Let’s Talk!
Breaking the Silence around Mental Illness in Our Communities of Faith

June Zwier, M.Div.
Winnie Visser, M.Div. RMFT

© 2010
Faith and Hope Ministries
www.faithandhopeministries.net

Christian Reformed Disability Concerns
www.crcna.org/disability
L
et’s Talk! Breaking the Silence Around Mental Illness in our Communities of Faith comes from a long history\(^1\) that has kept people who experience mental illnesses bound by shame and guilt. Family members are sworn to secrecy and a life of trying to support their loved one without sharing that work with anyone else—even with fellow brothers and sisters in Christ. It is a tremendously lonely journey. But there are simple things you can do to make a significant difference in the lives of people affected by mental illnesses. Devoting time to this study will help you become more comfortable in understanding, talking about, and supporting people who experience mental illness and their families.

It is our vision that this study will be the beginning of opening up to one another in a safe environment about the issues that plague many people in our congregations. One in five people in a lifetime will suffer from a mental illness. That means one in five people in our church pews! You would think that with such high statistics we would hear more about mental illness. But the reality is that stigma, shame, and fear keep us from talking about it. Ephesians 4:29 says, “Do not let any unwholesome talk come out of your mouths, but only what is helpful for building others up according to their needs, that it may benefit those who listen.” In order for us to say and do things that are helpful for building others up (particularly people with mental illnesses), we need first to understand what our brothers and sisters in Christ are going through. Paul writes, “Be imitators of God, therefore, as dearly loved children and live a life of love, just as Christ loved us and gave himself up for us as a fragrant offering and sacrifice to God” (5:1-2).

How fragrant are we, really? Let’s explore together how we can become just that—informed, supportive, and loving to those who experience mental illness.

HOW TO USE THIS STUDY
You can use this study individually to improve your personal understanding of mental illness, or you can use it in a group setting. Some ground rules that might be helpful in promoting a healthy conversation in a group setting include:

- Confidentiality – do not share others’ stories.
- Openness – frankness, integrity, and honesty.
- Acceptance – of others’ viewpoints.
- Listening – not interpreting or assuming.
- Speak one person at a time.
- Allow for the right to pass.
- Allow for the right to take a break.
- Take responsibility for your own needs.
- Understand that we all make mistakes.
- Turn off all cell phones and electronic devices.
- Watch how much/long you speak.

(From Pathways to Partnership, p. 13, a resource pack for churches to use in ministering with people who have mental illness; © Pathways to Promise, pathways2promise.org. Used with permission.)

WHAT ARE WE TALKING ABOUT?
In this study we will explore our beliefs and responses to people who experience mental

---

\(^1\)Christian Reformed Disability Concerns and Faith and Hope Ministries of Classis Quinte have partnered together to form a Mental Health Task Force: Roze Meyer Bruins, chaplain; Cindy Holtrop, chaplain; Mark Stephenson, director of Christian Reformed Disability Concerns; June Zwier of Shalem Mental Health Network; and Winnie Visser, in private practice. Zwier and Visser are both marriage and family therapists. They have been hired by Classis Quinte as mental health resource consultants for Faith and Hope Ministries to assist Christian Reformed churches in their ministry with people with mental illnesses. The Mental Health Task Force has prepared this series for the Christian Reformed denomination’s emphasis on mental illnesses during Disability Week, which the CRC Synod designated as October 11-17, 2010.
illness and then discuss how the church might be helpful in this journey. Our desire is that we will become more informed and aware of the suffering of individuals and families who cope with the effects of mental illness each day. We pray that through this study you will become a bit better at loving people affected by mental illnesses.

WHAT IS MENTAL ILLNESS?

In this study we speak of mental illness as any kind of brain disorder that can be diagnosed by a doctor. Such disorders can profoundly disrupt a person’s thinking, feeling, mood, and ability to relate to others, interfering with that person’s capacity to function well amid the demands of daily life. Mental illnesses include depression, anxiety, schizophrenia, and bi-polar disorder.

