

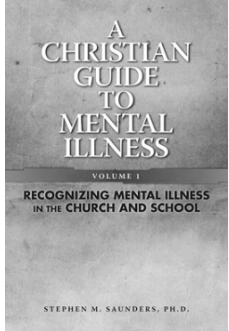
Mental Illness and Its Treatment

How should Christians understand?
How can we help?

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Marquette University

September 30, 2018

Based on recently published book



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Two stories

Nick
Annaliese

Moral of stories:

It is extremely important to recognize mental health problems and to respond in a way that is both compassionate and helpful.
Otherwise people continue to suffer.
Otherwise people might lose their faith.

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Outline of Presentation

- I. Basic information about mental illness
- II. The various mental illnesses
- III. Neglect, abuse and domestic violence
- IV. A proper Christian understanding
- V. A proper Christian response: Individual
 - A. Helpful conversations
 - B. "Mental health first aid" and "Mental health triage"
 - C. Finding good mental health professionals
 - D. Staying involved
- VI. A proper Christian response: Congregational
- VII. Post-Script

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Basic Information about Mental Illness

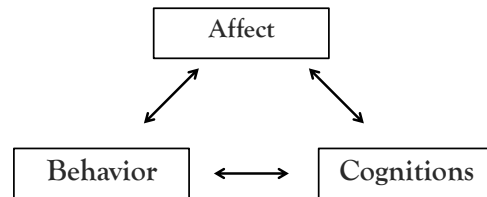
- What is it?
- How common is it?
- How bad is it?

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What is mental illness?
What is mental health?

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“The ABCs and Two Rs of Life”



(These happen within the person)

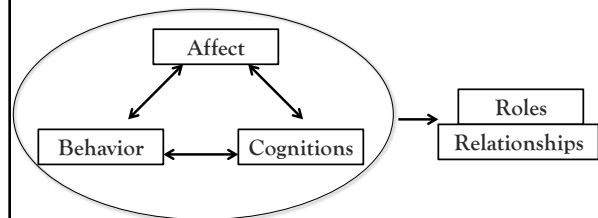
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“The ABCs and Two Rs of Life”

- **A**ffect is the way we feel
 - Both presently and over the long term (long term affect is called "mood")
- **B**ehavior is what we do, how we act, or how we behave
- **C**ognitions are any mental activity
 - Perceptions, memories, expectations, reasoning and thinking

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“The ABCs and Two Rs of Life”



The ABCs affect R/R

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“The ABCs and Two Rs of Life”

- **R**elationships with others
 - The most central and essential aspect of our lives
 - Family, friends, acquaintances, people at work
- **R**oles define our life's tasks
 - Student, parent, son or daughter, wife or husband, employee, teacher, pastor

Problems in Roles and Relationships are called “dysfunction” or “impairment”

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Defining Mental Health

- A person *feels* much the way she wants, is in control of his *actions*, and *thinks* both realistically and optimistically (ABCs)
- Thus the person is able to fulfill *obligations* to others, and is able to make and keep important *relationships* (people are able function in healthy or appropriate fashion) (Two Rs)

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Defining Mental Illness

- A person *feels* badly, and/or is not in control of his *actions*, and/or *thinks* unrealistically
- AND
- As a result, the person experiences a lot of distress
- As a result, the person fails in her *obligations* to others and/or has impaired *relationships*

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How common is mental illness?

