



THE PHILOSOPHY OF DEPRESSION

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ABSTRACT

This article highlights the influence of depression on the process of philosophical thinking. Depression encourages a person to delve deeper into questions about the meaning of life, existence, values, and inner experiences. Many famous philosophers throughout history – such as Kierkegaard, Nietzsche, Camus, and Sartre – developed new philosophical directions under the influence of depressive mental states, exploring human existence, freedom, and the essence of life. This article analyzes the contribution of depression to the development of philosophical thought.

Introduction

THE PHILOSOPHY OF DEPRESSION - Philosophers are far more likely to suffer from depression than to write about it. Each year, 8-9 percent of Americans experience a depressive episode. Roughly 14 percent of the population will qualify for a diagnosis of major depressive disorder at some point in their lives. Assuming that depression strikes American philosophers at similar rates, then among the 7,211 registered members of the American Philosophical Association, we should expect that 1,000 will feel the dark touch of depression in their lifetime—about the same as the number who specialize in ethics. About 600 philosophers—more than specialize in ancient philosophy—will experience a depressive episode this year alone. Depression, a part of the human condition so pervasive and devastating that the World Health Organization calls it “the leading cause of ill health and disability worldwide,” has yet to capture the attention of contemporary Anglophone philosophers. Why? Perhaps because it is not obvious whether there are any distinctively *philosophical* questions about depression. Today, we are taught that depression is a disease of neurochemistry. We don't expect philosophy to have anything insightful to say about cancer; why should we expect it to have more to say about depression? One might think that what causes and treats depression is an empirical question best left to scientists, psychiatrists, and therapists. But depression is different from cancer. While it is partly a disease of neurochemistry, depression is also a disease of thought. This is why therapy is an ineliminable part of its treatment. Thus it is curious that philosophy, which bills itself as the study of how to think, has said so little about this way that thought breaks down. I was also surprised that I, a philosopher who prided himself on thinking clearly, had somehow ended up in a hospital filling out worksheets on ‘thought distortions.’ Studying how something breaks is a good way to learn how it works. You learn that the battery starts the car when your battery breaks; you learn that memory is processed in the hippocampus by seeing that patients with hippocampus lesions can no longer remember. Philosophers could apply the

same approach to depression. By unpacking how thinking goes wrong in depression, we might learn about what it takes for thinking to go *right*. Let me be clear: when I talk about something ‘going wrong’ in the thinking of the depressed, I do not mean to imply that depressed people are to blame for their condition. Depression is involuntary. Moreover, even if depression is partly caused by how one thinks, that does not mean that one can easily think oneself out of it. One thing I learned from those thought distortion worksheets is that there is a big gap between consciously recognizing that, say, I am not a terrible failure, and internalizing that thought in a way that is actually helpful. Philosophy will not offer a cure for depression. However, depression might offer some insights into philosophy. The breakdown in thought I take to be both the most philosophically interesting and most fundamental to depression is a kind of estrangement from value. During my first depressive episode, my high school choir took a trip to the Grand Canyon. It did nothing for me. I remember staring blankly at the stunning view. It looked flat, like a painted background in an old movie. I could see the canyon, but I was blind to its beauty. Depression robs you of the ability to appreciate good things. You can still believe, in an intellectual way, that there are good things. You can say, “It’s good that infant mortality is declining.” You still want good things to happen to the ones you love. But you can’t *experience the goodness* of good things. This points to an aspect of the well-lived life that philosophers have tended to neglect. Ethicists usually focus on action, asking “what should I *do*?” (For example: should I push the man in front of the trolley?). Action is one way we respond to value: by trying to bring good things about (as utilitarians recommend) or by respecting others’ rights (as deontologists emphasize). Another, less-studied way we respond to value is in experience, in how we receive and perceive the world rather than how we act upon it. It is possible to respond to value in action but not in experience. Immanuel Kant gives the example of a depressed philanthropist who, though unable to feel any sympathy for others, “tears himself out of this deadly insensibility” and helps others “for the sake of duty alone.” Kant took this guy to be the paradigm of morally worthy motivation. But however admirable his actions may be, something is still clearly broken in the depressed philanthropist’s relationship with the good. What goes wrong in the depressed person’s relationship with value? What does that tell us about how to respond to and appreciate value? What does that tell us about value itself, about what is good and what it is to be good? These are questions that philosophy can help us answer. As we approach these questions, we should remember that any statement of the form “X is THE cause of depression” is bound to be false. Every case of depression has its own fingerprint of symptoms and causes. Some depressions are so biologically entrenched that only neurochemical intervention can help. Some may be simply genetic. Sometimes depression is a near-inevitable response to intolerable circumstances, as it might be for a prisoner in solitary confinement. So, as we search for a breakdown in how the depressed think about value, we should remember that this will be only one thread in the variegated tapestry of awfulness which is depression. The thread I want to pull on has to do with desire. Some of the few philosophy papers about depression (see [here](#) and [here](#)) are based on the premise that severely depressed people have no desires—they don’t want anything. I find this claim flummoxing. True, depression can render one catatonic, lacking any motivation to get out of bed. But when I was paralyzed in bed, it wasn’t because I didn’t want to get up. On the contrary, I *desperately* wanted to get up, to function, to be normal again. It just felt like I couldn’t, as surely as if I were handcuffed to the posts. That was *why* I was depressed: because the life I so badly wanted seemed like it was no longer possible.

