Mental Health Ministry
A Toolkit for
Faith Communities

Equipping communities of faith to share the journey of healing & recovery with individuals & their families facing mental illness, addictions, & trauma.

BRIDGING FAITH, CULTURE AND MENTAL HEALTH

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Letter to Readers

Dear Friends,

Pathways to Promise is an interfaith cooperative of many faith groups which was founded in 1988 by fourteen faith groups and mental health organizations to facilitate the faith community’s work in reaching out to those with mental illnesses and their families. This Mental Health Ministry Toolkit for Faith Communities is one of the many tools we have developed to assist faith communities.

This toolkit is designed to help you and your faith community develop spiritual care with individuals and families facing mental health issues. We encourage you to adapt these general resources to your particular faith and local community. We also encourage you to consult and collaborate with mental health professionals and providers in your community. The toolkit contains content in the areas of education, community, hospitality, service and advocacy.

If you have any comments, questions, or suggestions about any of the material you find in these pages, please send them to: info@pathways2promise.org

Lead Consultant/ Executive Director
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Introduction:

*Basic definitions, faith & recovery.*
Basic Definitions

People of faith have responded to illness and healing for thousands of years by caring for each other in times of need and they continue to do so today. Modern science shows us that illnesses of the brain, including mental illnesses, are like other illnesses in many respects, and our faith tells us that those who are mentally ill deserve our care just as do those who are physically ill.

The brain is the most complex organ in the body, composed of hundreds of billions of cells, each one a microscopic miracle of living. creative activity. Like any other part of the body, the brain can become injured or ill.

Let’s consider some of the terms commonly used in this context.

**Mental illness.** “Mental illness” is a widely used term referring primarily to depression, bipolar disorder, and schizophrenia. The symptoms of suffering include dramatic changes in a person’s mood, thinking, behavior, and relationships. For much of human history, mental illness has been surrounded by myth and stigma. Sufferers have been feared, punished, and isolated, and their families blamed or ignored. However, recent advances in medical knowledge and treatment offer new resources for healing and recovery, and the public perception of mental illness is changing.

**Mental health problem/challenge.** “Mental health problem/challenge” is a broader term that includes both mental disorders and symptoms of mental disorders that may not be severe enough to warrant the diagnosis of a mental disorder.

**Brain illnesses.** Research into the biology of the brain has given us a new understanding of the experience and causes of mental illness. Medications that help restore the balance of chemistry in the brain and promote healthy brain functioning are increasingly available. Using the term “brain illness” reminds us that, like any other organ in the body, the brain, too, can be a site of disturbance, disorder, and suffering.

**Mental disorders.** “Mental disorder” is a general term used in the mental health field. When a person presents signs or symptoms of suffering in feelings, thoughts, behavior, and relationships, mental health professionals are trained to look at five areas of the person’s life: the functioning of the brain; a person’s psychology and personality; other medical issues that may be contributing to the suffering; the person’s social situation; and the individual’s basic capacities and usual level of functioning. Care providers psychiatrists, psychologists, nurses, therapists, counselors, social workers, and case managers diagnose a mental disorder when a person’s symptoms endure for a significant period of time and fit a recognizable pattern. The purpose of a good and thorough diagnosis is to guide care and treatment leading to recovery: to provide appropriate medications, counseling, support, and education.

**Spiritual care.** Our faith helps us understand human suffering at the core of our being, in terms of the holy and sacred dimension of our existence and in light of the wholeness, fullness, and purpose of life. Clergy and congregations have care for the soul, for the spiritual well-being of the person and the community. Our special concern is for the movement of the Spirit in us each and in our life together. Imbalances and disturbances in the brain can deeply disrupt someone’s spiritual life and challenge one’s faith.

**A healing team.** Who can help when a person is suffering a mental disorder? A “hands around the table” healing team approach can be helpful. Such an approach involves the patient, his or her family, clergy and congregation, physician, nurse, psychologist, case manager, therapist or counselor, and social worker — all sharing together in the healing process.
Faith and Recovery

How do we understand spirituality and brain illness? What is the role of faith in recovery.” How is a person’s soul affected by a mental disorder? What do religious resources contribute to healing and well-being?