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Prevalence of Mental Illness

- Epidemiological surveys
 - Logos = study
 - Epidemic = a disease within a population
- The ECA and NCS
 - Door-to-door, face-to-face, 90 minute interviews
 - Consistent results across all surveys

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Best Estimate of 1-year Prevalence Rates of Mental Illness Based on ECA and NCS Results (Adults age 18-54)

	ECA Prevalence (%)	NCS Prevalence (%)	Best Estimate (%)
Any Disorder	19.5	23.4	21.0
Any Anxiety Disorder	13.1	18.7	16.4
Simple Phobia	8.3	8.6	8.3
Agoraphobia	4.9	3.7	4.9
Panic Disorder	1.6	2.2	1.6
Obsessive-Compulsive Disorder	2.4	NA	2.4
Post-Traumatic Stress Disorder	NA	3.6	3.6
Any Mood Disorder	7.1	11.1	7.1
Major Depression	6.5	10.1	6.5
Bipolar Disorder I or II	1.7	1.5	1.7
Alcohol or Drug Use Disorder	9.5	NA	NA
Schizophrenia	1.3	NA	1.3
Severe Cognitive Impairment	1.2	NA	1.2

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Many surveys have been conducted & results are very consistent (due to greater precision in diagnostic criteria as a result of DSM revisions)

Surveys did not include other important mental health issues

- Did not cover all mental illnesses (childhood, aging, eating disorders, personality disorders)
- Domestic violence
- Child abuse and neglect
- Elder abuse and neglect

Huge topics; covered only briefly here

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The various mental illnesses

- Childhood disorders
 - ADHD
 - Learning Disability
 - Autism/Cognitive Impairment
- Very real, very impairing, long-term impact
- Need to be evaluated by qualified MHP and treated across situations (school, tutors, school psychologist)

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The various mental illnesses

- Disorders related to aging
 - Dementia in its various forms
 - Unintentional substance misuse
 - Exacerbation of substance use into disorder
- Immensely distressing to family caregivers (usually daughter)
- Need properly trained health professionals

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The Immense Cost of Mental Illness

- **Distress to the Family and Loved Ones**
 - *Distress Related to Variable Severity*
 - *Shame and Embarrassment*
- **Personal Distress**
 - *Emotional Distress*
 - *Physical/Somatic Distress*
 - *Cognitive Distress*
 - *Shame and Embarrassment*
- **Disability and Impairment at Work**
 - *Occupational Impairment* (less employment, lower employment, less income, greater poverty)
 - *Occupational Impairment of the Family*

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The Immense Cost of Mental Illness

- **Relationship Impairment**
 - *Impaired Relationships with Others*
 - *Relationship Impairment Within the Family*
- **Exacerbation of Medical Problems**
- **Suicide**
- **Faith and Mental Illness**
 - *Spiritual Problems*
 - *Doubt*
 - *Abandonment of Faith*

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You know many people with mental illness and they are suffering.

- In a church with 500 members
 - About 100 will experience a mental illness in any given year
 - About 200 will experience a mental illness at some point in their lifetime
 - Keep in mind the distress experienced by loved ones as well

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You don't know who they are because they have not told you

- Fear
- Shame
- Stigma
- Perhaps because they are victims of the theology of glory

Will return to these topics when we discuss how you are to help.

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The various mental illnesses

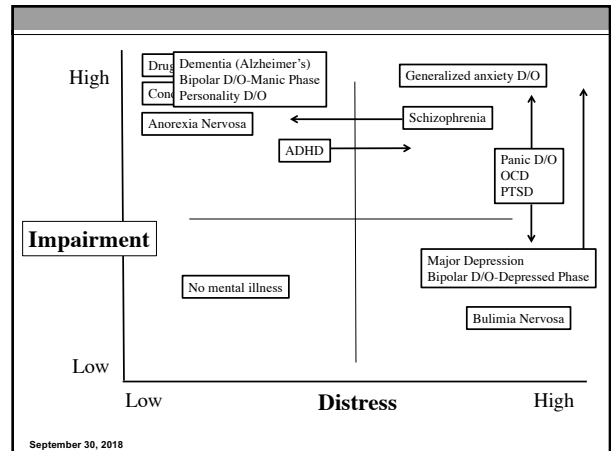
- Anxiety Disorders
- Depressive Disorders
- Substance Use Disorders
- Trauma-Induced Disorders
- Bipolar Disorder
- Schizophrenia Disorders
- Autism, Cognitive Impairment
- Eating Disorders
- Personality disorders
- Childhood disorders
- Disorders related to aging

