats mentioned above, people can refuse to rise to life's challenges because they've been taught to believe their efforts will be futile. This can happen several ways. As children, maybe they suffered from a handicap which undermined all their efforts to cope. Maybe as adults they had a run of "bad luck" and it caused them to give up the struggle. Or perhaps they consciously or unconsciously believe in fate or predestination.

People also feel a sense of hopelessness due to a lack of strong faith or belief in any absolute answers to life's quandaries. Today sometimes even those who profess a certain amount of religious faith are profoundly influenced by the atmosphere of unbelief that pervades most of our society.

Once a person tacitly accepts an antisupernaturalistic philosophy and doubts a higher purpose, all he has left are secondary goals such as work and pleasure. And once those goals are seriously thwarted, he has no compelling reason to hang on.

But there *is* great meaning and purpose in what we go through day by day, and it is all part of a plan mapped out by a great Personality who set the universe in motion and placed us in this imperfect environment in order to help us learn some otherwise unlearnable lessons. For more on this subject, write for the free booklets *Does God Exist?* and *Why Were You Born?*

**Does belief in an afterlife encourage suicide?** It's true that some Moslems would like to die fighting a

holy war so their place in paradise will be secure, and mystics of one stripe or another might waste away in search of Nirvana. The Japanese culture especially has accepted suicide and ritualized it to a high degree.

But in most cases a strong religious belief has just the opposite effect. In Western societies the religiously based social and legal sanctions against suicide have provided a powerful suppressing effect. And Western religion has traditionally put a high premium on the value of the present life in preparing for the hereafter.

But more importantly, belief in an afterlife provides hope, and hope powerfully counteracts the urge to self-destruct.

**Is suicide ever morally justifiable?** The Bible chronicles only seven suicides, without making any accompanying statement regarding the morality of such acts. God even directly intervened to give Samson the strength to kill over 3,000 Philistines—and himself, too—when he pushed down the supporting pillars of a public building. But this is a unique accident in the biblical account. It followed a long problem-filled history of Samson's relationships with the Philistines and their women which led to his capture, incarceration and brutally inflicted blindness (see the entire account in Judges, chapters 13 through 16). Also, Samson's action could be viewed as an act of heroic sacrifice rather than suicide.

It is significant that most suicides recorded in the Bible were carried out by spiritually bankrupt individuals like Saul and Judas. And the sixth commandment, "Thou shalt do no murder," certainly covers self-murder in principle. God gives human life, and most of us would agree it is His and His alone to take away.

**Is suicide an unforgivable sin?** Scripturally, an "unpardonable" or "unforgivable" sin can be *any* sin

# Suicide—A Worldwide Plague

Suicide is a universal problem—it can strike anywhere. Below are the grim statistics from around the world.

- West Berlin leads the world in number of suicides—43 per 100,000 population. East Germany, Denmark, Hungary, Austria, Finland, Sweden and Czechoslovakia also have consistently high suicide rates.

- The lowest rate is reported by Greece, with 3.2 suicides per 100,000. Statisticians, however, say it is difficult to compare rates internationally because degrees of honesty and efficiency in reporting vary from country to country.

- The U.S. reported 11.1 suicides per 100,000 for the year 1974. The Bureau of Labor Statistics noted that in that year at least 25,685 Americans killed themselves. This figure does not include unreported suicides or suicides disguised as auto accidents, drug overdoses, etc.

- Only in Britain and Ireland have suicide figures fallen. Both the number and the rate of suicides dropped by over a third in the 12 years from 1963. However, the number of unsuccessful suicide attempts and “pretend” suicides (both termed “para-suicides”) has rocketed especially among the

young. For every successful suicide it is estimated there are ten attempts.

- Suicide among U.S. youth has also risen alarmingly. The rate among 15- to 24-year-olds has nearly doubled in the past ten years, and it is the second-leading cause of death among college students. Schools with excellent academic standards have higher rates than those with lesser standing. Suicide is also the fourth-leading cause of child death in the U.S.