Spirituality — the movement of the Spirit, the activity of the holy and sacred — is deeply woven into the human journey. The spiritual may be seen as a dimension of our lives, as the center and core of our experience, or as the whole, the ultimate context of our existence. We experience the spiritual in moments of faith, in occasions of profound mystery and infinite revelation, and in ordinary, daily life. These moments of faith shape and inform our souls. As souls, we gather in communities of faith, creating spiritual traditions and forming religious institutions: congregations, synagogues, mosques, or temples — or simple, quiet meetings of silence and meditation.

Disorders in brain function and biology can significantly alter one’s spiritual experience. In the course of a major depression, a person may experience a great, even absolute, distance from God. During periods of mania in bipolar disorder, a person may have an experience of being God in some extraordinary and unusual way. During an episode of schizophrenia, quasi-religious or pseudo-spiritual activity may occur, such as hallucinations with bizarre heavenly content, or delusions involving strange, personally unique notions of the sacred or divine. It is the task of the faith community, along with other caregivers, to help discern what is authentically of the Spirit, and what is of illness and imbalance in the brain.

Care and treatment, medicine, therapy, counseling, and education may be necessary to help re-store brain function and balance, and open the way to new health and well-being. It is the calling of the faith community —— of clergy, laity, and congregation — to be a part of the healing team, offering encouragement and support.

In the course of healing and recovery, we who are members of faith communities have specific gifts to offer. We can hold ourselves open to the deepest levels of renewal and restoration of health. After doing together all that is possible by way of diagnosis and treatment, as patient, family, people of faith, and care providers, “we wait,” as one doctor put it, “for healing coming toward us.” We can offer a fellowship of the fragile, the vulnerable and the wounded. We can share practices of prayer and meditation, and the healing power of loving relationship as companions. one of another, in small groups.

As faith communities, we have care for the soul. We pastor and counsel. We share one another’s burdens, and we share our stories of salvation, purpose, and meaning. In sacrament, rite, and ritual, we gather for worship and celebration, lifting up a life path that leads to fullness of health and well-being. We help each other become whole.

Mental illness, brain illnesses, and mental disorders are forms of human suffering that often ca: an individual and his or her family into exclusion and isolation. Our calling us” faith communities is to open the doorways of inclusion, to become centers of healing and growth.
How to Start

You may have experience with mental illness. A loved one in your family may have experienced a brain illness. You or someone you love may be in recovery or may have struggled with trauma. Your son or daughter may be a returning veteran with a brain injury, depression, or PTSD. You may have an elderly parent, relative, or friend with depression or dementia.

You may be a psychologist, psychiatrist, nurse, social worker, counselor, therapist, or case manager. You may volunteer in a shelter or meal program. You see the suffering and know the need. You can begin, alone or with two or three others, to create a mental health movement in your local faith community. You and your faith community can make a difference by:

- Building awareness, addressing stigma, and developing understanding
- Actively welcoming individuals and families who face mental illness, addictions, and trauma
- Becoming a community of healing and a center of support for healing and recovery
- Offering wellness services — companionship, small groups, and concrete resources such as referrals, shelter, housing, and employment
- Advocating for understanding in your neighborhood and for an effective community mental health system

A challenge. Here’s a simple challenge, for a start: Do one thing this year in your faith community. You might, for example, put a few pamphlets out on a table during Mental Illness Awareness Week (the first full week in October). Or you might put up a sign or poster that says “Welcome!” to the neighbor who comes to your door seeking help or support. You might include those who are suffering from mental illness, addictions, and trauma in your prayers; host a community mental health program or support group in your building; or share with others in your faith community what you’ve learned about a research project or piece of legislation.

And when you feel ready to do more, you might consider adding activities such as the following:

Be a personal witness
- Join with a handful of others in your faith community at least one or twice a year to share your experience, concerns, and resources
- Become a team, a task force, a committee, or core group meeting regularly to foster education, hospitality, community, service, and advocacy with individuals and families facing mental health issues in their lives
- Create an annual program of activity across the life of your congregation in mental health ministry
- Work with neighboring congregations, the wider community of faith, community allies, and mental health care providers to do together what none of us alone can accomplish

This Pathways toolkit can help you take action. Use what you find most helpful in these pages. Reach out, send e-mail, call for advice. In your town, city, state, and across the country, you will find people of faith who are ready, willing, and able to assist.
Section One: Education

Building awareness, addressing stigma, and developing understanding
An annual education checklist for mental health ministry

The following is a schedule of tasks you and your group can take on, one each month beginning in September, to develop and put in practice a mental health ministry.

