



1 Acedia and Its Relation to Depression

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Introduction

There are *prima facie* grounds for thinking *acedia* and depression are somehow related. *Acedia*, that old deadly sin of sloth, is marked characteristically by idleness, laziness, aversion to work, slackness, and even sorrow. Depression is marked characteristically by sadness, dullness, loss of pleasure, emptiness, and, sometimes, irritability—these are stereotypical characterizations, to be sure; nevertheless, it is instructive beginning with such familiar but crude generalizations, then proceed to analyze, clarify and correct them as needed. The *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) identifies at least one necessary condition for inclusion in the category of depressive disorders, i.e., a sad, empty, or irritable mood:

The common feature of all [depressive] disorders is the presence of sad, empty, or irritable mood, accompanied by somatic and cognitive changes that significantly affect the individual's capacity to function. What differs among them are issues of duration, timing, or presumed etiology. (American Psychiatric Association 2013, 155)

The DSM has, since its third iteration (1980), overtly eschewed reference to etiology as a diagnostic criterion for depression in favor of identifying symptoms and behavior in descriptivist language as diagnostic criteria.¹ This intentional move leaves room for clinicians and practitioners to theorize, on a case-by-case basis, about the etiology of any particular person's depression,² rather than have the matter settled legislatively at the outset. In what follows, I shall be assuming this descriptivist understanding of depression.

As for the relation between *acedia* and depression, no one doubts that there is an apparent between them. The trouble develops when we attempt

to specify the relation further: are *acedia* and depression identical? Is *acedia* a kind of depression? Is there any historical continuity between them?

I should say at this point: there is a crucial distinction to be made between (1) the concept of *acedia* and (2) an instance of *acedia*³—and likewise for depression. The trouble that arises from asking the above questions is often the product of our own conflating of this critical distinction. For when one asks, *Are they identical?*, it can only mean to ask whether an instance of *acedia* is numerically identical with an instance of depression—the two concepts themselves are so obviously qualitatively non-identical that that question is hardly worth asking; and numerical identity, if it is the sort of thing that requires extension, would not seem to be amiable to abstract objects like concepts or definitions.⁴ Yet when one asks, *Is there any historical continuity between acedia and depression?*, she obviously means to inquire about the conceptual history of depression, and not whether one’s particular occasion of depression has arisen out of an earlier episode of *acedia*—although, as we shall see, this is certainly a question worth asking. Keeping this distinction in mind will be important going forward, and I hope, where I did not state it, the reader will be keen to discern which sense I am indicating.

In recent discussions, there is no consensus regarding the relationship between *acedia* and depression. While most writers consider them not to be identical, many opt to interpret *acedia* using more up-to-date, contemporary psychiatric terms, thus essentially medicalizing an otherwise spiritual ailment (Altschule 1965; Jackson 1981; Jehl 2005; Azzone 2012). Others consider *acedia* to lie on a continuum with other maladies like *ennui* (Irvine 1999),⁵ or *taedium vitae* (Jehl 2005).⁶ Still, others dismiss tying depression too tightly to *acedia*, given the differences they present either in agential freedom (Daly 2007) or in sinful culpability (Altschule 1965; Webb 2017). In my view, there is something right about the latter two of these suggestions. More precisely, I argue for the following two theses. First, the concept of *acedia* is not identical with the concept of depression; nor, for that matter, is *acedia* merely a primitive psychological conceptual predecessor to depression, but it marks off significantly different ways of being not least because of one’s spiritual relation to God. As Lucrèce Luciani-Zidane (2009, 13) has said, “*acedia* is entangled in the heart (or life) of Christian dogma.” My second thesis, however, is that an instance of *acedia* maybe sometimes coextensive with an instance of depression. That means a case of one might also be a case of the other. Alternatively, if they are not the same, we can understand why someone might mistakenly identify them, given that these two conditions are so similar in their symptomatology.

I have divided this chapter into three cohesive movements or parts. First, in order to establish a correct conceptual understanding of *acedia*, I cull the main features of *acedia* as understood from the early Christian capital vices tradition.⁷ We shall see that, within this tradition itself, while there is some divergence in the ways *acedia* is understood, there is still enough cohesive unity to detect an unbreakable strain, a “continuous exfoliation” (Wenzel 1960b, 175), each strand “representing the true main line of the concept’s development.” (Wenzel 1960b, 179) Second, I critically examine some recent attempts to define the relationship between *acedia* and depression in the scholarship of psychiatry, philosophy, and theology. Third and finally, I turn to our main topic concerning the relation of *acedia* to depression.

What Is Acedia? Its Main Features. Culled from Principal Historical Texts and Thinkers

To begin, we require a precise answer to the question *What is acedia?* Those who have some familiarity with the conceptual history of *acedia* will perhaps suggest there is a prior question: *Which acedia are we inquiring about?* Siegfried Wenzel, in his masterful opus *The Sin of Sloth*, explains that, “in looking over the whole medieval period”, there are at least “three types of *acedia*: monastic, Scholastic, and popular, which can be localized with some accuracy in time and, even more so, in literary genres.” (1960b, 179)⁸ However, *pace* the well-placed concerns of those with prior familiarity, we should not mistake this divergence for there being fundamental disagreement about what *acedia* is. As Wenzel immediately clarifies: “But never did a later form completely replace an earlier one.” (1960b, 179) In the latter forms, for example, we can detect the still-present monastic elements that were once characteristic of the earlier forms. Moreover, as Wenzel maintains, despite their differences, the different types of *acedia* enjoy a cohesive unity centered on an “unbroken mainstream in its history”, namely, the association of *acedia* with “idleness and negligence in spiritual deeds.” (1960b, 179) *Acedia* gets different emphases, in different people’s hands, with different audiences—something we can expect with the different times and places *acedia* appears in the medieval literature.⁹

From that cohesive unity, we can cull the following main features of *acedia*. First, *acedia* is irreducibly spiritual. Second, *acedia* has especially notable psychological manifestations. In what follows, I shall briefly explain what I mean by these features.

Acedia Is Irreducibly Spiritual

By claiming that *acedia* is irreducibly spiritual, I am not claiming that it is merely spiritual, nor that it is an entirely spiritual phenomenon. Instead, it has a spiritual component that is both essential to it and which is irreducible. It is essential in the sense that *acedia* cannot be understood apart from its spiritual import. Moreover, this spiritual sine qua non is irreducible in that any attempt to analytically reduce it in simpler terms (such as its affects, an individual's psychological states) will be hopelessly incomplete. Moreover, *acedia* also has a proximate spiritual etiology.