- Among the professions, psychiatrists (70 per 100,000) and physicians (36 per 100,000) have the highest incidence of suicide.

that one adamantly refuses to repent of. But even though a person who kills himself has no time to repent in this life, he may be given that opportunity at a later date. For further information on this subject, send for the free reprint article “Is This the Only Day of Salvation?” Also write for the booklet *What Do You Mean—The Unpardonable Sin?*

**Who is most likely to commit suicide?** Suicide strikes without prejudice, and no age group or level of society is exempt from the problem. However, certain groups are particularly susceptible. College students, for example, are a high-risk group. Under pressure to excel in the number-in-a-computer atmosphere prevalent on many large campuses, those who fall short in a tough system may develop a sense of hopelessness about life itself. Many colleges and universities, realizing the need in this area, have set up crisis counseling to help avert such tragedies.

Old people are another vulnerable group. Weary of living in constant ill-health and struggling to survive on grossly inadequate incomes, some find suicide “the easy way out.” And some healthy but neglected elderly persons, lacking love and meaningful activity, opt for death rather than an empty existence. But this is a tragic and unnecessary situation. In socie-

ties where the aged are respected and looked up to—where they have an active role in society—suicide among them is rare. But in many Western nations where people are usually mandatorily retired at age 65, turned out to pasture with perhaps not even a decent hobby to occupy them (and family and friends, either long gone or far away), they may not have much incentive to hang on. Old men in particular are statistically likely to be victims of this lonely kind of suicide.

For a more detailed breakdown of suicide statistics, see the box on this page.

**Why the sudden increase in youthful suicide in the past decade?** Suicide expert Calvin J. Frederick believes “the most important reason . . . is the tendency among young people these days to ‘do their own thing,’ to cut themselves off from their parents and society. While this exhibits a certain amount of healthy . . . independence, it calls for more strength and wisdom than most young persons possess.” He goes on to say that “once they cut loose, they suddenly find themselves completely alone, unable to manage their newfound freedom because they have no sense of structure or belonging. They become frustrated, tense, lonely, and anxious. They de-

cide they can’t cope, and their solution is suicide. The old stability and structure of the family unit is missing, with nothing to take its place” (“Suicide—How To Keep Patients from Killing Themselves,” *Medical World News*, July 12, 1976).

Sam Heilig, psychiatric social worker and executive director of the Los Angeles Suicide Prevention Center, agrees: “The divorce rate is skyrocketing, libertarianism reigns and kids no longer place any faith in the family unit. They think it’s safer to live alone. But, only a family relationship—complete with marriage and kids—can provide people with the constant support they need, a sense of belonging. . . . But kids nowadays are just wandering around, aimlessly hunting for a replacement that’s just not there” (Bella Stumbo, “The Lonely Young—Their Isolation Can Be Deadly,” *Los Angeles Times*, April 28, 1975).

Sociologist Jeanne Binstock considers that: “Danger once came from inadequate food supplies, disease and premature death. Today, danger comes primarily from within ourselves and from our relationships with other people.

In high-technology societies like ours, people are forsaking their former network of kinship and community for the “freedom to give up

wives, husbands or other personal relationships when internal needs are no longer satisfied" (*ibid.*). The results are plain. It is obvious from these and other findings that one of the best ways to prevent suicide in both young and old is to maintain strong family ties. In cases where this is not possible, some sort of surrogate family composed of carefully chosen friends can substitute, although usually not as effectively. Even a deep friendship with one other human being, however, can sometimes make the difference between hope and despair.

**Are people who continually threaten to kill themselves usually bluffing?** No, this is a myth. Most people who attempt suicide (some studies indicate at least 80 percent) either blatantly or subtly indicate their plans well in advance. A caring friend or relative who picks up these signals may make a life-and-death difference.

**How can I tell if someone is suicidal?** There are many clues. Although each person's modus operandi differs, here are some common signals:

- Neglect of work or classwork
- Neglect of personal appearance
- Giving away of treasured possessions
- Premature settling of affairs (making out wills, updating life insurance policies, etc.)
- Loss of appetite—may be accompanied by marked weight loss
- Difficulty in concentration
- Withdrawal from society
- Psychosomatic complaints
- Insomnia

Other symptoms are repressed anger, sexual anxiety, low self-image or putting down of self in front of others, irritability, temper outbursts, hostility, hallucinations, hypersensitivity, and despondency (*Life and Health* magazine, June 1975).

Suicidal tendencies among children are somewhat harder to detect. Depression is a possible sign and may manifest itself as hyperactivity, a failure to make friends, poor school performance or hypochondria, according to Dr. Peter Salzman, director of McLean Hospital's Children's Center in Belmont, Massachusetts (AP, Dec. 11, 1976). Salzman adds that "among 10- and 11-year-olds it

might show up as delinquency, vandalism, and fighting."