Please note that this is only a suggested schedule and task list --- and you don’t need to accomplish all of the tasks in one year. Pick one or two to get started, and think in terms of building up your mental health ministry education programs over several years.

<table>
<thead>
<tr>
<th>Month</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>SEPTEMBER</td>
<td>Write a letter of hope and concern to your clergy, leadership group, or congregation</td>
</tr>
<tr>
<td>OCTOBER</td>
<td>Distribute Mental Illness Awareness Week resources</td>
</tr>
<tr>
<td>NOVEMBER</td>
<td>View and discuss the “Creating Caring Congregations” video</td>
</tr>
<tr>
<td>DECEMBER</td>
<td>Schedule a presentation of “In our Own Voice or “Sharing Hope”</td>
</tr>
<tr>
<td>JANUARY</td>
<td>Present a “Walking Together” workshop</td>
</tr>
<tr>
<td>FEBRUARY</td>
<td>Invite a pastoral counselor to lead a viewing of “Men Get Depression”</td>
</tr>
<tr>
<td>MARCH</td>
<td>Organize a book study group</td>
</tr>
<tr>
<td>APRIL</td>
<td>Distribute materials for Alcohol Awareness Month</td>
</tr>
<tr>
<td>MAY</td>
<td>Share literature about Mental Health Month and Children’s Mental Health Awareness Day</td>
</tr>
<tr>
<td>JUNE</td>
<td>Schedule a presentation or discussion on trauma and abuse</td>
</tr>
<tr>
<td>JULY</td>
<td>Review and discuss mental health resources specific to your community of faith</td>
</tr>
<tr>
<td>AUGUST</td>
<td>Invite your spiritual leader or a gust to reflect on spiritual care and mental health</td>
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A letter to your community of faith

How can you start the ball rolling in your faith community? Here are some possible ways:

- As an individual, expressing your concern in an informal conversation with the clergy of your congregation.
- By sharing your interest or your story in a small group
- By quietly offering a prayer in morning worship
- Making some mental health resources available at an information table

You will probably find at least one or two others in your congregation who share your interest. Together, you can begin to educate yourselves and prepare to carry the message to the wider congregation.

Once you’ve gotten a couple others involved, inform the leadership of your faith community about your hopes and concerns. On the right is a model letter which you can adapt to begin the larger conversation. You can also use the letter as an annual framework in years to come, lifting up the need, affirming the faith that guides you, reporting on current and future activities, and inviting the support of the community for an ongoing mental health ministry.

You can find a wealth of data on the Web about the percentages of Americans suffering from mental illness, the social and economic impact of mental illness, the incidence and treatment of alcohol problems, and more. Good places to start are the pages of the National Alliance on Mental Illness (NAMI), the National Institute of Mental Health (NIMH), and the Substance Abuse and Mental Health Services Administration (SAMHSA).

Where to find it online:
National Alliance on Mental Illness (NAMI)* www.nami.org
National Institute of Mental Health (NIMH)* www.nimh.nih.gov/
U.S. Substance Abuse and Mental Health Services Administration* www.samhsa.gov/

*Note: These Web addresses will take you to the home page of the organizations. For a more direct link to the data, see page 21.

Dear Friends and Fellow Members in Faith,
Consider the following facts:
- In any given year, one in four adults suffers from a diagnosable mental disorder.
- 10% of children suffer a serious mental or emotional disorder such as pervasive developmental disorder (PDD).
- More than 10% of adults will experience a serious mental illness (major depression, bipolar disorder, schizophrenia) in the course of their lives.
- According to a 2007 national survey, 19 million Americans age 12 or older needed treatment for their alcohol problem.

Our faith calls us to compassion, to care for the sick. Healing and wholeness are at the heart of our life together.

We are individuals who have experienced illness, family members who have a loved one who has needed care, mental health providers who serve in the field, and members of this congregation who see a need. We have started a conversation and begun to collect helpful information and resources. In the coming year we would like to offer a series of educational activities that will help us all learn more. We see this as a way to serve members and friends of the congregation and reach out to our neighbors and community.