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The various mental illnesses

- All are associated with either distress or impairment or both
- Distress versus impairment determines help-seeking

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The various mental illnesses

- Anxiety Disorders
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The various mental illnesses

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- Bipolar Disorder
- Schizophrenia Disorders
- Disorders related to aging

- Very distressing
- Very treatable
- Most MHPs treat

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The various mental illnesses

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- Childhood disorders
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- Substance Use Disorders
- Eating Disorders
- Personality disorders
- Autism, Cognitive Impairment
- Bipolar Disorder
- Schizophrenia Disorders
- Disorders related to aging

- Difficult to treat
- Minimal distress
- “Self-induced” and ego-syntonic

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The various mental illnesses

- Anxiety Disorders
- Depressive Disorders
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- Substance Use Disorders
- Eating Disorders
- Personality disorders
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- Disorders related to aging

- SPMI (brain based)
- May or may not cause distress
- Anosognosia

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Neglect and abuse

Children, Adolescents, Vulnerable Adults

- Physical, sexual, emotional abuse
- Neglect = failure to meet physical and emotional needs (housing, clothing, access to medical care)

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Neglect and abuse

- Tragically commonplace
- Difficult to detect
- Requires reporting to law enforcement, followed by intervention of protective services
- Schools need to have policies in place
 - Screening of personnel
 - Safety procedures

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Domestic Abuse: A Definition

- Domestic abuse is a deliberate pattern of behavior used by a person in an intimate relationship to intimidate his or her partner and thereby gain or maintain power and control.

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Statistics About Domestic Abuse

- One in four women have experienced domestic abuse in her lifetime (usually by a family member)
- Nearly 1 in 5 teenage girls said boyfriend threatened violence if presented with a breakup
- 1 in 5 HS students, 1 in 4 college students physically or sexually abused by dating partner

You know dozens of women who have been or are now victims of domestic abuse.

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Statistics About Domestic Abuse

Male Victims of Violence

- According to the CDC, 1 in 7 adult men in U.S. will be the victim of severe physical violence by an intimate partner in his lifetime
- Experience similar psychological problems
- Men less likely to seek help

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Types of Domestic Abuse

- Abuse categories
 - Physical violence
 - Sexual abuse
 - Verbal abuse
 - Psychological/Emotional abuse
 - Abusive control over social matters
 - Abusive control over financial matters
 - Spiritual abuse

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Causes of Abusive Behavior

- Abusive behavior is not due to anger
 - He is "not out of control" due to his feelings
- Abusive behavior is due to distorted thinking
 - Superiority & Entitlement
 - Inferiority & Abandonment
 - Objectification of women

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What do you do?

- With the victim:
 - Have a helpful conversation in which you conduct mental health first aid and refer to a professional.
 - Covered later
- With the perpetrator:
 - Not a thing
 - Confrontation creates danger

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A Christian understanding of mental illness

- Mental illness is a disorder
- Different than others but also the same
- Needs professional attention
 - (just like legal problems, dental problems, medical problems, car problems, plumbing, electrical, roof, accounting, hair, skin)
- Persons confronting it in themselves or loved ones are prey to misunderstanding the distinction between mental health and spiritual issues
 - "Prey" because of constant barrage of misinformation

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Proper Understanding Leads to a Proper Response (Help-Seeking)

What Stops People from Seeking Help?