We are NOT talking about the people who have intellectual disabilities who are part of Friendship groups—although individuals with cognitive impairments can also experience depression or anxiety or other mental illnesses.

A NOTE FROM THE AUTHORS

It has been a wonderful experience working together with Disability Concerns and Faith and Hope Ministries. It is only by breaking the silence surrounding mental illness that we can truly be the inclusive community that God wants us to be. It has been our experience that many people who experience mental illness have been hurt by well-intentioned church members. But breaking the silence and shedding Christ’s light in the secret places of our lives can allow us to share together rather than suffer in isolation. We pray that this study will help many people learn many things about themselves and the people they serve.

In Christ’s Service,
Winnie Visser
June Zwier
Let’s Talk!

Session 1
Why Is Mental Illness So Hard to Talk About?

Is it our own fear? Is it our lack of knowledge or lack of experience? Is it the reaction of others?

John 9:1-5, The Message

Walking down the street, Jesus saw a man blind from birth. His disciples asked, “Rabbi, who sinned: this man or his parents, causing him to be born blind?” Jesus said, “You’re asking the wrong question. You’re looking for someone to blame. There is no such cause-effect here. Look instead for what God can do. We need to be energetically at work for the One who sent me here, working while the sun shines. When night falls, the workday is over. For as long as I am in the world, there is plenty of light. I am the world’s Light.”

Study Questions:

1. Isn’t it just like us, as humans, to look for blame? Illness makes us uncomfortable. It causes us to stare our own frailty in the face. Why did _____ get cancer? Why did _____ have a miscarriage? Why does my son/daughter have diabetes? We want to place blame so that we don’t have to live with the unknown, so that we don’t have to experience the pain of our own imperfections. In this Scripture passage, Jesus tells the disciples that they are not asking the right question. The disciples wanted to know whose fault it was that the man was born blind. However, Jesus says that questioning who is to blame or why it happened is not always the right question to ask. How often have we asked God why we or our friends suffer with cancer or asthma or depression? We tend to want to lay blame. But Jesus says the question is not “Why?” or “Who’s to blame?” but rather, “What does God want me to do in order that his power and purpose can be seen in this situation?”

Gunnar Christiansen M.D., co-chair of NAMI FaithNet, says, “I always listen closely to the introduction to see if I hear any new information about myself. What defines us? Are we what we have done, or what we have not done? Are we what we were, or what we hope to be? Are we what others think we are? Are we what we do, or are we the reason that we do something? Are we who we are in spite of, or because of, someone or something? Are we a ‘work in progress’? Who are we anyway? One thing for sure, if we are afflicted by an illness or disorder, we are not the defect. Whether we are tall, short or medium, whether we are black, white or in between, whether we are shapely or pleasantly plump, we are all persons. We are all an equal part of God’s creation.” And we would like to include people with depression, diabetes, cancer, or bi-polar disorder.

2. What words or images come to mind when you think of mental illness?

1National Alliance on Mental Illness
3. Early-memories exercise - “Walking Together”: What did you learn about people with mental illness as you grew up? Think about the message you received (a) at home from your parents, aunts, uncles, sisters, brothers, and extended family; (b) at school from your teachers and classmates; (c) from your church family; (d) from books, movies, television, and other media. From all of those messages and experiences, what beliefs did you form about people who have mental illnesses? (©Pathways to Promise, used with permission)

4. Henri Nouwen wrote, “Often we might prefer not to be part of the body because the participation makes us feel the pain of others so intensely. Every time we love others deeply we feel their pain deeply. However, joy is hidden in the pain. When we share the pain we will also share the joy” (Nov. 3 entry, Bread for the Journey; HarperOne, 1996)

What makes it hard for you to talk about mental illness or to help someone with a mental disorder?

5. How does it feel to ask for help when you are in need? What holds you back from asking for help?

6. Did your family ever have family secrets? What happens when we keep family secrets or don’t share our stories? What was it like for you when you finally shared a secret?

7. Why do you think it might be hard for some people to share their experiences with mental illness? Consider Job’s journey and how his friends responded to his experience. If you had friends like that, would you feel safe to share with them again?