We seek your encouragement and support in this mission.

Sincerely,

[signatures]
Distributing Mental Illness Awareness Week resources

The National Alliance on Mental Illness (NAMI) sponsors Mental Illness Awareness Week (MIAW), which generally begins on the first Sunday in October of each year. NAMI FaithNet, an outreach network of members and friends of NAMI, has designated Tuesday of Mental Illness Awareness Week as a national day of prayer.

Numerous handouts, pamphlets, and brochures are available from NAMI and its 1,100 state and local affiliates. The NAMI Web site provides a variety of downloadable materials, including an "idea book." The NAMI Faithnet Web Site provides a variety of suggestions for organizing a local day of prayer.

Other organizations that offer resources for use during MIAW include Mental Health Ministries and Pathways to Promise.

Here are some activities you might want to pursue for Mental Illness Awareness Week:

- Put an MIAW announcement in your newsletter or bulletin
- Set up a literature table
- Prepare and distribute a handout among your congregation members
- Invite members to wear a MIAW logo during the week
- Place a copy of the annual poster in a prominent place for the week

Where to find it online:
National Alliance on Mental Illness (NAMI)* www.nami.org
NAMI Faithnet* www.nami.org/namifaithnet
Mental Illness Awareness Week* www.nami.org/miaw
Mental Health Ministries * www.mentalhealthministries.net
Pathways to Promise * www.pathways2promise.org

* Note: These Web addresses will take you to the home page of the organizations. For more direct links to the information mentioned, see page 20.

Use this space to list ideas for next year:

Use this space to list partners you can work with in the future:
Mental Health Ministries and Third Way Media (formerly known as Mennonite Media) have collaborated in producing a series of videos and other resources to help educate and mobilize congregations on a variety of mental health concerns. “Creating Caring Congregations” is a 30-minute video with study guide that explores five areas of mental health ministry — education, covenant and commitment, hospitality, support, and advocacy. “Mental Illness and Families of Faith: How Congregations Can Respond” is a two-DVD set that educates congregations about various mental health issues. “Mental Health Mission Moments” contains nine 2- to 3-minute clips that can be used as excellent discussion starters in small groups. The Resource Guide for this DVD also includes sermon starters, liturgical material, additional scriptural references, and other materials to help educate congregations.

MHM newsletter. Mental Health Ministries has a monthly “Spotlight” e-mail newsletter that offers brief, useful, and up-to-date information on various aspects of mental health ministry, including new resources, programs, events, and links. It’s a good idea to get on the e-mail list.

http://www.mentalhealthministries.net/

Third Way Media has a series of videos on mental health issues, including “Shadow Voices: Finding Hope in Mental Illness,” and “Fierce Goodbye: a Faith-based perspective on Suicide.”

Where to find it online:

"Shadow Voices” https://store.mennomedia.org/p-127-shadow-voices.aspx

Scheduling a presentation of “In Our Own Voice” or “Sharing Hope”

“In Our Own Voice” is NAMI’s signature program. It's a public-education program in which mo persons who hate experienced mental illness help show and narrate a video that explores the symptoms and experience of mental illness. The special gift is in not only hearing the stories on the video but listening person to person, as neighbors from the community share their own experiences.

**NAMI’s Multicultural Action Center (MAC)** has developed a one-hour presentation titled "Sharing Hope: Understanding Mental Health.” designed to help a congregation begin exploring mental health issues. The pilot project has focused on training people for outreach with African- American congregations. NAMI Faithnet and NAMI/MAC are collaborating on adapting “Sharing Hope” as an introductory resource for a wide range of faith communities.

**Additional programs and resources**

**Local and state NAMI resources.** NAMI has state organizations and some 1,100 local affiliates around the country. Local affiliates can be a useful source of information about community resources. Local NAMI Affiliates also organize such signature programs as “Family to Family,” a 12-session course for families with loved ones experiencing mental illness; the Peer-to—Peer Recovery Education Program, a course that includes relapse prevention; and Connections Recovery Support Groups.

**Pathways to Promise** has made available a manual and videotape on ministry and mental illness titled Pathways to Understanding, by Jennifer Shifrin, together with a brief study guide. The personal testimonies in a section called “Narratives” is particularly interesting.