In his recent book *Good Reasons for Bad Feelings*, University of Michigan psychiatrist Randolph Nesse argues that desire plays a central role in depression. He suggests that the evolutionary function of mood is to match motivation with opportunity: when our efforts are likely to pay off, mood is high; when success is unlikely, mood is low. Low mood is thus a signal to conserve energy when exerting it is likely to be futile, like a bear hibernating in

winter. Nesse hypothesizes that depression is an extreme version of this signal, arising from the perception that it is impossible to reach one's goals. This explains his clinical observation that many of his depressed patients were "trapped pursuing unreachable goals" (93).

That's certainly true of me. At the root of my depression was an attachment to an unattainable ideal of academic success. I'm embarrassed to confess: I wanted to be known as a Great Philosopher, like Kant or Plato, and I couldn't accept the fact that that wasn't coming true.

Nesse's prescription is to give up. When depressed people let go of their impossible goals, they can shift their focus to more realistic aims, and their moods will improve. And this is part of the truth: I began to recover only when I let go of my adolescent fantasies of success. Nevertheless, it's not the whole story. I think the problem isn't just a fixation on unattainable goals: it is the deeper idea that goodness is to be found in attaining *goals* at all.

If you assess your life in terms of goals, then its value will always be comparative. There is no good, only closer to or further from your goal. Thus your evaluation depends on your standard of comparison. We've all experienced this. When a scary tumor turns out to be benign, the fact that you don't have cancer shifts from neutral to "pop the champagne!" When you see pictures from your friend's vacation in Belize, your pleasant road trip through Pennsylvania suddenly feels humdrum. A good life can seem bad when measured against a technicolor dream.

A person who experiences value in terms of how well the world matches what they want is always vulnerable to depression: all it takes is for the world to fall sufficiently out of sync with their desires. The lesson of this may be that desire is the wrong way to relate to value.

What's the right way? To attend to the goodness of the things right in front of you. The beauty of the Grand Canyon is not comparative: it is not a matter of it being better or worse than any other canyon. The value is *right there*. The goodness of good things is in the things themselves. Value lies in the real world, not in how that world stacks up against hypothetical alternatives. A depressed person cannot see the goodness in front of them at least partly because they are ruminating on the unrealized value of unreal possibilities. The correct way to relate to value is not to want it, but to *appreciate* it.

(As usual, the Buddhists have known this all along: "desire is the cause of all suffering." I don't think it is a coincidence that mindfulness meditation is one of the most promising therapies for depression.)

This may seem like self-help—and it is—but there is philosophical substance here too. Many philosophers, especially those in the utilitarian tradition, have assumed that the primary bearers of value are states of affairs or outcomes: the kind of value we have in mind when we say "It is bad that the war in Ukraine has taken so many lives." Against this, Elizabeth Anderson and others have argued that the fundamental bearers of value are concrete *things*: your cat, your spouse, the tree you like to sit under, your 5-year-old's crayon drawing, a night spent dancing with friends. If I'm right that depression can arise from fixating on a desired state of affairs instead of appreciating the value things have in themselves, that seems to weigh on Anderson's side of the debate.

In Plato's allegory of the cave, what the prisoners of the cave cannot see is 'The Good.' Plato thought the philosopher's task was to escape the cave by coming to grasp the essence of goodness itself. When one truly *sees* the good, it will illuminate the whole world like the sun.

The depressed are trapped in the darkest recesses of the cave. Perhaps philosophy can help to show them the way out.

The Current Events Series of Public Philosophy of the APA Blog aims to share philosophical insights about current topics of today

Conclusion

Depression has had a deep and lasting influence on philosophy. It has inspired many thinkers to expel fundamental questions about human existence, meaning, and despair, philosophers such as Kierkegaard, Nietzsche, Camus va Sartre developed powerful ideas that shaped

modern philosophical thought. Their reflections show that depression can lead not only to suffering but also to self-discovery and creative insight. Ultimately, depression has helped philosophy to better understand the complexity of the human mind, the search for meaning, and the emotional side of existence.

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