Of course, not everybody who shows one or more of the above symptoms is ready to jump off the nearest bridge. It's hard to determine what's going on inside someone's head from viewing his outward appearance. A person may be under severe stress and still not feel hopeless about his plight. If you offer a friendly ear, though, you'll probably be able to get a feel for how serious things are and you can proceed accordingly.

**What can I do to help someone who is obviously suicidal?** Most who attempt suicide are lonely, and what they need is not necessarily professional attention—just a patient, sympathetic individual who will listen to their problems nonjudgmentally. They don't want advice or solutions at this point in their lives—just a friendly ear.

From this standpoint many people are ill-equipped to deal with suicide threats. When someone indicates they don't feel like living anymore, there is a tendency to dismiss their feelings and sweep such a threatening problem under the rug. Even some psychiatrists may be uncomfortable dealing with suicidal individuals.

Donald Light, speaking to the American Psychiatric Association, said he believes that in many cases because a psychiatrist "doesn't understand how to deal with such a patient, he is uncomfortable with him and may unconsciously reject him." and he adds that "rejection is a trigger for suicide" (UPI, May 11, 1974).

Dr. Norman L. Farberow, co-director of the Suicide Prevention Center in Los Angeles, warns that "if the suicide threat is greeted by contempt or derision, the suicidal tendency increases—not the other way around" ("Heed Warning Signs, Prevention Expert Says," *Los Angeles Herald-Examiner*, November 23, 1975).

Clinical psychologist Paul Pretzel writes: "People are not driven to suicide by a caring inquiry as to whether or not they are suicidal. They may well be driven to suicide by an avoidance of the topic on the part of the listener, from whom they are wanting a concerned response" (James Cas-

## REAL CONVERSION

(You can't  
win the prize  
unless you  
start the race)

The apostle Paul likened the Christian life to a race which must be run for the "prize" of eternal life. A person does not even begin his "Race," however, until he has undergone a *genuine* conversion. The New Testament concept of conversion involves much more than a mere intellectual or ritualistic acceptance of a set of beliefs. True conversion can be defined in two parts. The first involves a definite event which occurs when God fulfills His promise to place the Holy Spirit within a person after certain conditions are met. The second part is a process which continues throughout the Christian's life. If you'd like to know more about the Bible's teaching on conversion, request the free booklet *Just What Do You Mean—CONVERSION?* Write to the address of our office nearest you.



telli, "I'm So Lonesome I Could Die," *U.S. Catholic*, January 1976, p. 36).

So, to summarize: Suicide is preventable. There are many ways to help people fill their unmet needs for love and meaningful activity long before hopelessness sets in. One of the best of these is to maintain strong family ties. Our isolated young people in their subcultures and old people in their retirement ghettos need to be reinstated into the mainstream of family life. These two groups, and everybody in between, need the love and support that usually only a family can provide. And in lieu of an actual family, people who know they need others should seek out and develop at least one special friend they can confide in when the going is rough.

In Britain and Ireland suicide figures have fallen in the past 12 years. To a great extent this can be attributed to the efforts of the Samaritans, the voluntary organization whose representatives are always available for people with suicidal tendencies to contact. With more than 1900 volunteers in 167 branches throughout Britain the Samaritans are known by 82 percent of the population. Apart from their telephone service which dealt with 200,000 calls last year, distressed and depressed people can drop in for a chat at any one of their centers. It is perhaps significant that in London there are 14 such centers but in Los Angeles there is only one—the suicide figures show it.

On top of this, if each of us stays really aware of those around us—alert for signs of emotional need, and

ready to listen patiently when those needs are present—it will go a long way toward fighting the individual hopelessness that leads to self-destruction.

If you believe someone you know is suicidal, don't wait. Lend them a sympathetic ear and let them talk out their difficulties. Often just talking about one's problems can help put things in perspective. Solutions become obvious without the need for a lot of advice-giving or preachments.

If there is no way you can reach such an individual, though, don't ignore the problem. Contact your local suicide prevention organization, a doctor, a minister, or the police *immediately*.