Acedia is a capital vice, one of the seven deadly sins. That does not mean *deadly* in the sense that it is the worst possible sin that one can commit, but in how it can surreptitiously take root and lead to further sins. Its origins are from among the 4th-century desert monastics as one of the *logismoi*, or evil thoughts, which tempts the monk away from prayer and devoted religious life. However, importantly, it can be resisted. For Evagrius, the demon of *ακηδία* was to be countered with fortitude and perseverance, and “after its struggle the soul is taken over by a peaceful condition and by unspeakable joy.” (1990b, 12) Cassianic remedies for *acedia* divide into two: (1) keeping the cell via cultivating fortitude (1894b) and (2) manual work (1894a). This latter remedy, of course, accords well with how we understand sloth today. If the connection from spiritual to manual work is not clear, manual work here is included because it is the external work of the monk, which itself is tied deeply to his religious vocation.¹⁰ Even the sweeping of floors can be a deeply religious activity.¹¹ As one author puts it:

If we give credence to the monks, we are therefore dealing with more than bad moods, psychic fluctuations or moral defects. It is a question of the resolve that arises in the wake of a decisive choice for which the monk has risked his life and to which he must hold no matter what: to realize one's full potential in oneness with God. He has bet everything that he has and everything that he is on this. *Acedia* is therefore so dangerous for him since it causes him to throw away everything and thus to miss out on what matters most in the realization of his full potential, which is the primary purpose of the monastic life. (Bamberg 1991, 87, qtd. in Joest 2004, 144 n.100)

Acedia eventually makes its way out of the desert to the wider world, evidence that it is not merely a monk's vice.¹²

Pope Gregory the Great in the 6th century also characterizes sloth in spiritual terms. One antidote he recommends for *acedia* is a “longing after the Creator, which gives over the sloth of negligence [*cum torporem negligentiae*],¹³ and kindles the frost of former insensibility with the fire of holy love.”

(1844, I.4.23.42) Gregory implores us to turn our attention upon things—spiritual things—that dispel despair and invigorate hope. First, we are to look to the saints that we may “be refreshed with the examples of the righteous ... Let us see then how beautiful is the activity of those who pursue their course, and learn how disgraceful is the sloth of the sluggish [*hebetudo pigrorum*].” (1844, V.24.8.17) Second, we are to reflect upon the cross, our own salvation, and the glory to come. After beautifully narrating the whole story of redemption and salvation, that gospel foolishness “that so far from the guilt of [the penitent’s] debt being binding on him, gifts are heaped upon him more abundantly even after his sin”, Gregory immediately interjects, “Whose sloth [*torpor*] would not be startled at the elevation of so high a thought?” (1844, V.27.15.30) Thus, Gregory has in mind the spiritual vice of *acedia*. When transmitted to English as early as the 10th century, Ælfric abbot of Eynsham cites Gregory as the main influence and uses the word *slæpð* (an early version of *sloth*), making no secret that the referent here is the vice of *acedia* (1966, XVI, XXI).¹⁴

Aquinas in the 13th century follows this tradition of *acedia* as a capital vice, adding that “*acedia*, as we understand it here, denotes sorrow for spiritual good.” ([*acedia ... nominat tristitiam spiritualis boni*] 2010, II-II.35.1.co) Previously, Cassian had distinguished between *acedia* and *tristitia*, while Gregory had *acedia* subsumed under *tristitia*; here, Thomas considers *acedia* a species of *tristitia*.¹⁵ *Acedia* becomes a mortal sin, and is most destructive, when it “reaches to the reason, which consents in the dislike, horror, and detestation of the Divine good (*quae consentit in fugam et horrorem et detestationem boni divini*), on account of the flesh utterly prevailing over the spirit.” (2010, II-II.35.3.co) Here, just as in the desert, the problem is centrally a lack of love for the things of God. From its sapling stage as a *logimos* to its fully grown stage as a mortal sin, *acedia* is an irreducibly spiritual phenomenon.

Acedia Has Especially Notable Psychological Manifestations

From Evagrius to Cassian, Gregory to Aquinas, *acedia* has maintained a special twofold effect: listlessness and restlessness. On the one hand, *acedia* evokes specific affects and behavior like sorrow, torpor, laziness (idleness), languor, lethargy, tepidity, and inertia. On the other hand, *acedia* evokes a certain restlessness: diversions (idleness), unwillingness to work, roaming of the mind on vain or trivial things, procrastination, and boredom.¹⁶

This latter effect of restlessness, or busyness, should not be mistaken for productive busyness.¹⁷ It is characterized by a deep, inarticulable aversion to the meaningful, spiritually-imbued work of the cloister, in favor of other tasks

that either are not as urgent, are not as important, or are not the task given to this individual monk. Whereas the first effect produces sorrow, this latter effect of restlessness may result in activities that are *entertaining*, or, as we would say in English, *diversions*.¹⁸ This entertainment, however, is not lasting. Instead of gaining consolation by visiting the brethren, as Evagrius (1990b, 12) writes, the monk is weakened all the more by this very supposed remedy.

No amount of rest or frivolity will ever deeply satisfy the person plagued by *acedia*, since, as we saw, *acedia* is irreducibly spiritual and its roots lie much more profound than where temporary distractions can penetrate. That must be kept in mind even as we acknowledge that *acedia* characteristically manifests psychologically as either listlessness or restlessness.

Sloth's Lost Familiarity in Recent Times, which Coincides Historically with the Advancement of Psychiatry

After the Scholastic period, i.e. from the 13th century onward, the vice of *acedia* would reemerge periodically as an object of practical devotional interest, or as an item of theological study within the larger framework of virtues and vices, and emphasis was—though not always—typically placed on *acedia*'s external effect of laziness and slothfulness (to the neglect of its other effect, restlessness). Wenzel explains,

The shift from a state of mind (*taedium*) to external behavior (*ydelnesse in servitio Dei*) pervades and informs the entire popular image of *acedia*, which emphasizes, not the emotional disorientation of disgust for the divine good, but rather the numerous observable faults which derive from such a state. (1960b, 88)

So even at this early point in history, we start to see a diluting of the old capital Sin—from its twofold effect to a single effect, laziness, from a focus on internal character and emotional disposition to external acts.