- Distress versus impairment
- Lack of Familiarity (with MI and MH Treatment)
- Shame and Stigma

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• Distress, Impairment and Help Seeking

- People in distress tend to seek help
- People that are impaired might not

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• Lack of Familiarity

- Not knowing that they (or a loved one) has a mental illness
- Not knowing that treatment helps, how to get it, where to get it, how to afford it
- Especially, thinking that they should "handle this on my own"

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• Shame and Stigma

- Stigma = the thoughts, feelings and behaviors people hold towards persons with mental illness
 - Responsible (mental illness is "voluntary")
 - Bad, weak
 - Dangerous, unpredictable
 - To be avoided (!)
 - Don't hire, don't live near, don't marry, don't talk to
- Public Stigma becomes Self-Stigma

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A Proper Christian Understanding of Mental Illness

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The Theology of Glory

- Christians may face a special burden of shame w.r.t. mental illness
 - Might believe mental illness reflects weak faith, punishment from God, or abandonment by God
 - This is taught by “theologians of glory”
 - Martin Luther (Heidelberg Disputation, 1518) coined the “theologian of glory” as the one who “does not know God hidden in suffering ... (preferring) works to suffering, glory to the cross, strength to weakness, wisdom to folly, and, in general, good to evil.”

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The Theology of Glory

- This is nothing new
 - “I am astonished that you are so quickly deserting the one who called you to live in the grace of Christ and are turning to a different gospel—which is really no gospel at all.” (Galatians 1:6-7).
 - St. Augustine spoke of “incurvatus in se” (“turned inward on oneself”) to describe the preference to look inward for evidence of God’s approval
 - More popular now than ever before

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The Theology of Glory

- Theologians of glory acknowledge that Christ died on the cross, but they say it was the only way for God to transform humanity in order to establish a kingdom of glory on earth
 - That kingdom will include wealth, prosperity, happiness, and joy for those who believe appropriately and sufficiently
- Modern prosperity preachers have prospered
 - The stronger one’s faith, the better one’s life
 - Many preachers have found it to be highly profitable
 - Joel Osteen: “He wants us to live our lives happy. He wants us not to endure them, but to enjoy them.”

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The Theology of Glory

- Supposedly, one can look at a person’s life and discover the “strength” of faith
 - Likewise, if someone strengthens his or her faith, then their life will improve accordingly
 - Someone who is suffering does not have to suffer
 - Someone who is suffering due to mental illness is someone who has insufficient faith
- Victims of the theology of glory are taught, “The reason for my suffering is my lack of faith” and their suffering is magnified.

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The Theology of Glory The Theology of the Cross

- How to help?
- Confront it. Condemn it.
- Teach the theology of the cross.
- Preach Christ crucified.
 - A proper Christian understanding of mental illness begins and ends with the three articles faith

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The Kingdom of Earth and the Kingdom of Heaven

First Article, Apostles’ Creed
I believe in God the Father Almighty, Maker of heaven and earth.

- God’s kingdom is in heaven
- God ordains all things that happen on earth
- People experience pain and suffering because the world has been corrupted by sin, not because of their lack of faith

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The Kingdom of Earth and the Kingdom of Heaven

- Faith does not preclude suffering nor mental illness
 - "Whoever does not bear his own cross and come after me cannot be my disciple" (Luke 14:27).
 - "Know for certain that for 400 years your descendants will be ... enslaved and mistreated." (Genesis 15:13)
 - Moses requested of God, "kill me at once" if God intended his burden to continue (Numbers 11:15).
 - Violent, jealous, irrational Saul fell on his own sword, yet King David commended the men who buried Saul.
 - Job questioned why he did not "die at birth" (Job 3:11)
 - Peter denied knowing Christ out of fear
 - Jonah fled when told to go to Nineveh
 - And many many other examples

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The Kingdom of Earth and the Kingdom of Heaven

- The theology of glory that states that sufficient faith will make a person happy, healthy and wealthy is contrary to the first article of the Apostle's Creed.
- The theology of the cross recognizes the difference between heaven and earth.

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God Punished His Son for Our Sin

Second Article, Apostles' Creed

And in Jesus Christ, His only Son, our Lord; Who was conceived by the Holy Spirit, born of the Virgin Mary, suffered under Pontius Pilate, was crucified, died and was buried. He descended into hell; the third day He rose again from the dead; He ascended into heaven and is seated at the right hand of God the Father Almighty; From there He shall come to judge the living and the dead.