Suicide can be prevented—if enough of us care. □

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# HOW TO CONQUER YOUR FEARS

***Do you have doubts about holding your job? Do you worry over loss of money—or over the lack of money you need? Does the dread of illness or of a nervous breakdown or of insanity haunt you? Are broken friendships, repressed love affairs robbing you of health? Then here's what you need to do!***

by Herman L. Hoeh

**N**EVER IN the history of the world have people enjoyed so many labor-saving devices, so much leisure, such benefits from public sanitation. Yet, strange to say, the fear of nervous disorders, heart disease, cancer and insanity is robbing millions of health and happiness.

People everywhere are under *needless mental strain*. Business pressure and family troubles worry millions. *We don't know how to relax.*

Why is there such anxiety, such nervous strain? Why are we *FAILING* to master our fears and worries?

**An Age of MISMANAGED Minds.** This is not alone the age of the atom and hydrogen bombs. This is the AGE OF MISMANAGED MINDS!

*Uncontrolled, undirected* minds are ruining the lives of countless thousands. Millions more are rendered miserable and unproductive because their minds have been *enslaved* to FEARS—needless, unreasoned fears!

Needless fears rob us of contentment, warp our personality, and poison *both mind and body*.

Fear is an emotion—an emotion directed toward the SELF. Have you ever noticed that *those who suffer*

*most from fear and worry are "wrapped up" in themselves? "I'm afraid of this . . ." and "I'm worried about that . . ." is the way they talk.*

This, then is a *SELFISH age!* And the more we become concerned with ourselves, the more *afraid* we become that the *self* will get hurt. We become fearful of what might happen to the *self*. Our misdirected minds coddle and pamper the self.

In many instances this uncontrolled emotion of fear leads to grave consequences—to real desperation. There is the fear that "something is wrong with the brain"—that a nervous breakdown is impending,

that even insanity might result.

In other instances this uncontrolled emotion results in feelings of inferiority, in mental inadequacy, in sex impotency. One fear leads to another until our mental outlook and our physical health are permanently impaired!

But there is a way to correct this problem. *There is a way to conquer fear!*

**Are All Fears Wrong?** For millenniums the problem of fear has confronted and perplexed our greatest thinkers. Philosophers have found no satisfactory solution—or their lives wouldn't have been so often *frustrated!* Psychologists have spawned the idea of *auto-suggestion* as the solution to overcoming fears. Those who have tried this method still find themselves spiritually *devoid* of happiness. Of course! For *autosuggestion* is a clever way of saying *self-deception!* And deception never solved anything.

Others have tried sedatives to relieve their nervous fears. Countless pills to calm nerves and keep people happy have been sold by druggists and doctors. But fears and worries mental and physical illnesses still continue!

For us to reach the solution, we must recognize there are TWO fundamental types of fears: 1) *helpful fears* and 2) *harmful fears*.

Without *normal, helpful* fears none of us would be alive today! *Proper* fear is merely the drive for *self-protection*. Without this fear we would not exercise proper caution against injury.

It is the kind of fear we need!

But notice!—when the mind is not properly managed, the natural fear for *self-protection* is turned into unnatural fears for the protection of SELF.

**Fears Are LEARNED.** The control of the drive or emotion of fear is a *learned process*—it is a *matter of education*. We first need to learn what proper fear is. Then we need to exercise proper control over it. But we must also avoid misdirected and harmful fears.

Proper fear is *wisdom*. It is also *knowledge*. Suppose, for a moment, that we are confronted with a *real* danger. It is only natural that we should be fearful. But let's master our fears.

Fear tells us something is wrong. It warns us that we must calmly and carefully face our danger. We must get busy and take ACTION. Action solves the danger!—but simply worrying about it and being afraid that the worst will happen won't help us.

People who are chronic worriers, who have countless fears, are usually procrastinators and *indecisive*. They are *afraid* to take action. Their fears become their master. They become slaves to their fears.

The time to learn to master our fears is when we are young—yet THE PROPER DIRECTION OF THE MIND IN THESE FORMATIVE YEARS IS NOT BEING TAUGHT IN EITHER THE HOME OR IN THE SCHOOL!

But it is never too late to learn. Life is too important for us to remain in ignorance, no matter how old we are. Let's learn to DISTINGUISH between *helpful* and *harmful* fears.

**Needless Fears and Phobias.** Sometimes our fears are insignificant or even laughable—to the other fellow, of course. Here are some of the petty fears that plague people: fear of an expanse of water, fear of air travel, fear of silence, darkness, shadows in the moonlight, fear of telephone, telegrams, hunchbacks and mice!

These fears usually are the result of *past experiences* which we have either consciously or subconsciously allowed to haunt us.