Over time, the capital vice of *acedia*, *de dicto*, would be more or less forgotten. When sighted, one might recognize what the thing is, yet we would have no name for it. It is perhaps easy to understand why, since *acedia* is, after all, very difficult to identify in a person. As a nameless vice, it creeps in slowly and unseen. Boudon (1683, 337–338) does not use the term *acedia*, but his description is vividly similar:

The venom of this vice consists of numbness, which sinks into the senses, by which the soul is made to slumber and remain in an idle state ... It is recognized quite late ...[and] almost no one knows it, because it does not lead directly to evil. (see also Surin 1829, 102–103)

All the while, it seems a good number of us can recall having “had something of this vice, as all men have it, being a strong general malady.” (Surin 1829, 103)

In the 19th century, Søren Kierkegaard’s character Judge Wilhelm in *Either/Or* (1987, II, 185) was familiar with the old deadly Sin, as such, mentioning it in his diagnosis of *A* the aesthete:

Nero’s nature was depression [*Tungsind*]. In our day, it has become somewhat prestigious to be depressed [*tungsindig*]; as far as that goes, I can well understand that you find this word too lenient; I hold to an ancient doctrine of the Church that classifies depression [*Tungsind*] among the cardinal sins.¹⁹

Unfortunately, the Hongs’ translation, though it is the standard translation today, renders the Danish *Tungsind* (literally, *heavy-minded*) as the more loaded and presuming term *depression*. Kierkegaard, of course, did not use the term *depression*, which would not have been in common usage at that time, but neither did he elect for the contemporary Danish word *Melancholi*,²⁰ opting instead to give a descriptive and general label of *heavy-mindedness*. So it is a mistake to identify Kierkegaard’s usage of *Tungsind* with our notion of *depression*. This concern aside, it is clear that Kierkegaard has in mind—by having some obscure, inarticulable notion in the mouth of Judge Wilhelm—both the vice of *acedia* and Romanticism’s melancholy, the latter of which is seen as *somewhat prestigious* to have, and the former of which is undesirable. By the end of the 19th century, from a psychiatric perspective, *melancholy* had become virtually synonymous with *depression*.²¹ While the complicated relation of likeness between *acedia* and a melancholic disposition was indeed not lost on the melancholy Dane, *acedia* has come to be misunderstood by more recent authors.

Attempts to Delineate the Relationship between Acedia and Depression in Recent Scholarship: Psychiatry, Philosophy, Theology

We turn now to some recent attempts to specify the relationship between *acedia* and depression; the results are, as one might expect, a mixed bag. I shall take these in order roughly from the most grievously mistaken to those that are more delicately honest. It will turn out that any honest, rigorous account of *acedia*, let alone any comparison of depression to *acedia*, must be undertaken with careful nuance and distinctions which preserve the integrity of *acedia*’s spiritual reality while respecting its psychosomatic reality.

In a short article Mark D. Altschule²² (1965) traces what he considers the visible, linear development of *acedia* from a deadly sin to a psychiatric disorder, but in doing so, he seems to neglect the importance of *acedia* entirely as a sin. Altschule rejects the notion that *acedia* is a sin at all, stating laconically, without any sense that what he is saying is controversial, that “according to Cassian, feelings of anger, *acedia*, and depression were deadly sins; however, today they are regarded as psychiatric symptoms.” (1965, 117) This “we now know” (Plantinga 2011, 307) posture²³ in the spirit of Enlightenment progress, as old theories come to be replaced, and we come to know better, is frequently proven right. However, sometimes the attitude is a subtle mask for the “uncritical acceptance of the intellectual climate common to our own age.” (Lewis 1955, 207)²⁴ To be fair to Altschule, we shall look at the support he offers to determine whether this posturing is warranted.

As support, Altschule points to two other instances in which he claims that psychiatric understanding gradually replaced a sin paradigm for explaining human action:²⁵ witchcraft in the 16th century and insanity in the 19th century.²⁶ However, these are both highly dubious cases of theory replacement. First, Altschule points to “a few sixteenth-century writers” who recognized that “witchcraft was a manifestation not of sin but of mental illness.” (1965, 117n) He does not mention these writers by name, but he gestures in a note towards Richard Hunter and Ida MacAlpine’s *Three Hundred Years of Psychiatry* (1963). Of course, the witchcraft to hysteria and overreaction is well-known. What Altschule misjudges is what difference this makes to a sin paradigm for explaining human action. It is not a mark against a sin paradigm *in toto* to say that level-headed contemporaries were offering better alternative explanations for alleged witchcraft behavior. Take, for example, Reginald Scot’s “Not Witchcraft But Melancholie” (1584),²⁷ in which Scot offers melancholic behavior—understood broadly—as a reasonable explanation for producing some of the behavior associated with accused witches.²⁸ Even while offering this alternative explanation—and others, such as “coosinage,²⁹ dotage,³⁰ and poisoning” (1584, 11)—Scot nevertheless maintains the reality of sin and the supernatural.³¹ If one looks closer, one can see that Scot’s work is not so much a denial of the reality of witches or witchcraft; it is a reasoned censure upon (1) the guessing *proofs* and presumptions (2) by disreputable folk (3) on wicked evidentiary grounds.³²

More importantly, it is clear that Scot also still assumes, on the whole, a sin paradigm for explaining human action. Those who visited witches to seek counsel were guilty of idolatry,³³ because it was a sure sign that such individuals believed witches to possess certain supernatural powers³⁴ reserved only for God.³⁵ Therefore, in fact, Altschule is wrong if he is intimating that Reginald

Scot thought that “witchcraft was a manifestation not of sin but of mental illness.” (1965, 117n) Scot thought we could explain witchcraft behavior by intentional and malicious cozenage, or deception, just as much as by the melancholic or strange behavior of “poore ... old women, which are themselves deceived.” (1963, 33) Furthermore, Scot rightly thought this melancholic possibility was consistent with and did not undermine a sin paradigm for explaining human action.

As for his second point, Altschule (1965, 118n) points to yet another terrible example of, allegedly, psychiatric understanding replacing a sin paradigm: 19th century psychiatrists who gradually began to realize that it was “mental disease [that] caused what at that time was often called sinful behavior”—for example, Feuchtersleben, in his *Principles of Medical Psychology* (1847), stated that in insanity as in sleep ‘the old Adam’ appears. However, Feuchtersleben is in no way suggesting that mental disease is the superior explanation for what was once thought a sinful behavior. Feuchtersleben’s quote appears in the context of a broader discussion concerning the nature of dreams, not insanity, as Altschule claims. Moreover, *pace* Altschule, Feuchtersleben’s concern is well-placed. Feuchtersleben first acknowledges that very often dreams are not reliable: “It is evident that the understanding, fettered in dreams, can give no instruction to the understanding when unfettered.” (1847, 166) For example, it is foolish for “a general to abandon a good position because he has had an ill-omened dream.” (1847, 166) On the other hand, he continues, sometimes a man’s dreams can supply him with information about himself.