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God Punished His Son for Our Sin

- Some Christians believe and teach that mental illness is God's punishment for sin
- This was directly asked of Jesus Christ, and he said, "I tell you, no!"
 - Now there were some present at that time who told Jesus about the Galileans whose blood Pilate had mixed with their sacrifices. Jesus answered, "Do you think that these Galileans were worse sinners than all the other Galileans because they suffered this way? I tell you, no! But unless you repent, you too will all perish. Or those eighteen who died when the tower in Siloam fell on them—do you think they were more guilty than all the others living in Jerusalem? I tell you, no! But unless you repent, you too will all perish." (Luke 13)

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God Punished His Son for Our Sin

- A proper Christian understanding of mental illness asserts that:
 - Persons with mental illness are sinners (like us)
 - They are suffering (like us now or like us eventually)
 - They can be comforted by the Holy Spirit through hearing the word of God

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God Punished His Son for Our Sin

- The Lord "does not treat us as our sins deserve or repay us according to our iniquities ... as far as the east is from the west, so far has he removed our transgressions from us" (Psalm 103).
- We suffer because of fallen humanity, but some do not suffer more than others because of sin

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Faith Is a Gift from God

Third Article, Apostles' Creed

I believe in the Holy Spirit, the holy Christian Church, the Communion of Saints, the Forgiveness of sins, the Resurrection of the body, and Life everlasting.

- Faith is a gift from God received through the Holy Spirit. How can it not be adequate?

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Faith Is a Gift from God

- "No one can come to me unless the Father who sent me draws them" (John 6:44)
- "Blessed are you, Simon son of Jonah, for this was not revealed to you by flesh and blood, but by my Father in heaven" (Matthew 16:16-17).
- "There is none who seeks for God" because "the mind governed by the flesh is hostile to God; it does not submit to God's law, nor can it do so" (Romans)
- "For it is by grace you have been saved, through faith—and this is not from yourselves, it is the gift of God—not by works, so that no one can boast". (Ephesians)

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Faith Is a Gift from God

- Most corruptly, with regard to the Theology of Glory and mental illness, people are taught that their faith is their doing
 - If they are sad or anxious, it is because they do not believe strongly enough
 - That they need to strengthen their faith
 - That they are obviously not "good" Christians
- A proper Christian understanding of mental illness rejects the idea that it is due to inadequate faith
- The theologian of the cross knows that faith is a gift from God

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A Proper Christian Response

- A. Have a helpful conversation during which you ...
- B. ... Provide mental health "first aid" and conduct triage
- C. Refer to a mental health professional (if needed) .
..
- D. . . . And stay involved

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Having a helpful conversation

- Do not be afraid of mental illness
- How to talk to someone
 - Be empathic
 - Strive to understand and simply accept how a person thinks and feels AND show that you understand and accept
 - Do not evaluate their thoughts and feelings
 - You don't have to understand *why* he or she thinks or feels that way
 - You don't have to agree with their thoughts or feelings
 - When someone tells you about their emotional hurt, act the same way that you would about physical hurt

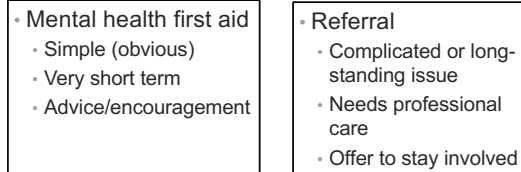
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Mental Health Triage (via listening)

- Does this person have a mental illness, or can this person be immediately helped by me and other informal resources?
 - Duration (Long term? Recent? Obvious cause?)
 - Severity of distress and impairment
 - Prior treatment
 - Your perception: "Is this problem beyond what I feel comfortable doing?" (Trust your gut.)