**Where to find it online:**

NAMI FaithNet [www.nami.org/namifaithnet/](http://www.nami.org/namifaithnet/)
"In Our Own Voice” and “Sharing Hope” : See page 20.
To find a local NAMI affiliate: [https://www.nami.org/Find-Your-Local-NAMI](https://www.nami.org/Find-Your-Local-NAMI)

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*Use this space to list other consumer and family speaker contacts:*
Walking Together

Pathways to Promise has developed a workshop called “Walking Together: A Training Workshop for Faith Communities Interested in Supporting People with Mental Illness.” a hands-on, activity-based educational experience for a local congregation. The aims of the workshop are to:

- Reduce the stigma associated with mental illness and reduce the discrimination experienced by people with mental illness
- Empower those who experience mental illness to be equal and respected members of the church community
- Create a safe place in our churches for those who experience mental illness
- Encourage each participant to become more accepting and welcoming within their faith communities

The workshop is built around nine activities that enable participants to reflect, remember, and understand the “how” and “why” of stigma.

It’s easy to get started and to conduct the workshop:

1. Identify a coordinator or facilitator.
2. Order and review the workshop manual from Pathways to Promise.
3. Schedule a time and place.
4. Send out announcements and publicize the event.
5. Hold the workshop.
6. Share your experience and learning with the congregation.

Where to find it online:

Invite a pastoral counselor to lead a viewing of “Men Get Depression”

“Men with Depression” is a set of documentary videos produced for a public awareness campaign aimed at helping men and their families who are dealing with depression. The American Association of Pastoral Counselors (AAPC) has partnered with Men Get Depression to make these videos available to local congregations. Local pastoral counselors can help you set up a video screening and assist in leading a discussion.

There are separate videos targeting different age groups (18—30, 30—55, and 55+). The videos are close-captioned and they feature a choice between English and Spanish language.

Not “for men only.” The presentation addresses the stigma and myths associated with depression, especially as they affect men, but it is a help to the congregation and to the whole family.

Other resources and presenters

A wide range of other resources are available. The Web-based Congregational Resource Guide has an extensive list of books, videos, and links that can help you develop educational presentations and programs.

Professional resources. Pastoral counselors, such as those affiliated with the APCC, are professionals trained in both mental health and pastoral care. They bring an understanding of theology, psychology, and psychiatry to their care and teaching. The AAPC encourages its members to serve as resources in the community.

Other professionals can also be helpful presenters:

- Psychiatrists and psychiatric nurses (specialized medical training, expertise in medications)
- Psychologists, therapists, and counselors (training includes a wide range of approaches to diagnosing and providing care for mental health issues)
- Clinical social workers (counseling skills plus a knowledge of how to help individuals with systems and services)
- Case managers (help individuals in recovery meet their basic needs: gaining access to treatment and making appointments, finding stable and appropriate housing, helping with benefits, and connecting clients to other important resources)

Where to find it online:

Men Get Depression (resources) [www.mengetdepression.com/resources](http://www.mengetdepression.com/resources)


AAPC: Find a counselor [http://www.aapc.org/page/Counseling](http://www.aapc.org/page/Counseling)

Congregational Resource Guide: [www.congregationalresources.org](http://www.congregationalresources.org)

Use this space to list other topics and speakers:
Organizing a book study

Books on mental health topics cover a wide range. The Pathways to Promise home page has a direct link to “Annotated Mental Health Resources,” a page that includes brief descriptions of books on spirituality and mental health. The Congregational Resource Guide has additional book suggestions, including resources on addictions, trauma, and abuse.

Choose a book to help educate the congregation. Invite the clergy and leadership of your faith community to join in the reading project. Recommend the book to existing reading groups in the congregation or other small groups — house churches, youth and young adult groups.

If possible, pick a book that has an accompanying study guide. Then follow these simple steps:

1. Ask someone to facilitate the discussion.
2. Reserve the date or dates and a place to meet.
3. Help people get copies of the book by ordering copies through a local bookstore, over the Internet, or directly from the publisher. Check to see if your local library has copies.
4. Prepare some handouts that list a few key local resources.
5. Send the author(s) a letter or email with any questions or suggestions you have.

Here are some suggestions about how to make the discussions work:

- Invite people to respond to the book as a whole as well as to various topics within it.
- Encourage participants to share their questions and their own experiences.
- Keep the conversation moving, inviting people to speak briefly and encouraging everyone to contribute to the discussion.
- Encourage participants to share the book with others in their family, the congregation, or the community.