But that dreams may, nevertheless, become psychologically and even ethically of deep importance as respects an individual, follows from the above-mentioned power of obscured ideas. Through this power, dreams may give a man historical information respecting himself, and hence, according to a favorite expression, “he may divine like a prophet looking backwards.” As when the sun has gone down, the countless stars, not visible in the daytime, appear on the dark ground of the firmament, so, at the call of fancy, the forgotten images of bygone days rise up and show the mind its former shape. This observation likewise points to the delicate affinity of dreams with pathological states of mind, where, too, as it were, ‘the old Adam’ appears, and is in every sense interesting to the psychological physician (1847, 166)

Some of this self-insight is of immense psychological and ethical importance; Feuchtersleben uses ‘the old Adam’ to refer to original sin, or a human’s (Postlapsarian) natural propensity to be seduced away from the good. Nowhere does Feuchtersleben suggest a biocentric model or disease paradigm should replace this former way of thinking. If anything, his response

here indicates that he considers medical science to be consistent with a sin paradigm—or, at the very least, consistent with the denial of materialism, as he explicitly states earlier.³⁶

Not only are Altschule's supporting examples of purported theory replacement bereft of any real substance, but Altschule, in the remainder of his paper, also gives us no other reason to think that *acedia*, once a deadly sin, is now merely a psychiatric symptom. He claims that "the condition [*acedia*] came to be considered merely a subdivision or a variety of depression", saying further that "Depression was, of course, another of the deadly sins" (1965, 118), but this is untrue. To conclude something this extraordinary, Altschule would either have to have committed eisegesis or to have read a bad translation. More specifically, he claims, "the writings of ... Aquinas included this definition of *acedia*." (1965, 118) Thomas never uses any variant of the word *depression* to define *acedia*. He uses "*aggravatio animi*" (2010, I-II.37.2), the weighing down of the soul, and "*tristitia aggravans*" (2010, I-II.35.8.arg3), a sadness which weighs down. However, Thomas himself says that he is using this kind of *depression* only metaphorically, as when he compares love to heat, or pleasure to being widened.³⁷ In any case, Thomas certainly could not have had the psychiatric concept of depression that Altschule had. While we can admire Altschule's pioneering spirit on this topic, we cannot ignore that much of his commentary on *acedia* is merely misguided. Ironically, what he (rightly) accuses Petrarch of, Altschule falls victim to himself: "solipsistic misinterpretation of the meaning of *acedia*." (1965, 119)

Marcia Webb³⁸ (2017) also recognizes some similarities between early conceptions of *acedia*, which associate the sin closely with *tristitia* [sorrow], and the contemporary psychological disorder of depression. However, Webb rejects those associations of *acedia* with sorrow, let alone any association of *acedia* with depression, because, she reasons, it causes harm and perpetuates the stigma associated with mood disorders. Webb is willing to grant that *acedia*'s other features—restlessness, spiritual apathy, boredom, sluggishness—may have legitimate application in contemporary culture, but she explicitly rejects *acedia*'s connection to sadness.

Webb offers at least two reasons for this rejection. First, she thinks that there is so much conceptual confusion about the nature of *acedia* that this makes its purported connection to sorrow tenuous; if it is tenuous and if we have countervailing reasons to reject it (e.g. its harmfulness), then, *ceteris paribus*, we should reject this connection. Second, Webb thinks there are little theological or biblical grounds for considering sorrow to be sinful. In response to the first concern, I must point out that, while there is variation in the way authors through the centuries have conceptualized *acedia*, this does

not imply any great disunity or confusion about what *acedia* is. Moreover, to support this charge of conceptual confusion, Webb offers shoddy evidence, quoting at length a 14th century confessional prayer of *acedia*, then remarking that it is a *haphazard* collection of minor offenses: neglect in prayer, failure to rebuke one's wife, and indulgence in checkers, among other things (2017, 76–77). She concludes that this is evidence for *acedia*'s "confused and convoluted history." (2017, 79) However, Webb fails to note that this genre of literature, penitential and confessional formulas (see Wenzel 1960b, 83–84), rather than being a conceptual account of *acedia*, is intended to function as an inventory of specific acts of sin under kinds of sin. These petty offenses, trivial as they seem, do nothing to confuse the concept of *acedia*; instead, they are given as practical examples of *acedia*'s application. Furthermore, the excerpt she quotes unsurprisingly includes other attributes of *acedia*,³⁹ but she does not take issue with these or propose that we reject these as veritable attributes of *acedia*. By parity of reasoning, if we reject the one attribute, sorrow, we should reject the other attributes, such as slothfulness and restlessness, for the same reason. Alternatively, we should reject neither, which is the better option, given what we have said about the genre of confessional formulas.

For Webb's second concern, she notes that not only does Christian Scripture contain precepts to love and comfort those who mourn, who are weary, and so on; but also the term ἀκηδία is found nowhere in the Greek New Testament (2017, 76). Webb either does not notice or coyly withholds the fact that Wenzel (1960b, 6–7), whom she cites for this fact, also tells us, in the very preceding paragraph, that the term occurs nine times in the Septuagint, a standard Greek translation of the Old Testament. In any case, it seems that much of what is driving Webb's aversion to associate sorrow with *acedia* is a misunderstanding of what these authors mean by *sorrow*. Taking Aquinas, for example, he defines *tristitia* as a species of *dolor* (pain). *Dolor* manifests when two conditions meet: (1) the conjoining of something wrong [to oneself] and (2) the perception of this conjoining (2010, I-II.35.1.co). *Tristitia* is a specific kind of *dolor* that is caused by an interior apprehension on the part of the intellect or the imagination (rather than by exterior sensory perception) (2010, I-II.35.2.co). So *tristitia* is, very generally, just the essential cognitive awareness that something terrible has met with us. As for *acedia* (*qua* passion), it is a specific kind of *tristitia* where "the mind is weighed down so much, that even the limbs become motionless." (2010, I-II.35.8.co) That would appear to describe a weariness or sluggishness, such as when we become aware of all the significant burden of work we have to do. This slothfulness does not seem like sorrow, but in Thomas's technical sense of *tristitia*, it is.

There are yet other authors who have handled the relation more delicately, although space prohibits discussing each one in much detail. Robert Daly's⁴⁰ (2007) concern with the recent discussion on agential freedom in depression leads him to argue that *acedia* is not identical to depression. What Daly gets right is that, yes, *acedia* is a condition for which one is culpable, whereas depression, commonly understood, is not. While this is enough to say they are conceptually non-identical, we might question the received wisdom of depression's non-culpability. By this, folks usually have in mind *direct* culpability, and in this they are right, but it does seem plausible that one could, in some cases, be *indirectly* or partially responsible for his depressed condition.⁴¹ Another author, Jennifer Radden⁴² (2002), acknowledges that *acedia* is a "disorder not of the body but of the soul" (2002, 70), thus giving due import to its status as a spiritual affliction, yet she strangely situates "Cassian's discussion of melancholy" (2002, 69)—not *acedia*—alongside other historical authors in her history of melancholy.

Perhaps most accurate is Stanley Jackson⁴³ (1981), who recognizes the real complexity of *acedia* and the subtlety of its conceptual evolution from the monastics to the present day. Nevertheless, Jackson overlooks or omits some essential features of *acedia*. He seems to conflate Aquinas's important distinction of *acedia* as a passion and species of *tristitia*, on the one hand, with *acedia* as a cardinal Sin, on the other hand (1981, 178). Also, while Jackson notes *acedia*'s apparent connection to idleness in work (1981, 174), he does not explain *why* this is important, and this is a critical omission. No mere historical accidental association, at *acedia*'s center, is an aversion to vocation (calling, *vocatio*), whether this is the spiritually imbued, meaningful work of the anchorite's cell or it is the right relating to and being drawn to union with God as we see in Thomas's writings.