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Mental Health Triage



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Mental Health First Aid

- Things you (and anyone else) can do to help
 - Listen
 - Reassure
 - Encourage healthy behavior
- Seatbelts and airplanes
- Can be effective and helpful
- Based on idea that sometimes people just need a kind word of encouragement (cf. Paul, Luther, etc.)

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Referring

- Understand when you cannot help
- Understand the limits of your competence
- Understand competence of mental health professionals
- Consider self "starting point" or "front line" with regard to professional help

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Referring, 1: Express Empathy

- Express concern, which will be salutary in itself
- Say something like:
 - “I’m really concerned about you.”
 - “I’m worried about your welfare.”
 - “You are very down, which is a concern.”
- Encourage person to understand he/she is not alone (i.e., 1 in 5 at least)

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Referring, 2: Promote Professional Help

- Say expertise is needed
- Communicate that treatment helps

- Communicate that resources are available

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Referring, 3: Encourage Help-Seeking

- Determine if person knows how to get help
- Offer to help get help
- The first phone call is the hardest step
- Refer, but don’t defer
 - Indicate your desire to stay involved
 - Assure that you are not embarrassed, nor uncomfortable with topic, nor disgusted

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The Value of Treatment

- Treatment works
- But ...
 - There are varieties of treatment
 - Biological versus psychological
 - There are variations in the quality of care offered
 - So ask and recommend a change if needed
 - There are general principles w.r.t. seeking care
 - e.g., MHPs better than general MDs

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Finding good mental health professionals

1. Defining a “good” mental health professional
2. Advice on how to find one (or two or three)

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Finding good mental health professionals
Defining a "good" mental health professional

- Professional characteristics: Proper degree, training, licensure, and experience
 - Training by program, degree from college, licensure by state, experience through experience

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- **Training (to obtain degree)**
 - Child, Adult, Family
 - Evaluation or Treatment
 - Specific populations (i.e., problems)
 - Medical or psychological
 - Individual or system (e.g., family, social, school)

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- **Degree (via college)**

Degrees Earned by Mental Health Professionals
MD = Doctor of Medicine with specialty in psychiatry
DO = Doctor of Osteopathic Medicine with specialty in psychiatry
Diploma in Nursing, Associate's in Nursing, or Bachelor's Degree in Nursing
PhD = Doctor of Philosophy in Clinical or Counseling Psychology
PsyD = Doctor of Psychology
EdD = Doctor of Education
DSW = Doctor of Social Work
MSW = Masters in Social Work
MMFT = Masters in Marriage and Family Therapy
MEd = Masters in Education
MS = Master of Science (or Masters in Science)
MA = Master of Arts (or Masters in Arts)

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- **Licensure (by states)**
 - MD/OD = "Board Certified" psychiatrists
 - RN-BC = Certification in Psychiatric-Mental Health Nursing
 - LP = Licensed Psychologist
 - LCSW = Licensed Clinical Social Worker
 - LMFT = Licensed Marriage and Family Therapist
 - LPC = Licensed Professional Counselor
 - LCPC = Licensed Clinical Professional Counselor
 - LMHC = Licensed Mental Health Counselor
 - and many more (related to state variability)

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- **Experience leads to expertise**
 - MHPs tend to specialize
 - No one can be competent in all treatments with all populations

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Finding good mental health professionals

Ask colleagues, ask parishioners
Locate names, call them up, ask for a meeting

- You are seeking names of good MHPs
- Would like to meet, potentially refer to them
- Have some questions about them and their practice

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Finding good mental health professionals

Why would they agree?

