

Depression as a Blocked Transition

A philosophical-anthropological model
on the loss of inner mobility.

Depression is often described as a loss of joy, drive, or hope.
Behind this experience opens a deeper question:

At what point does life lose its inner mobility?

Thoughts return
again and again to
the same place.

Exhaustion finds no
path into recovery.
Grief does not transform.

The next step
evades experience.

The Classical Paradigm

Missing happiness or defective mood.

“I am continuously sad.”

To become happy and high-performing again.

Eliminate the symptoms to return to the old state.

The Model of Transitional Capacity

Missing mobility and blocked dynamics.

“I cannot imagine that this state will ever transition into another.”

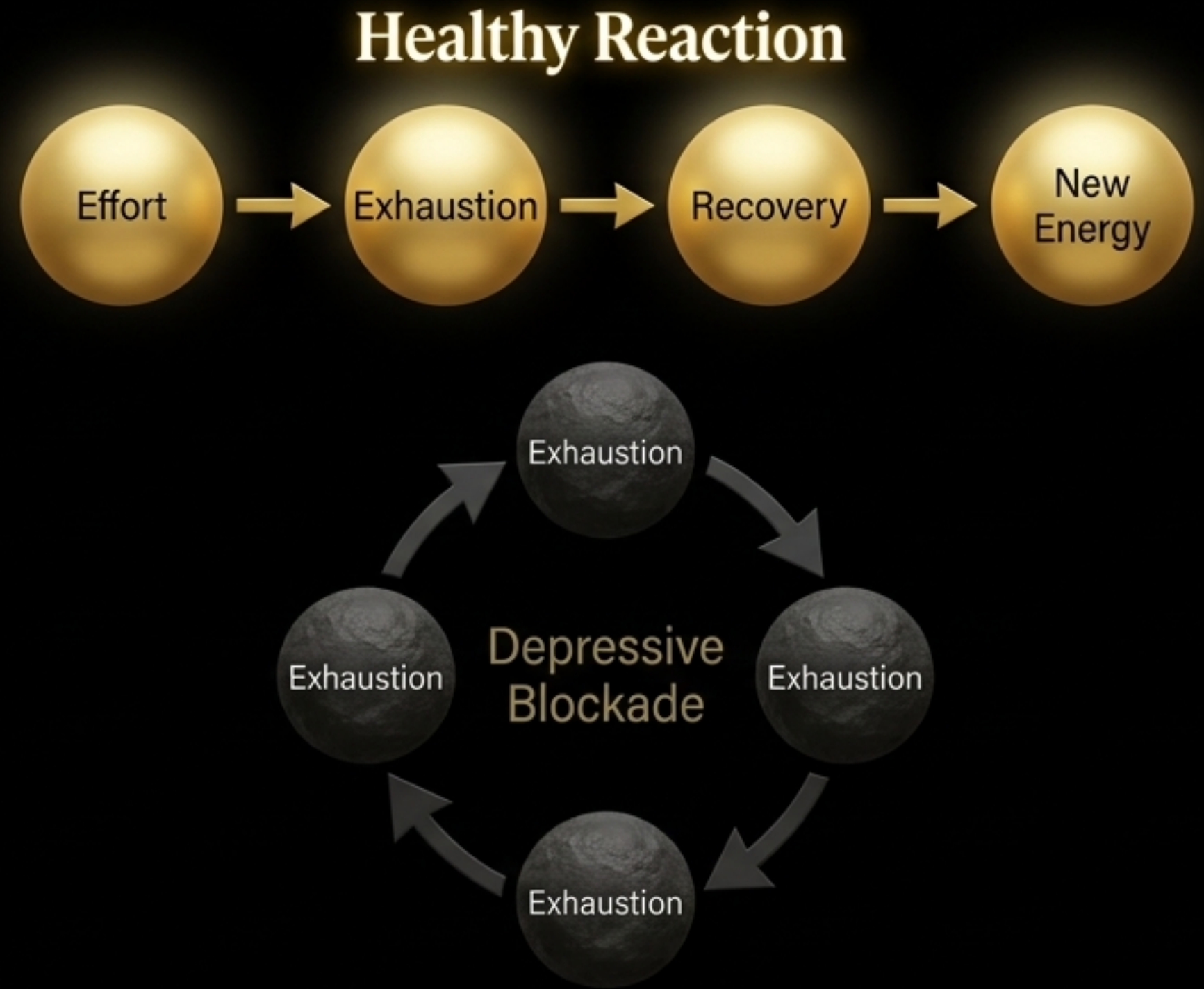
To enable the next achievable state change.

Restore inner mobility to find a next form of life.