Usually far worse are the common *phobias* which afflict people abnormally. Fear of the sight of blood, fear of animals, fear of being alone, FEAR OF AN UNATTRACTIVE FIGURE, FEAR OF BEING AFRAID, and the FEAR OF FAILURE. To this list we might add the *fear of everything*, a characteristic of the person who runs away from life!

Underlying some of these abnormal phobias are *normal* fears. But in every case *the normal, natural fear has been allowed to get OUT OF CONTROL*. Witness the countless millions of girls and women who are afraid they have or may sometimes have an unattractive figure. Serious mental, emotional and physical injury has often been done to "remove" this fear. The worsened condition creates more fears. A vicious circle results.

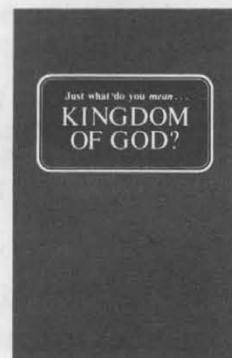
Haven't you known people who were fearful of *being afraid*? They can't explain their fears, but they

# THE KINGDOM OF GOD-

## What does it mean to you?

**King•dom** *n.* A politically organized community or major territorial unit having a monarchical form of government headed by a king or queen.

The phrase "kingdom of God," which appears frequently in the Bible, is often heard in religious circles. It is generally assumed to be a reference to heaven or to a condition of mind held by believers. Almost no one would apply the standard dictionary definition of "kingdom"—a type of government over a specific territory. Yet that is precisely how the term is most often used in the Bible. The real meaning of the term "kingdom of God" is far more interesting and exciting than the traditional vague concepts. The booklet *Just What Do You Mean . . . Kingdom of God?* clearly explains what the Kingdom of God is and why it's important to you. For a free copy, write to the address of our office nearest you. (See last page for addresses worldwide.)



know something fearful is going to happen to them! They haven't learned the lesson of life that our worst fears and experiences NEVER HAPPENED!

Sometimes, however, we bring fears and worries on ourselves. Job wrote: "For the thing which I did fear is come upon me, and that which I was afraid of hath overtaken me" (Job 3:25). Many capable men and women have become *failures* simply by yielding to the uncontrolled FEAR OF FAILURE. Especially has this been true since two world wars and a catastrophic depression. This fear has led to the FEAR OF LACK OF SECURITY. Notice how one anxiety breeds another. These fears are all characteristic of *lack of knowledge* and *lack of wisdom*.

The CAUSE of these abnormal worries and fears lies in inadequate recognition and control of emotional problems we experience in maturation. Domineering parents, inconsiderate fathers, overpossessive mothers, family jealousies and arguments, fussy grandparents—these created most of our emotional problems. But the fundamental CAUSE of OUR fears is OUR failure to recognize and solve these emotional problems.

**A Common Example.** Here is an example of the consequences due to the failure to discipline our mental emotions. A young girl is engaged to be married. Instead of being happy, she is crushed with conflicts and fears. She is frightened with the responsibilities of married life and motherhood. A nervous breakdown seems inevitable. Why?

Usually in her background you will find a carefree father, a frustrated mother, spinster school teachers, no companions of her own age while an adolescent. Mental problems, unsolved, produced *physical* disturbances. Menstruation became abnormal and often painful. Fears of childbirth haunted her because of stories she heard from "friends." This is no isolated case. This is a COMMON EXAMPLE. Some of *you* are suffering from just such a problem as this.

Let's understand, now, why *emotional* disorders lead to physical disorders, as in the case just mentioned.

There is a direct mind-body rela-

tionship in every individual. We must direct and coordinate both mind and body before we can really achieve happiness and conquer our fears. Solomon understood this problem when he wrote: "A tranquil heart is the life of the flesh; but envy is the rottenness of the bones" (Prov. 14:30). And again, "Better is a dinner of herbs where love is, than a stalled ox and hatred therewith" (Prov. 15:17).

There is a direct connection of digestion and health with the mind. When the mind is fearful, it sends out messages to the various glands and organs to be prepared for danger. The organs fill the bloodstream with materials to enable us to ACT to meet the danger. When we procrastinate or are indecisive, our body becomes filled with unused material. Our glands are needlessly drained. Constant self-induced fears soon cause the glands to function abnormally. Our whole body suffers, and with it the personality and even the mind.