**Sample study guide questions.** If the book you choose doesn’t have a study guide, feel free to develop your own and distribute copies to group participants before the first meeting. Here are a few examples:

1. Have you yourself ever had an experience with depression, bipolar disorder, or any other form of illness stemming from a brain disorder?
2. Has a friend or loved one ever experienced such a problem?
3. Think about your religious or moral upbringing. What did it teach you about:
   - How you should relate to those you know who are suffering?
   - What to think of a person who is different (in any sense) from you?
   - How to treat someone whose behavior seems weird or abnormal?

**Where to find it online:**

Pathways to Promise home page  [www.pathways2promise.org](http://www.pathways2promise.org)
Distribute materials for Alcohol Awareness Month

The U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) has a Web site devoted to information and resource materials for Alcohol Awareness Month. There you can order posters, pamphlets, and videos about both alcohol and drug abuse.

Most Americans know of Alcoholics Anonymous (AA), an organization aimed at helping people recover from alcohol abuse through a 12-step program. Another "12-step"organization is Al-Anon/Alateen, which offers programs in support of families and friends of problem drinkers. Both Al-Anon/Alateen and AA have Web Sites with resource material and literature available.

The National Association for Children of Alcoholics (NACoA) focuses on the goal of eliminating the adverse impact of alcohol and drug use on children and families. NACoA makes a number of resources available from its Web site, including several useful “Webinar” slide presentations, of which “Alcohol and Drug Dependence and Its Impact on Family and Community” is especially recommended.

Importantly, NACoA and the American Association of Pastoral Counselors (AAPC) have collaborated on offering a one-day training program for clergy and congregations. You might use Alcohol Awareness Month to share information about this and consider co-sponsoring a training workshop in your area.

Chemical dependency specialists (also called chemical dependency professionals) are trained and certified to provide substance abuse and addiction treatment. They and their programs will generally have resource material. You might find them in your telephone yellow pages or by searching the Web.

Where to find it online:

SAMHSA home page www.samhsa.gov
Alcohol Awareness Month https://blog.samhsa.gov/tag/alcohol-awareness-month/
Alcoholics Anonymous (AA) www.aa.org
Al-Anon/Alateen www.al-anon.alateen.org
NACoA www.nacoa.org
American Association of Pastoral Counselors (AAPC) www.aapc.org

Use this space to begin a list of local drug and alcohol treatment providers and resources:
Share literature about Mental Health Month and Children’s Mental Health Awareness Day

**Mental Health Month** is sponsored by Mental Health America (MHA), a nonprofit organization of patients, families, and mental-healthcare providers. In 2009, MHA used Mental Health Month to launch "Live Your Life Well," a publication with ten specific, research-based tools that can combat stress and promote well-being. This publication also provides information on seeking the help of a mental health professional. MHA has fact sheets, brochures and other information available.

**National Children’s Mental Health Awareness Day**, occurring during Mental Health Month, is an effort by SAMHSA in cooperation with the Technical Assistance Partnership for Child and Family Mental Health (TA Partnership) — a long name and a big task. The TA Partnership Web site has resources in both English and Spanish, including information on the Post-NOW campaign, a broad-based community education project.

Mental Health Month is a good opportunity to invite staff from nearby community mental health services to speak to the congregation about their work. It’s also a good time to become acquainted with other services and resources in your community. For example, schools and colleges have counselors and therapists. Pastoral counseling centers, faith-based social service programs, and private counselors provide individual, group, marriage, and family counseling.

Often, counties are the government unit responsible for mental health and chemical dependency services. States have basic responsibilities for basic mental health services policy, legislation, and funding. At the federal level, the National Institute of Mental Health (NIMH) focuses on research; the Substance Abuse and Mental Health Services Administration (SAMHSA) and SAMHSA’s Center for Mental Health Services (CMHS) are key resources.

The National Association of State Mental Health Program Directors (NASMHPD) and the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) bring state, county, and local authorities together.