When the Response Becomes a Standstill

Suffering is part of life.
Overwhelm leads to
exhaustion. It only becomes
problematic when a person can
no longer transition from this
response into a next state.

The inner cycle closes.



**Depression does not begin with suffering.
It begins where suffering loses its mobility.**



The Thunderstorm

(Tension without discharge)

Mental health is not the absence of tension, but the ability to transform it. In depression, the tension persists but never reaches discharge.



The Seed

(Loss of form and transformation)

A seed does not preserve itself by remaining a seed. Depression often acts like an arrested intermediate state: the old identity is exhausted, a new one has no shape yet.

The Collapse of Time

What is usually experienced as Yesterday, Today, and Tomorrow condenses subjectively into a single, repeating present.

The future hardly possesses the character of an open possibility. It feels like the mere continuation of what already is.

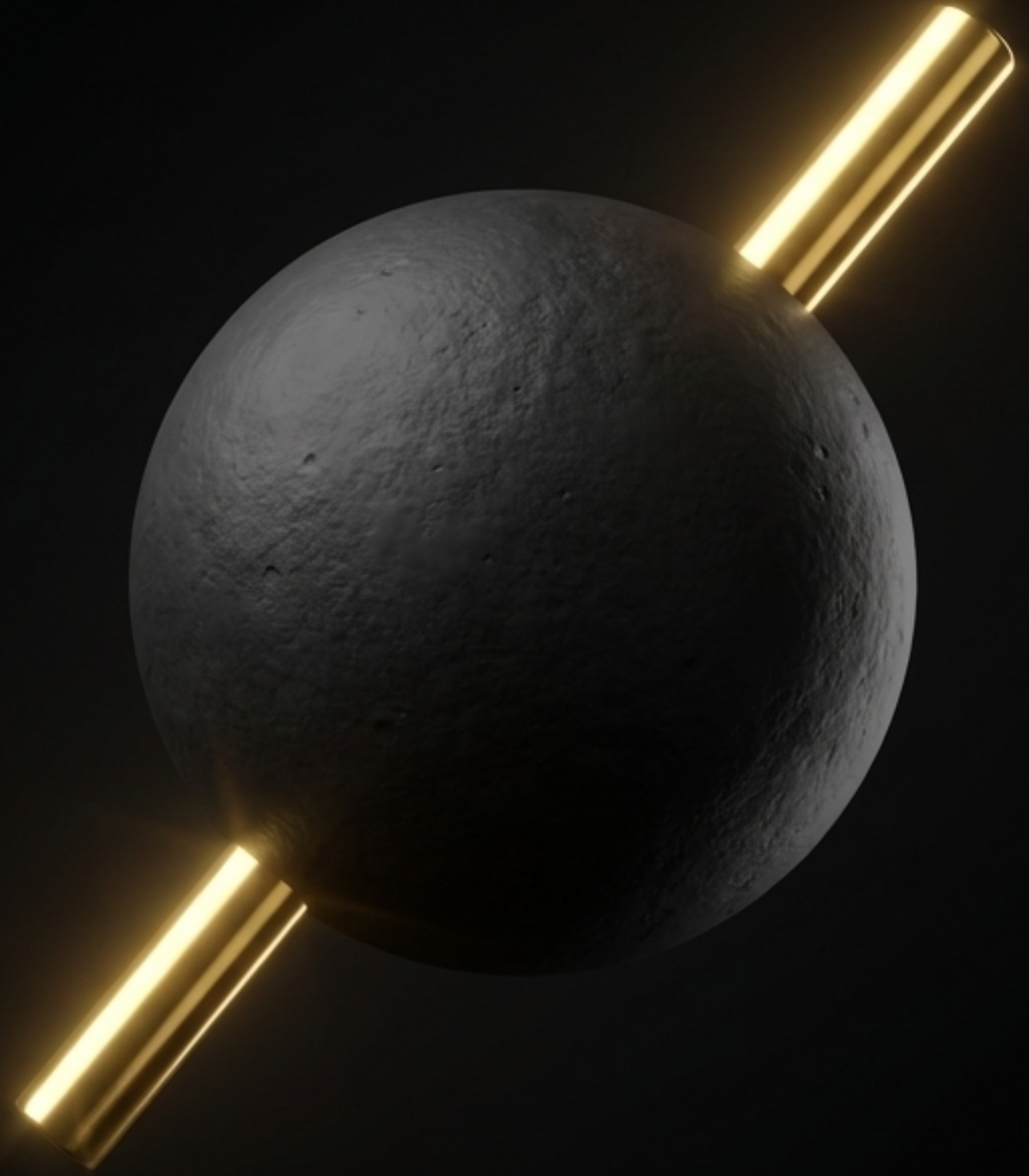
What does hope mean when the future can no longer be experienced as different from the present?