Unconquered fears are the cause of a major portion of diseases. Of course, proper food habits, proper exercise and elimination also play a part in over-all health—both mental and physical.

When our bodies become filled with toxins that should have been used up in ACTION to meet *real* dangers, we find ourselves "nervous" and "upset." People often say: "It's my nerves." Nerves are not wrong. We need them to live. It is *what we have done to our nerves* that is the problem. We have frayed them through overuse arising from uncontrolled fears and worries. We have turned the nerve mechanism created for SELF-PROTECTION into a weapon for SELF-DESTRUCTION.

**Frightful Dreams.** When once we have created physical disorder in our body, the *imagination* begins to play tricks on us. Our imagination should be utilized to create new and better ideas. It is an instrument for progress. Instead, we let our imagination *frighten* us with new and added FEARS. We imagine we are suffering from indigestion, then ulcers, then cancer—and finally DEATH, the greatest fear of all! Sometimes we imagine ourselves suffering from a nervous breakdown or mental derangement. Life becomes frightful.

Horrifying DREAMS begin to afflict us. Most dreams come from an overworked mind. Daily problems weigh us down as we seek rest at night. We don't know how to relax. Solomon said: "For a dream cometh through a multitude of *business*" (Ecc. 5:3).

Since the conscious business with which so many have been occupied is that of *creating new fears and worries*, is it any wonder that a blood-engorged brain will re-create these same fears in DREAMS?

When the state of mental worry takes a severe form, dreams and premonitions build up the FEAR OF DEATH—and usually cause premature death. MOST OF THE WORLD is enslaved by this dreadful fear! This fear wrecks mental balance and poisons the body. It creates spiritual misconceptions that sometimes exert themselves in religious *persecution*. Persecution is a release valve for pent-up spiritual frustrations, fears, and the sense of self-condemnation. But persecution doesn't solve the problem.

**The Way of Escaping Fears.** Once we recognize these unfounded fears which we need to battle, we must find the right way to CONQUER them. Psychological self-deception won't help. It doesn't really do any good to tell ourselves that death is not really an enemy—that it is a good friend. Such auto-suggestion doesn't change the fact that death is a mortal enemy. The way to solve this fear—and to solve every unnecessary fear—is to *recognize what it really is*.

Paul tells us death *is an enemy* (I Cor. 15:26). But Jesus Christ has made a way to escape its eternal consequences. "Our Saviour Christ Jesus . . . nullified death and brought life and incorruption to light through the gospel." "For God gave us *not a spirit of fearfulness*; but of power and love and sobering" (II Tim. 1:10, 7, Panin trans.).

But how do we lose the dread of death—and of all the other fears and worries that haunt us?

Remember the first lesson we learned is that we need to recognize the distinction between *helpful* and *harmful*, uncontrolled fears. Fear may be either right or wrong depending upon our direction of this emotion. *Proper fear* stems from the drive for self-preservation. It is a sig-

nal of danger—a signal that we need to take ACTION.

Proper fear is in two forms. One is *natural* fear of physical danger—the warning that we need to protect this life. The other is SPIRITUAL FEAR for our eternal protection. This fear almost no one recognizes. Yet without it, we will *never* be able to CONQUER uncontrolled fear.

This SPIRITUAL fear is called the FEAR OF THE LORD or the FEAR OF GOD. Like every other fear, it, too, has been misguided until it has become the fear of the devil!

The natural emotion of physical fear warns us of physical hazards. This is a learned fear. The spiritual FEAR OF GOD warns us of eternal dangers. It, too, is a learned fear. We have to *learn* about the power and authority of God. We learn that God gives life and also *takes* life. That is why Jesus said: “Fear HIM” (Luke 12:5).

**Why Is the Fear of God Necessary?** This present age has lost this healthy respect for God. Notice the example of Noah: “By faith Noah, *warned* concerning the things not seen as yet, with *godly fear* prepared an ark to the saving of his house” (Heb. 11:7). Noah *feared* the power of God. That was a right fear—a proper spiritual fear. But Noah controlled his fear of God. He didn’t let his fear worry and frustrate him. Noah ACTED on his fear. He *did something* about it!

The great *importance* of the FEAR OF GOD has been woefully misunderstood. Let’s understand its full significance. “By the fear of the Lord men *depart from evil*” (Prov. 16:6). This fear warns us that God *will punish us if we harm ourselves by doing evil!*

When we do *evil*, we harm ourselves. To teach us NOT to do evil, God sometimes has to punish us. That is how the fear of God leads us away from the danger of evil—both physical and spiritual danger. “The fear of the Lord is the *instruction of wisdom*” (Prov. 15:33).