**Where to find it online:**

Mental Health America (MHA)  
Children’s Mental Health Awareness Day SAMHSA  
National Institute of Mental Health (NIMH)  
NASMHPD  
NACBHDD  

www.nmha.org  
https://www.samhsa.gov/children/national-events  
www.samhsa.gov/children/  
www.nimh.nih.gov  
www.nasmhp.org  
www.nacbhd.org
Schedule a presentation on trauma and abuse

Traumatic events can have a powerful effect on people’s bodies and lives. Natural disasters, war and violence in any form, poverty, homelessness, and illness all can profoundly influence a person’s mental health and well-being. Abuse — meaning acts of personal assault, sexual and domestic violence or physical and emotional neglect — can have a similarly deep and lasting effect on a person’s life.

Several types of organization offer support and resource materials on trauma and abuse:

- Faith Trust Institute provides training and resources around the country, particularly focused on working with clergy and congregations.
- The Sidran Institute’s Risking Connection® provides trainings and resource material, a reading list, and a helpdesk providing links to resources in your local area.
- The Center for Social Innovation, headquartered in Newton, Mass, provides a Web site with selected trauma resources and links to a variety of trauma and PTSD resources.
- The Congregational Resource Guide has a number of print and online resources available on abuse and trauma.
- Your local Veterans Affairs (VA) office and health center will have information on resources for returning veterans.
- The children and family divisions of your state’s Department of Social and Health Services will have staff familiar with issues of domestic violence and abuse affecting children and youth.
- Colleges and universities offering school counseling programs, as well as their departments of psychology, nursing, and social work are also possible resources for presentation and assistance.
- Local pastoral counseling programs, community mental health centers, and social service agency staff provide front-line outreach, treatment, and care.

Where to find it online:

Faith Trust Institute  www.faithtrustinstitute.org
Risking Connection  www.riskingconnection.com
Center for Social Innovation  www.center4si.com
Local VA services  www.va.gov/directory/

Use this space to begin a list of local resources:
### Reviewing mental health resources from your faith group

Many religious groups and denominations have developed their own statements and resources on mental health, and some have organized networks among their members and clergy to encourage and develop mental health ministries. The national interfaith organization, Pathways to Promise, provides links to a number of national faith groups and their resources. The Pathways list includes, among others:

<table>
<thead>
<tr>
<th>Faith Group/Network</th>
<th>Faith Group/Network</th>
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<tbody>
<tr>
<td>American Baptist Churches in the USA</td>
<td>National Catholic Partnership on Disability</td>
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<tr>
<td>Christian Church (Disciples of Christ)</td>
<td>National Health Ministries</td>
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<tr>
<td>Christian Reformed Church in America</td>
<td>Presbyterian Church (USA)</td>
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<tr>
<td>Church of God Anderson, IN</td>
<td>Union of American Hebrew Congregations (Ref)</td>
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<tr>
<td>Episcopal Church</td>
<td>United Church of Christ</td>
</tr>
<tr>
<td>Evangelical Lutheran Church in America</td>
<td>United Methodist Church</td>
</tr>
<tr>
<td>Lutheran Church — Missouri Synod</td>
<td>United Synagogue of America</td>
</tr>
<tr>
<td>Mennonite/Anabaptist Disabilities Network</td>
<td>Virginia Interfaith Committee on Mental Illness Ministries</td>
</tr>
<tr>
<td>Mennonite Central Committee, Canada</td>
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</tbody>
</table>

At the national level, faith groups generally have two departments with an interest in mental health issues. Staff working with local congregational leadership, growth, and development may be able to provide assistance and resources on education, hospitality and inclusion, as well as materials for worship, small groups, and other purposes. Staff working on health and social justice issues may be helpful in developing service and advocacy efforts.

Where to find it online:


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*Use this space to write notes about faith group/denominational resources:*
Invite your spiritual leader or other spiritual care providers to reflect on faith and mental health

Clergy, too, sometimes struggle with mental health issues, or have family members who face mental health challenges. Virtually all spiritual leaders have been asked for help by someone who is facing mental illness, substance abuse issues, trauma, or abuse. Your spiritual leader may welcome an opportunity to preach, speak, or share in a conversation. He or she may also welcome the opportunity to invite a colleague to make a presentation.