What Is the Relation of Acedia to Depression?

As I have noted from the outset, a satisfying answer to this question requires distinguishing between (1) the concept of *acedia* and (2) an instance of *acedia*—and likewise for depression. Recall my two theses, first, the concept of *acedia* is not identical with the concept of depression; and that, second, it is possible that an instance of *acedia* could be coextensive with an instance of depression, in whole or in part, such that one could easily be mistaken for the other. We recall, importantly, that we are assuming here a descriptivist understanding of depression as represented in the DSM.⁴⁴

The first thesis is easy enough to see. The concept of *acedia* is not identical with the concept of depression since they do not contain the same descriptive

information.⁴⁵ It is likely why most writers have not taken a strong position of strict identity on the matter. Indeed, Daly (2007, 45) writes, “Any thesis that simply identifies *acedia* with melancholia or depression is not credible.” A hundred years prior, in 1908, the Rev. Charles Taylor writes, “To replace the complex acedy by sadness or sloth is to evade a difficulty.” (I, 66) If we assume the APA’s DSM descriptivist account of depression, which is silent on the matter of etiology, we end up with distinct (i.e., non-identical) concepts: because, after all, the Desert Fathers, Scholastics, and spiritual writers were far from silent about the etiology of *acedia*. Plus, however one comes to acquire or be in a state of *acedia*, it was never regarded as merely a set of psychological and somatic symptoms, as a descriptivist would write it up. No, an instance of someone afflicted by *acedia* was viewed through the theological lens of (monastic) Christianity. So the two concepts are not the same, and thus what they describe may be entirely different goings-on.

That, of course, does not rule out the possibility that the two concepts might operate as different terms that, at times, pick out the same token instance. That leads to my second thesis: that an instance of *acedia* can be, sometimes, coextensive with an instance of depression, where an instance of one might be an instance of the other. That is, despite using different descriptive information (i.e., diagnostic symptoms), each term may refer (roughly, i.e., in whole or part) to the same object. That is more or less the way synonyms work (*frightened*, *afraid*), how translations work (*water*, *l'eau*), and how the genus-species relation works (*colored*, *red*).

Since, however, the terms *depression* and *acedia* function more like definite descriptions than rigid designators,⁴⁶ the problem is a little more complicated. While a rigid designator will invariably refer to the same object, and while an object can have multiple names rigidly designating it (e.g. Hesperus and Phosphorus), definite descriptions may or may not always pick out the same object. Take, for example, these two definite descriptions: *the United States president* and *the leader of the free world*. While they may at times designate the same individual, it is certainly not necessary that they always do so, like the latter, while it has sometimes designated the former, it may also genuinely designate—at various times, past, present, or future—some other head of state (though presumably not two individuals at once). Moreover, these designations are not arbitrary, since both descriptions have determinate content that either applies to an object or does not. I contend that, sometimes, both descriptions apply to the same object.

The matter complicates by the fact that we are dealing not with an object like a human person, which we can easily see and identify, but with an object that is a state of affairs, diachronically continuous yet seemingly ephemeral

when it comes to identifying and naming. Let us call this state of affairs one's *condition*. I do not mean the having of a specific condition or other, as when one has bronchitis, for instance; I mean, instead, the condition of, or current state of, one's mental states, affects, neurochemistry, dispositions to interact with the world, and so on. Besides, the *having* of a *condition* of the former sort is inexact, although a common way of speaking about depression, since depression is not like a bacterium, virus, or infection. Of these we might say (only when using shorthand) that an individual has *E. coli*,⁴⁷ for instance; but if we wished to be more precise, we would say that he *has* in his possession or his body a *specific strain or instance* of *E. coli*, for example: an instance (e.g. ~50 CFU, or *colony forming units*) of *E. coli* O157:H7 (Lim et al. 2010, 3). That is because the former is a kind and the latter is an instance of that kind. We can usually get away with such verbal shorthand, but sometimes it goes awry.

This is all the more apparent when we are discussing mood disorders. When we say that a person *has* depression, there remains a looming ambiguity. For this could mean that a person *possesses* either (1) the kind itself of depression, or (2) an instance of that kind,⁴⁸ or (3) a particular state of affairs such that it can genuinely be called or labeled (an instance of) depression. It is no small matter since each claim says something different about what the individual *possesses*. The first option is nonsensical since it suggests that a person uniquely possesses the entire kind to himself,⁴⁹ while the second, as I said above, is a common yet inexact way of speaking about depression; the third is ideal since it is a more exact way of speaking. Note that we do not get this third option with communicable diseases, bacteria, viruses, because in those cases, an individual does *possess* an instance of the kind in the form of a particular strain of the foreign substance that, once external to the body, has entered the body. This is not the case with depression. Therefore, when we say a person *has* depression, what he possesses is a specific state of affairs (i.e., the current state of his mental states, affects, neurochemistry, dispositions to interact with the world, and so on). Using shorthand, we can call this state of affairs his *condition* (used in the spirit of option three, rather than option two). Thus, one's condition, used in this sense, need not be pathological. One's condition might be such that we may call it normal sadness, or it might be such that we ought to call it depression. Another upshot of using this third option is that if theoretical concepts come to change, one's condition will not.⁵⁰

This groundwork prepares the way for us to see how an instance of depression can also be an instance of *acedia*. We begin with the condition a person is in, the current state of his mental states, affects, neurochemistry,

dispositions to interact with the world. Suppose that these are such that we can correctly call his condition (an instance of) depression. If the person has come to be in his state via some spiritual etiology, and some of his symptoms are the same as those of *acedia* as chronicled by the spiritual writers, then we can correctly call his condition (an instance of) *acedia*. Thus, our person has both an instance of depression and an instance of *acedia*⁵¹ (or, we might say—though we would be going off-script from the DSM’s descriptivism—that our person has a *religious kind, or form, of depression*, assuming by this that we incorporate into that term a robust understanding of *acedia*). Of course, I point here only to the cases in which they overlap. There are presumably several cases where they do not, where there is an instance of only one and not the other. We would need empirical data to determine the frequency of occurrences of each.⁵²

Finally, recall Webb’s concern with the dangers of associating sorrow with sin. This had led her to deny that sin causes psychological disorders categorically. This concern resonates with us, and we can see the harm it can cause. While well-intentioned, however, this categorical exclusion is much too hasty, for it may not be valid. Webb is correct, citing Daly, that we cannot “simply identify” (2017, 77) *acedia* with depression (by this, I assume she means we cannot identify the concepts). However, there are many relations beyond the strict identity that Webb fails to consider. For example, we may have both an instance of depression and an instance of *acedia*, a possibility which we have described above. Alternatively, at the very least, we may have an epistemically underdetermined situation. Even if sin does not cause psychological disorder properly, we can certainly admit that it can cause symptoms that mirror psychological disorder. Then, given that psychological disorders are notoriously difficult to conclusively diagnose, along with difficulty inherent in discerning the etiology of a given set of symptoms, we cannot categorically rule out the possibility that a person’s condition is an instance of *acedia*.