When we fear God, we respect what He says. What He says has been recorded in His Word, the Bible. In the Bible is the wisdom of God. Its instruction tells us right from wrong. It defines for us the pitfalls of sin. It warns us of the dangers of evil which robs us of happiness and

prosperity and eternal life. “The fear of the Eternal tendeth to *life*; and he that hath it shall abide *satisfied*, he shall not be visited with evil” (Prov. 19:23).

The *need* for the fear of the Lord is a *New Testament* teaching. Peter said: “Fear God.” (I Peter 2:17). It is repeated again in Rev. 14:7: “Fear God.” The early Church of God had peace when “walking in the *fear of the Lord* and the comfort of the Holy Spirit” (Acts 9:31).

**How to ACT on the Fear of God.**

How will the proper REACTION to the fear of God rid us of all the needless mental suffering we impose on ourselves? How will the fear of God teach us to manage, and direct our minds until we master every nervous fear?

The apostle John wrote: “There is no fear in love; but *perfect* love casteth out fear: because fear hath torment. He that feareth is not made perfect in love” (I John 4:18).

The worries and mental torments stemming from fears occur when LOVE has not been perfected. LOVE is doing what God commands: “For this is the LOVE of God, that we keep His *commandments*: and His commandments are not grievous” (I John 5:3).

The commandments of God define right and wrong. They tell us of the dangers of sin. Sin is the “transgression of the law” (I John 3:4).

By OBEYING God we avoid the dangers of evil and we fill our minds and emotions with LOVE. Love removes worries and torments. This is how we ACT upon the fear of God.

Now let us learn HOW TO ACQUIRE PERFECT LOVE. Here is what Peter says: “Add to your faith virtue; and to virtue, knowledge; and to knowledge temperance; and to temperance patience; and to patience godliness; and to godliness brotherly kindness; and to brotherly kindness LOVE” (II Peter 1:5-7). (The archaic word “charity,” found in the King James Version, should be rendered LOVE.)

Here are SEVEN STEPS you need to follow to rid yourself of fear!

First, notice that you begin with *faith*. What is faith? “Without *faith* it is impossible to please [God]: for he that cometh to God must *believe that He is*, and that He is a *rewarder*

# Coming— A New Age!

This world is filled with upset—war, hatred, prejudice, strife, terrorism, blatant immorality of all kinds, famine, pollution, disease and injustice. The list goes on and on, and conditions aren’t improving all that much in spite of concerted efforts to turn things around. Will we all perish in an unthinkable global war or strangle in the mire of increasing environmental pollution? Or will something happen to prevent us from running, lemminglike, headlong over the precipice? There is a trustworthy source that predicts humanity’s survival. And not just survival in more of the same milieu, but a total transformation of this earth into an absolute utopian paradise. Read about how all this is going to happen—and soon—in the new free booklet *Coming—A New Age!* Send your request to our office nearest you.



of them that diligently seek Him” (Heb. 11:6).

You cannot FEAR God without having faith that He *exists* and that He *rewards* us for what we do, whether good or evil. Faith is not something you try to make yourself think you have when you don’t have it. Faith is the recognition that God exists and that it is fatal to fall into His hands unless you turn from your sins! This faith is *acquired*. It is learned by *experience*. You cannot *hypnotize yourself* into receiving faith.

Maybe you are like the woman who wrote us: “I can’t seem to make myself fear God.” Of course you can’t *make yourself* fear God! You have to *experience* the *need* of fearing God. Perhaps you need to become a constant reader of *The Plain Truth* to learn the *authority and power of God!*

Let’s follow the instruction of Peter throughout his *seven-fold plan* to conquer fear by filling the mind with LOVE.

**The seven-fold plan.** First, add *virtue* to your faith in the power of God. Virtuous means *decent, chaste, modest, well-mannered*. It is the opposite of coarseness and vulgarity. The *first step* is to *remove the cause of self-condemnation*, the *secret sins* that are often committed under the guise of extreme prudery!

We must *let the Bible define* decency, chastity and good manners for us. Study the lives of men and women recorded within its covers. Recognize their mistakes. Don’t make the same mistakes. Remember, too, that the fear of God teaches us not to make up our minds as we wish to believe, but to believe and act upon what *God says* virtue is. It is neither self-righteousness nor coarseness. It is proper refinement.