8. “Strangers, people different from us, stir up fear, discomfort, suspicion and hostility. They make us lose our sense of security just by being ‘other.’ Only when we fully claim that God loves us in an unconditional way and look at ‘those other persons’ as equally loved can we begin to discover that the great variety in humanity is an expression of the immense richness of God’s heart. Then the need to prejudge people can gradually disappear” (March 8 entry, Nouwen, Bread for the Journey).

9. Fill out the “Church Assessment” below. How can we as a church body create a safer space to talk together about our experiences of mental illness? What does a safe church community look like?
Church Assessment

Yes = 2  To Some Degree = 1  No = 0

1. Is your church a safe community where people can be honest with themselves, each other, and with God?
2. Is your church community a place where feelings, both “good” and “bad,” can safely be experienced and expressed?
3. Is your church community one in which people listen, attend, and process rather than simply tell, influence, and give?
4. Does your church community allow people to express their pain?
5. Does your church community encourage and facilitate self-disclosure?
6. Does your church community, both individually and collectively, provide people opportunities to give feedback on their experience in the church?
7. Does your church community extend grace and forgiveness when people are in pain, are different, or fail?

Your Score: ___/14

Prayer:
Lord, thank you for the opportunity to start talking about a topic that is hard to talk about. Some of us might secretly be dealing with it, and it’s lonely, Lord. Help us learn what it is that you want to teach us in order that we might learn to care for those among us and their families who experience mental illness. Grant us your grace to respond with compassion. Amen.
Session Two
Breaking the Silence

The Hush of Mental illness

Hush! Say the families.
   We’d be embarrassed for others to know.
Hush! Say the siblings.
   We’d rather die than let anyone know.
Hush! Says the minister.
   Someone might feel uncomfortable, you know.
Hush! Say the deacons.
   We look after the physically sick, you know.
Hush! Say some church members.
   I don’t want anyone to know about me or my relatives, you know.
Hush! Say some government leaders.
   There’s not enough money to go around, you know.
Hush! Says society.
   ’Cause we already don’t want to know, you know.

(By Louise G. Fisher of Raleigh, North Carolina; quoted in an address by Gunnar E. Christiansen)

God has a significant message for us in the book of Joshua:

“The seven priests carrying the seven trumpets went forward, marching before the ark of the LORD. . . . When the trumpets sounded, the people shouted, and at the sound of the trumpet, when the people gave a loud shout, the wall collapsed” (Josh. 6:13, 20).

People who experience mental illness can suffer greatly from the shame and judgments of others, from the stigma many people associate with mental illness. Webster’s dictionary defines stigma as a mark or brand indicating shame or discredit. We can consider stigma a wall that separates people from the rest of the community. Gunnar Christiansen of NAMI FaithNet states, “It is time for us to convince the Faith Community that it should join in leading all of society in a march. It is time for us to shout and blow our horns. The wall of stigma of mental illness must come down. For most of us the wall is invisible. But those with one of these disorders can see it clearly.” So we need to examine what this wall is made of and how we can help break it down so that we no longer associate shame and judgment with mental illness.

Study Questions:

1. What did the Israelites do to take down the wall?
2. Remember the saying “Sticks and stones will break your bones, but names can never harm you”? Now that you have some life experience, what do you think about that saying? How could it relate to stigma?

3. “As we prepare for this battle [against stigma] we must first carefully assess if we are part of the problem” (Gunnar Christiansen). When have you been part of the problem?

4. Have you ever felt the sting of stigma? What was that like for you? Read Luke 6:41. How does it relate to the conversation about stigma? What does Jesus say about this?

5. Is there a difference between stigma, prejudice, and discrimination? How are they different and how are they related?

6. What are some of the words we use in talking about mental illness that keep the stigma alive?

7. Where does this stigma come from? The U.S. Surgeon General has stated, “The fact that many, if not most, people have experienced mental health problems that mimic or even match some of the symptoms of a diagnosable mental disorder tends, ironically, to prompt many people to underestimate the painful, disabling nature of severe mental illness. In fact, schizophrenia, mood disorders such as major depression and bi-polar illness, and anxiety often are devastating conditions” (AdNet*). For example, having a blue day is very different from having major depression. Discuss.