Conclusion

We have argued that while the concept of *acedia* is not identical to the concept of depression, the two may nevertheless overlap in their instances. Many concerns remain in light of what I have argued, most glaringly those involving *how* to diagnose *acedia*, how to address and treat cases in which both are present, and what potential harms this view may evoke. With space prohibiting a full discussion, here we may catalogue some practical implications briefly this has for clinicians who diagnose depression (and spiritual leaders who counsel on *acedia*), and for a proper theology of psychological disorder

among laypersons in the church. (1) It brings into relief potential (indirect) agential culpability for one's depressive-like symptoms (assuming that that person's real diagnosis is instead *acedia*, or more appropriately speaking *acedia*, or an instance of both). You may be wondering—rightly—how we are to know when and how often this parenthetical clause gets triggered. The truth is, more often than not, we do not know. Since it is so difficult in practice to discern, this (2) epistemic opacity forces us to be cautious and kind in going about making both lay-judgments and any formal judgment (e.g. diagnosis). That, I anticipate, should steer off many potential harms or abuses we fear, if we maintain a severe epistemic humility about whether a particular person has depression or *acedia* or both. That goes not only for those in lay contexts but also for religious workers and mental health workers, who would benefit significantly from increased communication and translation between their disciplines. Further, depending on what one's condition truly is, we may be invited to (3) recast how we interpret our suffering in light of our condition or symptoms. Depending on what one's condition truly is, there may be no difference in phenomenological experience or the actual badness of the suffering, but there will no doubt be a difference in how one conceptualizes the suffering, and perhaps also in how one comprehends, accepts, and resolves to move forward in the suffering. Finally, (4) it prompts us to reexamine the lingering issues of pathologization and the pharmaceuticalization of depressive-like symptoms. On a more practical level, for instance, we need to wrestle with questions like whether someone who is ostensibly experiencing *acedia* should be treated with antidepressant medication. These and many other nearby issues must be the subject of further rigorous and charitable thinking.⁵³

Notes

1. Robert L. Spitzer says as much from his time as chair of the Task Force on Nomenclature and Statistics (later renamed Work Group to Revise DSM-3): “Our advisory committee on affective disorders ... took an atheoretical descriptive approach—one that does not prevent anyone from further speculation or classification on the basis of presumed etiology.” (1984, 547) I have doubts about whether these descriptions are truly *atheoretical*. Janet Stoppard (2000) shares doubts specifically about the DSM-4, arguing that the definition of *mental disorder* is not *purely descriptive* and *atheoretical*, as is usually claimed. See also Radden (2017, 99 n.30), as well as Horwitz et al. (2016), for more on this descriptivist approach.
2. Possible etiologies or causal origins of depression might be: biological (familial and genetic influences, endocrine system, circadian rhythms, neurotransmitters), psychological (stress and allostatic load, negative ideation, learned helplessness), social-cultural (marital relations, lack of social support). This list is certainly not exhaustive (Barlow et al. 2017, 238–250).

3. Or, we could say, between a description of the thing and the thing itself.
4. Below, I return to a weaker version of this question, namely the qualitative similarity between the concepts of *acedia* and depression.
5. In Irvine's words, "It is my argument that the fragmentation of the subject occasioned by the new phase of modernity (sometimes called 'high modernity' or 'post-industrialism') *lies on a continuum with, but is qualitatively different from*, earlier states of subjective suffering." (1999, 7, emphasis added) These "earlier states of subjective suffering"? "Acedia, Tristitia and Sloth", as his title says.
6. Jehl (2005, 458) writes that *taedium vitae* and *tristitia* were "absorbed into the tradition of the concept of melancholy." Jehl's assessment seems to be merely descriptive of what has happened, but not normative.
7. The principal early theological and philosophical thinkers and texts where we first find *acedia* are: Evagrius of Pontus (1990a, 1990b), John Cassian (1894a, 1894b), Gregory the Great (1844), and Thomas Aquinas (2003; 2010–2011).
8. To the monastic type, we can assign Evagrius and perhaps Cassian. Gregory the Great, himself a former monk—"the great pope who never lost his nostalgia for the monk's solitude" (Wenzel 1960b, 23)—fits somewhere in between the monastic type and the Scholastic type. Thomas Aquinas's treatment certainly is assigned to the Scholastic type, along with other *summae theologiae* of the 13th century. What is called the popular type is not merely the common or popular notion of *sloth*—though it indeed includes that—it is also marked by an emphasis on external, practical signs and effects. It is called *popular* in the sense of *populus*, since this kind of *acedia* was found in works written for laypersons, especially from the 13th to the 15th century, with emphasis on the practical religious life: catechetical handbooks, questionnaires, sermons, devotionals, confessional formulas, and encyclopedias. "This emphasis [on external faults as opposed to abstract states of mind] is so prominent as almost to determine the essence of the vice in the popular image after 1200; but it had occurred already earlier, in the works written for laymen during the eighth and ninth centuries." (Wenzel 1960b, 177) Some of these, like questionnaires and confessional formulas, can be seen as literary genres in their own right (see Wenzel 1960b, 83–84).
9. For an excellent conceptual history of *acedia*, Siegfried Wenzel's book (1960b) and dissertation (1960a) are frankly unrivaled for their scholarly depth, breadth, and integrity. Also of merit are Forthomme (2000), Nault (2005; 2006), Luciani-Zidane (2009), which concern *acedia* in particular, and Bloomfield (1952), and Newhauser (2007), which concern the Sins in general. See also chapter two of my dissertation (McAllister, forthcoming 2020) for a comparatively brief conceptual history of *acedia* and more on its relation to depression.
10. "[T]he *Collationes* [*Conferences*] treats of the monk's 'inner dispositions,' whereas the *Instituta* [*Institutes*] is concerned with the external regulations given to a [cenobitic] monastic community in need of a rule." (Wenzel 1960b, 22; see also Cassian 1894b, Pt. I preface).
11. As we are taught by Brother Lawrence, for instance. Outside of the religious life, one need only to think of C.S. Lewis's description in the sermon "Learning in War-Time" (2009), who likens the student to a priest: each has to undertake dreary, monotonous tasks which are far removed from, yet consistent with, the *telos* of his vocation.
12. "[I]f it is a question of the monastic life in general, *acedia* is not just one temptation among many, it is quite simply *the* temptation, the calling into question of one's entire