The Origin of the Model

“What underlying structure must remain invariable for continuous state transitions to be possible at all?” — Pierre Kuchebencker

This question does not originate from medicine, but asks for the foundation of the living: What must be preserved so that change can happen, without the person losing their inner cohesion?



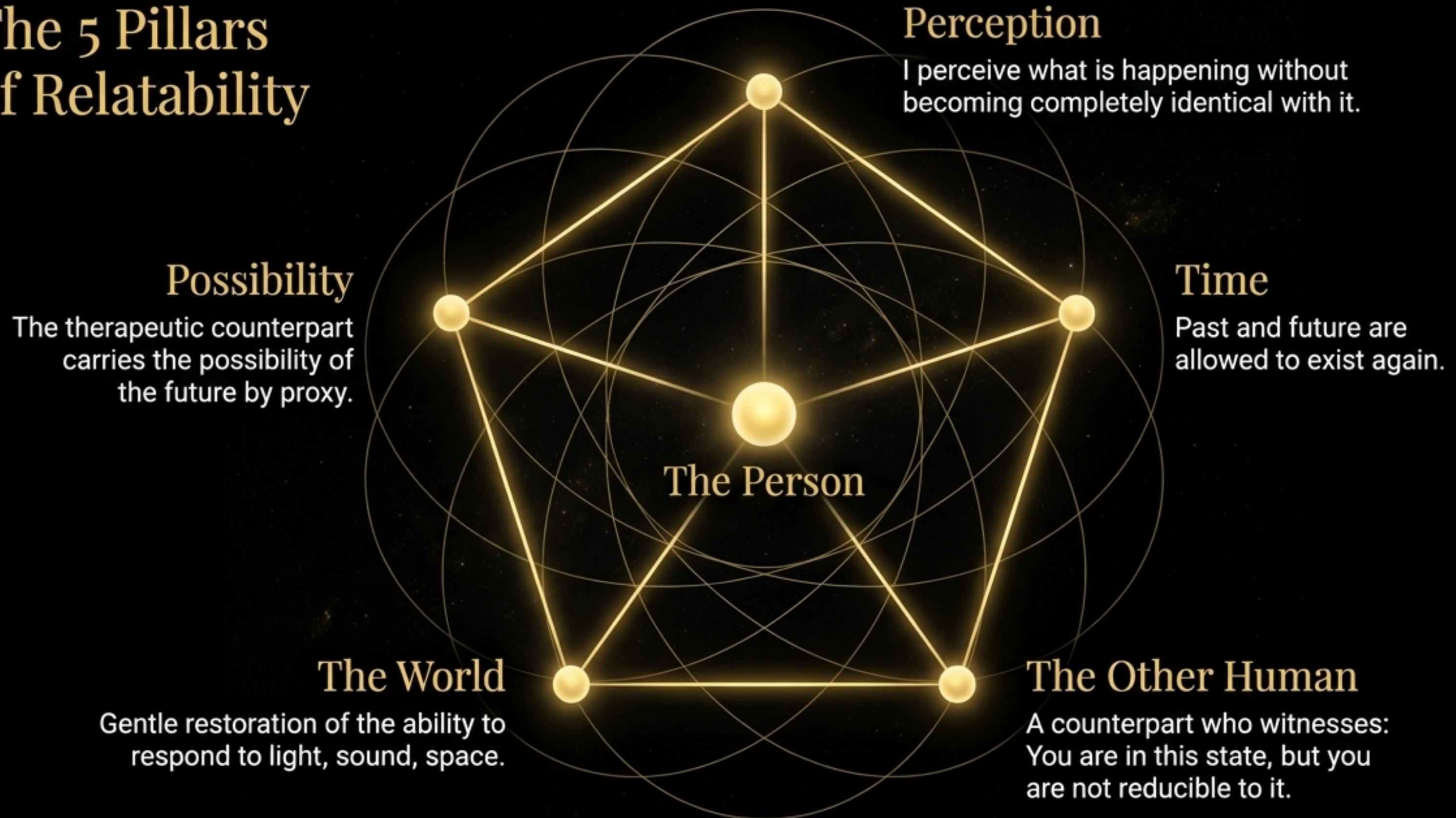
The Invariant Structure: What must remain?

When mood, performance, and hope break away, what must be preserved in a human being so they do not lose their connection to life?