8. What are the effects of stigma? (Often in the desire to preserve the sense of community, we actually fragment the community. Subtly, we send “the problem person” away from the community and in so doing build up the wall of stigma. “Does this give you a better understanding as to why there is such a powerful urge to be silent?” [AdNet]).


Prayer:

Lord, teach us how to break the silence around mental illness. Forgive us for building a wall between ourselves and brothers or sisters in Christ who experience mental illnesses. Grant us more wisdom and understanding, and give us the grace to include all people in your kingdom. Amen.

* the Anabaptist Disabilities Network, adnetonline.org
Session 3
So Let’s Talk About It!

Read Psalm 88, Psalm 42

I Am Toxic

I’m having a hard time keeping up the façade of someone who trusts in God and lives by faith. I love God, I ultimately trust in God, and I believe God is good, but I am so overwhelmed by life’s circumstances that I am having a hard time keeping any kind of a positive outlook about anything.

Here is one of the problems: I feel like the cloud that has been over me is spreading out to engulf others. It feels like dry ice the way it slowly comes out on a stage, then slowly covers the whole stage and covers whatever is on stage. It’s like one storm cloud becoming a funnel cloud or a mist becoming a fog. At night when I’m lying in bed or in the evening just before bed when I’m sitting alone, my eyes start to water, tears run down my face. The strange thing is I am not feeling like I am crying— I feel like I am so overwhelmed with sadness that it is leaking from my eyes.

I feel like I am being put through a paper shredder that is destroying any semblance of the happy, confident, faith-filled, encouraging person I once was. I worry that a part of me has become resistant to what God is trying to teach me. Instead of being a soft, pliable piece of clay that the Master can mold, I have become a hard, dry, crusty lump, like clay that’s been left in the sun and can no longer be worked with. I know God disciplines the ones he loves, but I am feeling whipped. Maybe God isn’t responsible in any way for anything going wrong in my life but has allowed it to refine me more into the image of Christ—but I can’t take it anymore. I am afraid I am becoming the opposite of whatever God would like to make me into. This is so hard. I feel that my negativity is like a virus, and I don’t want to infect anyone. I feel like people must be tired of my whining and complaining, and people have already done so much for me. It must be frustrating to them.

(Used by permission of the author, whose name has been withheld.)

Study Questions:

1. How does Psalm 88 describe the experience of mental illnesses? Go through the Psalm and identify the descriptions of depression.

2. Think about whom you would turn to in an emergency at 2 a.m. Who is your closest friend? Have you ever felt abandoned or misunderstood by those closest to you, your church family, or even by God? How does Psalm 88 describe this experience?
3. Many of the Psalms describe the suffering person calling out to God in distress. What can this teach us? See Psalm 42, for example.

4. Reread *I Am Toxic*. At times we can be honest with God. How can we be honest with each other when we or someone we know feels this way?

5. Fill out the quiz below. After completing the quiz, discuss some of your thoughts and reactions.

6. (a) As in Session 2, question 7, review the difference between having the blues and depression. (b) What differences do you see between developmental delays, cognitive impairments, intellectual impairments, and mental illnesses?

7. So what are the major mental illnesses, and what do we need to know about them?

8. One in five people will experience a mental illness at some point in their lifetime. Does that statistic surprise you? What does it mean for our churches? Are we immune?

9. How do you suppose the mental illness of a loved one affects family members (spouses, siblings, parents, children, extended family)?