- existence, the major identity crisis, in which the very foundations of everything are severely shaken.” (Joest 2004, 144) It is the temptation for monastics, because in his day-to-day activities, the monk is starkly aware of God’s claim and calling upon his life, and no aversion to his day-to-day activities can easily arise to a doubting of the rationale behind the life he has undertaken. The general contours of *acedia*, however, can still be seen regardless of the believer’s vocation. The more aware an individual is of God’s calling on his life, the more deeply the effects of *acedia* can penetrate.
13. A word study in *Moralia in Iob* (1844) reveals that the English word *sloth* (in John Henry Parker’s 1844 English edition) is used as a fitting translation from at least six different Latin words: *torpor*, *pigritia*, *desidia*, *ignavus*, *hebetudo*, and *inertia*.
 14. According to Wenzel (1960b, 165), Ælfric characterizes this vice as “unwillingness to do any good.”
 15. Thomas’ proposal is a classic example of the Scholastic synthesis of disparate views. It is consistent with each of the previous views while offering a further nuanced distinction.
 16. Even if we do not know the newly coined word, we are all familiar with the idea of *procrastibaking*, doing anything (in this case, baking) to avoid the more important work we are supposed to be doing.
 17. Busyness, taken in one sense, can be considered an opposing virtue to *acedia*, so long as the work is important, meaningful, and tied to one’s spiritual vocation, whatever that may be. This virtue is present not only in Cassian’s remedies above but also is “fairly frequent in Middle English devotional literature and ... allegorical works and medieval drama. Even Chaucer follows this trend: ‘This firste stok was ful of right-wisnesse ... and loved businesse, Ayeinst the vyce of slouth, in honestee’.” (Wenzel 1960b, 89)
 18. The Romance languages preserve this connection even more clearly: such as *divertir* (Fr., Sp., Pt.), from *divertere* (Lat.), which can mean variously *to divert/distract* or *to entertain*; as well as the derived adjectives *divertente* (It.) and *divertissant* (Fr.), which mean *entertaining*, *funny*, or *amusing*. A similar etymological connection may be preserved in the word *lustig* (Ger., Swed.) for *funny* or *amusing*, in the words *lustig* (Dut.) and *lystig* (Dan.) connoting *merry* or *cheerful*, and in the now-obsolete Middle English word *lusty* for *pleasant*, *merry*, or *delightful*. That is to say, given the clear connection to its other meaning *lustful*, each of these iterations can suggest the mind’s fleeting away to pleasurable yet frivolous objects.
 19. See Kierkegaard’s 1839 journal entry, which directly touches upon this passage (1987, II, 381).
 20. See Ferrall and Repp (1843, 197), for a Danish-English dictionary from Kierkegaard’s time. Kierkegaard certainly knew the word *Melancholi*, as evidenced by a cursory search on <http://sks.de>, the Skrifter, the comprehensive and searchable online collected writings of Kierkegaard in Danish.
 21. Earlier periods in the history of psychiatry were limited in their nosologies, often using either of the general categories *mania* or *melancholy*, then specifying further from there. Thus *melancholy* was previously understood to encompass a wide spectrum of disorders, not only excessive or prolonged sorrow (see Hosack 1821, 58).
 22. Mark D. Altschule, M.D. (1906–1988) was a Clinical Professor of Medicine at Harvard. See Flanagan (1965a, 1965b) for direct responses to Altschule’s work of 1965.

23. Plantinga (2011, 307) comments upon this selfsame attitude: “A particularly charming phrase, here, is the obligatory ‘as we now know’; we were previously wallowing in ignorance and superstition, but now, thanks to science, we finally know the truth.”
24. Lewis (1955, 207) coins “chronological snobbery” as “the uncritical acceptance of the intellectual climate common to our own age and the assumption that whatever has gone out of date is on that account discredited.”
25. This includes human mental action (i.e., thoughts), as well as passions (emotions, feelings), though, technically speaking, a passion, since it is passive, is not properly an action.
26. Altschule’s wording is this: “The gradual process by which the concept of sin came to acquire psychiatric connotations.” (1965, 117n) But it is clear that he thinks that the sin paradigm for explaining human action has no place in psychiatry, saying “medicine does not concern itself with sin *per se*; accordingly, various items among those that an earlier age designated as sin might be regarded by a later era as either normal behaviour or neurotic or psychotic behaviour.” (1965, 118n)
27. Hunter and MacAlpine’s title for the excerpt from Scot’s original *The discoverie of Witchcraft* (1963). Among all the 16th century writers in this volume, which amounts to no more than twenty out of some 330 items total, this is the most obvious and plain example of witchcraft being subverted by melancholy or any other psychiatric concept in the 16th century. The only other entry which treats directly of witchcraft and melancholy is King James VI of Scotland and I of England’s *The Description of Sorcerie and Witchcraft* (1963, 47). For his part, those who insist on “attributing their [accused witches’] confessions or apprehensions, to a naturall melancholicque humour,... they fall finde that that will be ouer fhort a cloak to couer their knavery with.” (1597, 29–30) For any reasonable person can see that their symptoms differ: melancholics are subject to “leannes, palenes, desire of folitude: and if they come to the highest degree thereof, mere folie and *Manie*: where as by the contrarie, a great number of them that euer haue bene convict or confessors of Witchcraft,... some of them rich and worldly-wife, some of them fatte or corpulent in their bodies, and most part of them altogether giuen ouer to the pleafures of the flesh, continual haunting of companie, and all kind of merrines, both lawfull and vnlawfull, which are thinges directly contrary to the fymptomnes of Melancholie, whereof I spake.” (1597, 30).
28. Scot writes of “How melancholie abufeth old women”, saying “I meane not of coofening [cozening] witches, but of poore melancholike women, which are themselves deceived. For you fhall underftand, that the force which melancholie hath, and the effects that it worketh in the bodie of a man, or rather of a woman ... troubled with this difeafe, imagine manie ffrange, incredible and impossible things ...[such as] one that was in great perplexitie, imagining that his nofe was as big as a houfe.” (Scot 1584, 52–53)
29. Or *coosening art*, a now obsolete term for *cozen* (to cheat or defraud).
30. Most likely, in this context, meaning foolish talk associated with old age or senility.
31. Simply note Scot’s original (1584) title page, which cites 1 John 4:1, hinting at the rationale for his investigation: “*Beleeue not euerie spirit, but trie the spirits, whether they are of God; for manie false prophets are gone out into the world, &c.*”
32. Scot enumerates each of these three in the opening epistle to, incidentally, his “coufen” Sir Thomas Scot Knight, &c.: “*See first whether the evidence be not frivolous, & whether the proofs brought against them be not incredible, confifing of gheffes, prefumptions, &*