Second, add *knowledge* to virtue. Knowledge refers to the learning of ideas and principles of conduct. We must continually *increase* in knowledge until we clean up our character!

Third, add *temperance* to knowledge. When we learn that God permits us to use things that we thought were forbidden, we must exercise the proper balance in handling any new freedom. We must be temperate. *Temperance does not mean prohibi-*

*tion*. Prohibition is abstention. Temperance is moderate use! Paul said: “Every man that striveth for the mastery is *temperate in all things*” (I Cor. 9:25). Temperance means SELF-CONTROL. This is one of the most vital steps in controlling the mind and stilling fears. You need to exercise self-discipline over mind and body if you want to overcome fears.

Fourth add *patience* to self-control. Patience is that *broadness of mind* by which you *wait* for the result to be achieved. Patience is the opposite of *worry*. One who is patient does not become frustrated because problems don’t always solve themselves immediately. Patience comes from exercising self-control under trial. “Tribulation works patience,” wrote Paul (Romans 5:3). You can’t sit down and make yourself patient. You must work at it, under trial and test!

Fifth, add *godliness* to patience. Godliness means to be *like God* in character. God defines His character throughout the Bible. Many “religious” people pretend to have godliness, but they deny the *POWER* thereof” (II Tim. 3:5). God is a powerful character, not a weakling. Godliness means *strength of character*—it *sums up* virtue, knowledge, patience, self-control. Too many try to *imagine* what God is like apart from reading the Scripture. Little wonder that they deny His *POWER!*

Sixth, add *brotherly kindness* to godliness. It is often easier to act righteous than to be *kind* to a brother! James says of the human tongue: “Therewith *bless* we the Lord and Father; and therewith *curse* we men, who are made after God’s likeness” (James 3:9). God is perfect. We need to be perfect. But our brothers have faults of the flesh. It is difficult to be kind, to be helpful, to be generous, to be stern only when necessary to fellow human beings.

In misguided zeal many *impose* their “kindnesses” on others. We must learn to exercise good judgment in being kind. On the other hand, many neglect kindnesses which they can never make up. This breeds sorrow and worry.

Seventh, add *LOVE* as a climax to perfection. Jesus said: “*LOVE* your *enemies*, and pray for them that persecute you” (Matt. 5:44). When you

love your enemies *this much*, you won’t fear what they can do to you. Love, when perfected, casts out *all* fear! Jesus also said: “Greater love hath no man than this, that a man *lay down his life* for his friends” (John 15:13). Perfect love even removes the most terrible fear of all—the fear of death!

**What is Love?** Love is the perfection of God’s law according to its spirit or intent. “Love worketh no ill to his neighbor: therefore love is the *fulfilling of the law*” (Romans 13:10). You cannot love anyone without fulfilling the law. And you cannot fulfill the law completely without loving your neighbor and your enemy! Love sums up the spirit and intent of God’s law. It is the summation of all that is good and right. The fear of God leads us to love.

Notice how the Scripture defines love in its fullness. (In the following verses the archaic word “charity” needs to be translated LOVE, which I have done): “If I dole out all my goods, and if I give my body that I may glory, but have not love, it profiteth me nothing . . .” Brotherly kindness without LOVE profits nothing eternally! “Love suffers long”—it is patient—“is kind”—it includes brotherly kindness; “love envieth not, vaunteth not itself, is not puffed up”—it doesn’t exalt itself, it is virtuous—“is not unseemly, seeketh not its own”—love is directed away from the SELF “is not provoked, taketh not account of evil”—it is patient and not resentful—“rejoiceth not in unrighteousness, but rejoiceth in the truth”—it is godliness.

Love “covereth all things”—it covers every requirement—“believeth all things”—love is not gullible (which a misreading of this verse might imply), but it believes all things written in God’s Word—“hopeth all things”—it hopes for all the promises, which gives us courage—“endureth all things.” LOVE rises above all conflicts, making it possible for us to rise above the sufferings and fears which engulf this age.

“LOVE NEVER FAILETH,” (I Cor. 13:3-8).

This is how YOU can conquer your fears and worries! Ask God for help to carry out His seven-fold plan to attain real peace of mind. “Ask, and it shall be given you” (Luke 11:9). □