10. Finish by reading 2 Corinthians 1:3-7. What do these verses tell us?

Prayer:

Lord Jesus, thank you that you are our friend and are present with us in the darkness. Help us to understand better the truths that our brothers and sisters who have mental illness experience. As your friends, teach us to be present with others and to carry them to you. Amen.
Quiz on Mental Illness

1. Mental illness is a single, rare disorder and doesn’t affect the average person.
   True   False

2. Most people who struggle with mental illness live on the streets or in mental hospitals.
   True   False

3. A person can recover from mental illness through prayer and by working on positive thoughts and a positive outlook.
   True   False

4. Medication is a useful treatment for most forms of mental illness.
   True   False

5. People often won’t talk about mental illness because it is viewed as a weakness or personality fault.
   True   False

6. People with mental illness are poor and/or less intelligent.
   True   False

7. People with mental illness are not likely to be violent and dangerous.
   True   False

8. Christians experience mental illnesses at the same rate as non-Christians.
   True   False

9. Only professionals can help someone who has a mental illness.
   True   False

10. There is little we can do as churches to help support people with mental illness and their families.
    True   False
Session 4
What Can You Do? What Can We Do?

Review 2 Corinthians 1:3-7; read Psalm 137:1-6, Romans 12:3-13.

“Listening is much more than allowing another to talk while waiting for a chance to respond. Listening is paying full attention to others and welcoming them into our very beings. The beauty of listening is that those who are listened to start feeling accepted, start taking their words more seriously and discovering their true selves. Listening is a form of spiritual hospitality by which you invite strangers to become friends, to get to know their inner selves more fully, and even to dare to be silent with you” (Henri Nouwen, *Bread for the Journey*).

Study Questions:

1. What enables us to comfort others (2 Cor. 1:3-7)? Have you ever received this kind of comfort, and how would you describe it?

2. How is the experience of being in a foreign land comparable to the experience of having a mental illness (Ps. 137:1-6)? If you were in a foreign land, what would help you to feel more accepted and to experience a sense of belonging? How could we apply that to someone with a mental illness?

3. In light of Psalm 137, what can we do to help individuals feel free to share their experiences with mental illness, to receive our support, and to know that together we are the body of Christ? How might this apply to family members, spouses, siblings, parents, and caregivers?

4. Read the “Open Letter” below, an address to a church community written by someone who experiences depression. What stands out for you in the letter? According to this letter, how can we be more positive, loving, and realistic in our support of people who experience mental illnesses?

5. How has this study influenced your thinking and/or attitude toward people with mental illnesses? Has anything changed for you?

6. How do our beliefs and attitudes affect what we say and do to support people who experience mental illnesses? What does Romans 12:3-13 say about this?
7. What kinds of support does your church already have in place for people who experience mental illness and for their families? What might still be needed? How could you find this out respectfully and confidentially?

8. What is available in your town/community to support those people in your faith community who experience mental illnesses? Write down five resources in your community and be prepared to share them with your group. How might you support someone’s treatment and connections to these resources?

9. So where do we go from here? What’s next in making your congregation more knowledgeable and supportive? What are some of the steps you/we need to take?

10. Please fill out feedback form and return it to your leader for mailing.

Prayer:

Lord, we thank you for the opportunity for getting to know more about the struggles people experience when dealing with mental illnesses. We pray that you will give us the courage and wisdom and compassion to support our brothers and sisters, and receive their support, in a way that is honoring to them and you. Forgive us when we make mistakes, and provide us the grace to carry on again. Bless us as we try to be partners in the work of your kingdom. Amen.

An Open Letter to My Church Family

I am writing this letter to you as a plea for understanding, not only for me, but also for others who suffer with similar illnesses. You are my family in the Lord. I love you, and I know you want to be supportive to me. While I cannot speak for every mentally ill person, many of the statements I make are true for others. A few may be unique to me.

I believe mental illness is today’s leprosy. Even in the church, it is shrouded in silence and isolation. Admitting to having a mental illness is a kind of emotional suicide. “Don’t talk about it,” I have been advised by those closest to me. Deep inside, I know they are right. I did speak out when I was first diagnosed, and I bear the stigma that accompanies mental illness because I did. Being quiet now won’t erase that, but maybe if I do speak out, someone will understand. Maybe that someone will be you.