- impossibilities contrarie to reason, scripture, and nature. See also what persons complaine upon them, whether they be not of the basest, the unwise, & most faithles kind of people. Also may it please you to waie what accusations and crimes they laie to their charge, namely: She was at my house of late, she would have had a pot of milke, she departed in a chafe because she had it not, she railed, she curssed, she mumbled and whispered, and finallie she said she would be even with me: and soone after my child, my cow, my sow, or my pullet died, or was stranglie taken.*" (1584; see 1963, 32–33)
33. "Truelie I for my part cannot perceive what it is to go a whoring after strange gods, if this be not. He that looketh upon his neighbors wife, and lufteth after hir, hath committed adulterie [In the margin: 'To go to witches, &c. is idolatrie.']. And truelie, he that in hart and by argument mainteineth the sacrifice of the masse to be propitiatorie for the quicke and the dead, is an idolater; as also he that alloweth and commendeth creeping to the crosse, and fuch like idolatrous actions, although he bend not his corporall knees." (Scot 1584, 12)
34. "[T]hey can raife and fuprefse lightening and thunder, raine and haile, clouds and winds, tempests and earthquakes. Others doo write, that they can pull downe the moone and the starres ... that they can cure diseafes fupernaturallie, flie in the aire ... They can raife spirits (as others affirme) drie up springs, turne the course of running waters, inhibit the funne, and ftaie both day and night, changing the one into the other ... They can bring foules out of graves." (Scot 1584, 10)
35. "[N]either is there any mention made of these kinds of witches in the Bible. If Chriff had knowne them, he would not have pretermitted to invaie againft their prefumption, in taking upon them his office: as, to heale and cure diseafes; and to worke such miraculous and fupernaturall things, as whereby he himfelfe was speciallie knowne, beleaved, and publifhed to be God; his actions and cures confifing (in order and effect) according to the power by our witchmoongers imputed to witches." (Scot 1584, 11) Scot then doubles down, saying the mere belief itself is idolatrous: "In like maner I fay, he that attributeth to a witch, fuch divine power, as dulie and one-lie apperteineth unto GOD (which all witchmongers doo) is in hart a blafphemer, an idolater, and full of groffe impietie, although he neither go nor fend to hir for affiftance." (1584, 12)
36. In response to a charge that "the study of medicine ... favours a disposition to materialism," Feuchtersleben replies that this charge is "unjust". (1847, 8) "No one has more occasion than the physician, to recognise the power of mind and the perishable nature of matter; and if he do not attain to this recognition, the fault is not in the science, but in himself, in not having thoroughly studied it, for here, we may say as Bacon did of philosophy, 'when superficially studied it excites doubt, when thoroughly explored it dispels it'." (1847, 8) Sir Francis Bacon, whom he favorably quotes, was a devout Anglican.
37. "The effects of the passions of the soul are sometimes named metaphorically because of a likeness to sensible bodies, given that the movements of an animal appetite are similar to the inclinations of a natural appetite. It is in this way that intense heat (*fervor*) is attributed to love, being widened (*dilatatio*) is attributed to pleasure, and being weighed down (*aggravatio*) is attributed to sadness." (2010, I-II.37.2.co).
38. Marcia Webb has both a M.Div. theology degree and a Ph.D. in clinical psychology. She is presently an Associate Professor of Psychology at Seattle Pacific University.

39. “I have remained immobile in the early stages of goodness, and I have not progressed ... I have often given way to frivolous and empty thoughts, and have permitted my mind to wander in such things.” (qtd. in Webb 2017, 77)
40. Robert W. Daly, M.D. is Professor Emeritus of Bioethics and Humanities and Professor Emeritus of Psychiatry at SUNY Upstate Medical University.
41. We need only something like the following more general principle to be true, that one can, through actions for which he can be held responsible, contribute to his psychological distress or disordering to the point that he develops a diagnosable condition.
42. Jennifer Radden, D.Phil. Oxon. is Professor Emerita at UMass Boston.
43. The late Stanley W. Jackson, M.D. (1920–2000) was Professor of Psychiatry and History of Medicine at Yale University School of Medicine.
44. The problem might resolve itself more easily if we were discussing depression from a clinical perspective and permitted to hazard and employ different theories concerning etiology. We could, for instance, come away with a handy category of *religious depression*, which might be closer to *acedia*.
45. By Leibniz’s Law of the Indiscernibility of Identicals, $x=y \rightarrow \forall F(Fx \leftrightarrow Fy)$, if x and y refer to the same object, then x and y will not differ in any of their properties—it is somewhat strange to use *their*, since, in a case of numerical identity, there is only one object. Moreover, if there is some property that x has but y does not have, or vice versa (i.e., they are not qualitatively identical), then x and y are not the same object (i.e., not numerically identical). What goes for concrete objects also goes for abstract things lacking extension, like concepts or definitions. If two definitions differ in any respect, then they are not the same definition.
46. See Saul Kripke’s (1980) *Naming and Necessity* for the distinction between rigid designators and definite descriptions.
47. We would never say that someone has *the E. coli*. This awkward construction seems to connote a reference to the genus; our acknowledgment that this is an incorrect way of speaking, likely reveals that we are not claiming the individual owns a genus.
48. A person can indeed be said to possess a kind by having an instance of that kind. I can say here only that I believe this is yet another case of speaking loosely; however, it may be correct to speak this way in some cases, as when discussing certain properties like *red*. In some manner, the kind *red* is truly fully present in an instance of *red* (i.e., it lacks none of its brilliance, hue, and shade); though in another sense, it is also true that the kind *red* is not fully present in an instance of *red* (i.e., one instance of *red* does not account for the entire kind of *red*).
49. This seems strange whether it be understood on a Platonist-type view, since a thing participates in a Form but never fully appropriates it; or on an Aristotelian-type view, where, even though a substantial form may be fully present in a thing, one instance of a substantial form rarely ever (unless, perhaps, it is *sui generis*) accounts for the entirety of that *kind* of form.
50. For instance, S.T. Coleridge does not cease to have melancholy when that concept becomes outdated. Some might object that this approach is too *reductionistic*, but I prefer to say it more accurately captures what a person *has*. In any case, I am not opposed to using terms and labels like depression and *acedia*; this so-called *reductionistic* descriptive account would only be initial, a diagnostic first step before we apply our conceptual terms *du jour*. It is especially useful for comparing conditions across history and cultures.

51. I say *some* because it is reasonable to think, concerning both depression and *acedia*, that a person may present with only some of the characteristic symptoms and yet the corresponding term would still correctly apply. One certainly need not check off all the symptoms.
52. A certain stripe of Kierkegaardian might venture to say that all instances of depression are instances of *acedia*, since all of life is to be lived before God. However, that is a topic for another paper (1993, 124).
53. My special gratitude goes to C. Stephen Evans, Nick Colgrove, and Harrison Lee for providing me with a friendly conversation about these important topics. Also, I am grateful for the lively sharing and interaction with the participants of *The Faces of Depression in Literature* seminar at the 2019 ACLA National Meeting at Georgetown University, as well as the participants of the 2019 Annual Conference on Medicine and Religion at Duke University. Finally, I owe the editor of this volume, Josefa Ros Velasco, an enormous thanks for her gracious spirit and her vision, hard work, and ambition to see this project through.

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