- MHPs run their own practice
- MHPs love referral sources

What to ask

- Education and Training
- Expertise
- Attitude towards religion
- Willingness to collaborate

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Finding good mental health professionals

- Education and Training
 - What degree? From where? Was program "accredited"?
 - What specific training?
- Expertise: "What do you specialize in?"
 - Children/Families vs. Individuals/Adults
 - Specific populations
 - Beware the "know it all"

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Finding a Good Mental Health Professional

- Field has history of disrespect toward religion
 - Freud, Ellis, Rogers openly hostile
 - MHPs deliberately avoided anything about religion
 - MHPs tend to be less religious
- However, most will be respectful
 - Embrace it as important, helpful
 - Recognize family and cultural importance
 - (Some will want to delve in!)
- Discernment is necessary to find such clinicians

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Finding good mental health professionals

- Attitude towards religion
 - Tell about yourself, about your faith, watch their reaction
 - Ask explicitly: "What is your attitude towards religion and mental health?"
- What you want to hear
 - They recognize importance of religious faith
 - They respect the difference between religions
 - Maybe they encourage patients to use religious resources
 - They will not touch anything having to do with religion

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What about Christian/Pastoral counselors?

Many Christians in need of mental health services seek out Christian counselors or pastoral counselors

What is that?

- Counseling that explicitly, purposefully integrates religion
- Have become major providers of mental health services

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What about Christian/Pastoral counselors?

Whence came it?

- Most Americans consider their religious beliefs to be an extremely important part of their life
 - where they live
 - whom they marry
 - where their kids go to school
 - what they do in their free time
 - where they work
- Religious beliefs affect emotional health

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What about Christian/Pastoral counselors?

- Three-fourths of Americans indicate it is "important" that a mental health professional integrate religious values and beliefs into the counseling process
- Many anticipate that secular clinicians belittle religion
- Many seek out their clergy
 - Surveys estimate that the total amount of counseling hours provided by clergy is equal to the hours provided by all psychologists

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What about Christian/Pastoral counselors?

Pastoral counseling history

- The American Association of Pastoral Counselors (AAPC): "The intimate link between spiritual and emotional well-being began to receive serious attention by religious leaders in the early 1900s" (as psychoanalysis emerged as dominant explanation but also to dominate the society of the learned, including clergy)
- Movement to expose theological students to patients in psychiatric hospitals, prisons, etc.
- Pastoral counseling programs were founded soon thereafter

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What about Christian/Pastoral counselors?

Who are they?

- Have received graduate training in both religion and counseling
- Counselors who pursue degrees as pastors or, more commonly, pastors who pursue degrees in counseling
- Few states license pastoral counselors, but the National Christian Counselors Association urges members to avoid licensure so they can promote their religious beliefs:
 - "When you're state licensed, you can't impose your personal beliefs ... we need to be able to do that."
 - "When a person comes to see us, first and foremost we have to make sure that person's relationship with Christ is correct and good."

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What about Christian/Pastoral counselors?

- The American Association of Christian Counselors (AACC) is ecumenical:

"The ultimate goal of Christian counseling is to help others move to personal wholeness, interpersonal competence, mental stability, and spiritual maturity."

Christian counselors can be licensed professionals or merely "caring church members with little or no formal training."

- In other words, anyone can declare himself or herself a Christian counselor.

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What about Christian/Pastoral counselors?

What they do

- Deliberately mix theology and psychology
 - Professional Pastoral Counseling Institute: "Most believe there is a God or divine power ... (and) that we yearn for a transforming connection with the divine... Some AAPC members believe in a therapeutic role for spiritual values but not in a divine being."
- Judge the correctness of their clients' beliefs, even when those beliefs are explicitly preached by the client's church.
 - "(Pastoral counselors) pay special attention to the religious history of the client and the client's family, noting how it may contribute ... to the pathology," "False images of the ultimate can distort one's concept of oneself" and "Mistaken beliefs about oneself, others, and the world may ... (be) erroneously supported by religious institutions."

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What about Christian/Pastoral counselors?

Theology of Glory redux

- What about faith and happiness?
 - "God wants you to be happy." (Joel Osteen)
- Assuredly there is a link between "spiritual and emotional well-being"
 - But whether they feel better or not, the sins of the faithful are forgiven
 - Deliberately confuses the reality of the redeeming sacrificial death of Jesus Christ with the subjective experience of happiness

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What about Christian/Pastoral counselors?