*What must be preserved is a minimum of Relatability (Beziehbarkeit).
The person remains reachable and capable of responding –
even if this ability is temporarily barely perceptible.*

The 5 Pillars of Relatability



The Smallest Possible Transition

The first goal is not: “I have to become happy again.”
The goal is: Which transition is reachable right now?



From bed to a full-time job.



Laying → Sitting → Opening a window...

Not self-optimization, but self-relation. The question is not: Why can't I do this?
But rather: What conditions does my very next, smallest step require?

Rhythm Answers with Structure, Not with Meaning

Depression levels all differences — everything becomes equally heavy, equally empty, equally meaningless.

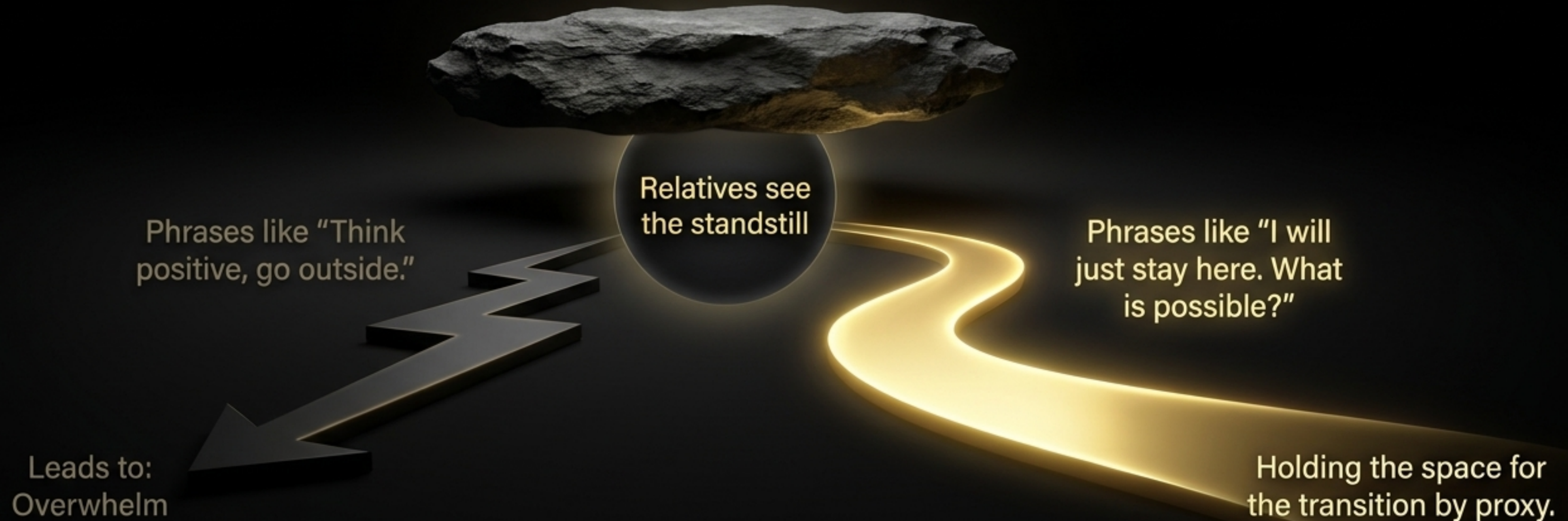
The Depressive Flatline



Rhythm is not significant as a duty. It is significant because it restores differentiable states: Now is this small segment. Then follows another. That is the beginning of transitional capacity.

The Shared Transition Space

Well-intentioned demands often presuppose the exact transitional capacity that is currently blocked. Accompanying does not mean moving the other person.



We don't have to solve all of tomorrow today.
We are securing the next step.

The Role of Professional Treatment



Psychotherapy

- Makes rigid connections mobile again.
- It investigates: Which conclusion is blocking the path?
- It opens up alternatives where only a single interpretation remained.

Medication

- These are not 'happy pills.'
- Given the right indication, they alter the physical-neuronal conditions just enough so that therapy, relationships, and the search for meaning become accessible again at all.
- They enable the first spark of movement.

The Absolute: The Person is Not the Illness

Depression is extremely real as suffering. Yet it does not exhaust the entirety of this human being.

The innermost essence — the Absolute — is neither damaged nor diminished by the illness.



What is being treated is not the core of the human being, but the blocked conditions that are burying the access to this core.

Healing as the Next Form

What seeks an answer in depression? Not the ultimate question of meaning, but a much more basal one: Is any transition still possible?



Life preserves itself through transformation. Its permanence is founded on the ability to carry its cohesion through every change.

Healing does not mean returning to an earlier form. The human being preserves their cohesion by regaining inner mobility in order to find a next form of their life.