The most important thing to me is that you accept my mental illness for what it is: an illness. It hurts when some of you treat my illness as a character flaw or sin condition. It is just as painful when you pretend nothing is wrong with me and that, if I would just ignore my illness, it would somehow all go away.
Please don’t hold out false hope to me. If I had cancer or diabetes, you wouldn’t guarantee me God’s healing. Don’t promise that to me now. I am very aware of God’s healing power, but I know God may or may not choose to heal me. As with any illness, he may choose to allow me to experience it instead.

I know God loves me. I believe his promises are for me, including the one that says, “In all things God works for the good of those who love him” (Rom. 8:28). I don’t understand why mental illness is part of my life, but I believe my life is in God’s hands. Whatever God chooses for me, I want to bring him glory. I am learning to walk daily, holding to his hand, just as you do, only I probably have to cling a little tighter.

One thing I really need from you is your prayer support, but all the warnings I have been given about keeping quiet about my illness make it hard for me to ask. I don’t want to dwell on my symptoms, but there are times when I feel overwhelmed by them and I wish I could tell you so without feeling guilty.

You may wonder what to pray for people like me. Pray that my symptoms won’t lead me into sin. Pray for my relationships with my family and friends because those close to me suffer with me. Pray that God will help me to be a consistent Christian, despite my illness. Pray that Jesus will be seen in me. Of course, pray for my healing, but also pray that God will help me to accept my illness if healing is not his will for me. Your prayers are the best support you can give me. You and I may never know the depths to which I might have sunk without them.

Being able to serve the Lord is important to me. I owe him a debt of love I never can repay. Before you knew I had this illness, I had many opportunities to serve. I am still the same person with the same talents. Have you lost confidence in me just because you know I have an illness? I am still a capable person. Please don’t declare me unfit to serve. Instead, I need your support, a mighty outpouring of prayer, that God will make me equal to any calling he gives me.

As with any illness, I may have to limit myself at times in order to protect my health and to ensure doing my best for the Lord. Please allow me to set my own limits with the help of God, my family, and my doctor. If I see my symptoms are interfering with my service to the Lord or that my health is being adversely affected, I will resign. Pray that God will give me discernment in this area of my life.

While I appreciate your understanding, I don’t want you to think you must tiptoe around me. I want your empathy, not your pity. When some of you watch me so carefully for signs of the illness, I know you mean well and only want to help me, but it makes me feel like I’m under a magnifying glass.

Also, everything is not a symptom of the illness; nor can everything be blamed on it. I am responsible for the choices I make, just as you are.

One of the most painful things for me is when someone tries to “help” me control my emotions in front of others. All that does is add embarrassment to my emotional overload. Telling me to “calm down” or “relax” is pointless. If I could, don’t you think I would? I don’t doubt your motives are pure in trying to help me, but my self-esteem is shattered by that kind of help. The best thing you can do if you really feel I need help in a certain situation is to tell me privately.

The one positive aspect of my illness is the creativity that often accompanies it. At times I get overly excited about ideas I have. One of my greatest frustrations is having my ideas discounted just because of my illness. I would love to be able to present my ideas as matter-of-factly orally as I do in writing, but sometimes I find that difficult. If you can look past my emotions, you will find many of my ideas are good ones. Examine them for their own merit, and then decide whether they are worthy of consideration.
Finally, no letter about my illness would be complete without my giving glory to God for all he has brought me through. Looking back, I can see God’s love was reaching out to me even when I experienced the darkest moments of my life. God restored me, giving me more balanced mental health. I don’t know what the future holds for me, but I am not afraid. Because God is with me, I have hope for the future in the midst of the uncertainty of my illness. My emotions cannot always be trusted, but my God can. I trust my life to him (©Pathways to Promise, used with permission).
Feedback Form

Please tell us your experience with this series.

1. What did you enjoy about the study?

2. How was it helpful?

3. How could it be improved?

4. What suggestions do you have for further study on mental illness or related issues?

Please send to Rev. Mark Stephenson, 2850 Kalamazoo Ave. SE, Grand Rapids, MI 49560, USA; or email Disability Concerns at disabilityconcerns@crcna.org.