Coercion? (Whose faith? Which faith?)

- Recognize the power of the therapeutic situation and the influence of the therapist (expert) over the patient (distressed, confused, grateful)
 - Many mental health professionals will deny and decry this, because they are egalitarian and the notion makes them uncomfortable. But it is simple denial of reality for them to do that.
- If the clinician then recommends at least an examination--if not an outright rejection--of the patient's religious belief system, the patient is very likely to do so.

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What about Christian/Pastoral counselors?

- Providing proper care for mental illness and mental health concerns is the province of mental health professionals
- Providing spiritual comfort and consolation is the duty of pastors, and it requires nothing more than what they already possess

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What about Christian/Pastoral counselors?

- Do not send anyone to counselors who will preach
- Do not mistake preaching for counseling
 - Problems in a person's emotional well-being should be referred to experts in the same way that problems in their medical, dental, social, financial, and occupational well-being would be.
 - To do otherwise is to deny the power of preaching and to insult the mental health profession.

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Outline of Presentation

- I. Basic information about mental illness
- II. The various mental illnesses
- III. Neglect, abuse and domestic violence
- IV. A proper Christian understanding
- V. A proper Christian response: Individual
 - A. Helpful conversations
 - B. Mental health triage
 - C. Mental health first aid OR Referral to a professional
 - D. Finding good mental health professionals
 - E. Staying involved
- VI. A proper Christian response: Congregational
- VII. Post-Script

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Staying involved for spiritual consolation (and consultation about treatment)

Two tasks then two more tasks for those with a mental illness

1. Conduct mental health triage
2. Refer to a mental health professional

Then, stay involved by ...

3. Provide spiritual consolation
4. Provide guidance in discernment regarding quality of care

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• Spiritual Consolation

- Condemn the theology of glory
- Insist that they come to church
- Preach Christ crucified!

"Keep reminding God's people of these things. ... (be one) who does not need to be ashamed and who correctly handles the word of truth. ...

... I give you this charge: Preach the word; be prepared in season and out of season; correct, rebuke and encourage—with great patience and careful instruction. For the time will come when people will not put up with sound doctrine." (2 Timothy)

Whether they feel it or not, God loves them and they are saved.

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• Consultation Regarding Treatment

- Be aware that not all treatment will be good quality
- Ask how treatment is going
 - Encourage patience
 - Treatment can take a while
 - Duration of problem = time needed for treatment
 - But encourage discernment/Practice discernment

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• Consultation Regarding Treatment

Distinguish therapeutic alliance and treatment interventions

Alliance

- They should like therapist, feel respected and listened to, and understood
- They should have a sense of encouragement

Interventions

- They should understand what is happening and why
- They should believe treatment is helping (or will help)

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Improve your credibility with regard to mental illness and its treatment

- Don't be afraid of mental illness
- Don't think or act as if it is shameful or scary
- Conduct church outreach

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Specific Helpful Things You (and Your Church) Can Do

- Outreach (since persons are ashamed)
 - Prayers for persons with mental illness and their families
 - Identify resources in bulletin or church leaflets
 - Identify resources in church (or nearby)
 - In sermons, include mental illness (& DVCA) in instances of suffering
 - Put fliers in restrooms
 - Educate each other
 - Insist that staff are educated
 - Recognize and challenge stigmatizing statements and actions

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The Problem

- Mental illness is common and costly
- Unlike every other illness, intense stigma (weakness, badness, dangerousness)
- Stigma is exacerbated by idea that faith and feelings are the same
- Idea promotes mistaken notion that MHPs should have same faith or that clergy are adequate for mental health care

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A Helpful Response

- Preach Christ crucified
- Attack idea that mental illness is different, shameful, funny, scary
- See the truth
- Help as you can
- Refer as is needed to people you know and trust

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Questions/Comments

and

Thank you!!

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