Others engaged in spiritual care in your community may be available as speakers:

- Specialized clergy (pastoral counselors, chaplains, and spiritual care staff serving in hospitals, state institutions, social service agencies, residential programs, and other settings)
- Faculty of seminaries and theological schools who teach pastoral care and counseling
- Students serving internships in clinical settings and their supervisors are also potential presenters and educational resources

You might think in terms of not just holding a one-time activity, but beginning to build ongoing relationships and mutual support with key spiritual leaders and religious resources in the wider community.

**Where to find it online:**

Association of Professional Chaplains (APC) [www.professionalchaplins.org](http://www.professionalchaplins.org)
Association of Clinical Pastoral Educators (ACPE) [www.acpe.edu](http://www.acpe.edu)
COMISS Network on Ministry in Specialized Settings [http://www.comissnetwork.org](http://www.comissnetwork.org)

Web sites of colleges, universities, and seminaries in your area

Use this space to list spiritual care resources in your area:
Specific online locations of information referred to in this section

Page 3, for data on mental health incidence and impact

NAMI: https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers
SAMHSA: https://www.samhsa.gov/data/node/20

Page 4, for specific information

Mental Illness Awareness Week https://www.nami.org/Get-Involved/Awareness-Events/Mental-Illness-Awareness-Week

NAMI FaithNet Day of Prayer: https://www.nami.org/NAMIFaithnet
Mental Illness Awareness Week logos https://www.nami.org/getyourlogo

Page 6, NAMI Resources:

“In Our Own Voice”: https://www.nami.org/Find-Support/NAMI-Programs/NAMI-In-Our-Own-Voice
“Sharing Hope” https://www.nami.org/sharinghope
Section Two: Community

*Building commitment and community as a caring congregation*
Mental health ministry and our faith community: For review and reflection

What is your faith community doing now by way of mental health ministry? What more might you be doing? You may find the following checklist helpful as you look at what you are now doing. As you review and reflect, you may be inspired to add activities or move in new directions.

**Education**

We provide education on:

- Mental illness Alcohol and drugs (substance abuse, chemical dependency, addictions)
- Trauma and abuse Child development and parenting
- Personal growth
- Marriage and family issues
- Aging
- Special mental health needs in our congregation and wider community

**Caring congregation**

- We are building a caring congregation by: Adopting mental health ministry as a care and concern
- Encouraging the formation of a mental health task force
- Providing clergy and staff support
- Developing a statement of our faith and commitment to mental health ministry

**Support/advocacy**

- We welcome, support, and advocate for persons on the journey of healing and recovery in our:
- Fellowship and small group life Children’s, youth, and adult education programs
- Pastoral care, spiritual growth and healing ministries
- Outreach, charity, and service Public witness and advocacy for justice
- Prayers, meetings, and worship
A sample mental health ministry covenant

Your faith group might consider adopting a covenant that commits itself to supporting those in your community who suffer from mental illness. The following is taken from a covenant adopted by the First Congregational Church of Boulder, Colorado in collaboration with the Mental Illness Network of the United Church of Christ (UCC). This covenant suggests some ideas and principles to include in a mental health ministry covenant. You may wish to develop a similar statement for your national or regional faith organization — or for your local congregation.

A WISE Congregation for Mental Health For all with mental health challenges and their loved ones

We, the people of First Congregational Church of Boulder, Colorado, know we are graced by the gifts, stories, and experiences of all our members, including those living with mental health challenges such as, but not limited to, mental illnesses, brain disorders, addictions, and trauma. We know these challenges can profoundly disturb our feelings, thoughts, and behavior. We care about the whole person: body, heart, mind, and soul. We affirm the deep and constant movement of God’s Holy Spirit, seeking to bring us to the fullness of life. We believe that all people are beloved by God, and if a person has a mental health challenge that person has a right to be seen as a person first. Jesus said the greatest commandment is to “Love the Lord your God with all your heart and with all your soul and with all your mind, and to love your neighbor as yourself.” He made no distinction between various members of society; he did not show any partiality. He included all people in this commandment. Sometimes individuals with mental health challenges such as brain disorders, mental illnesses, addictions and trauma feel cut off from God and do not feel included. It is our calling to communicate to all individuals that God loves all of us equally, even when we do not feel the love of the Holy Spirit in our lives. People with mental health challenges have gifts to be offered in our faith community, and we want everyone to feel fully welcomed, included, supported and engaged in the life, work and leadership of our church. We, the First Congregational Church, United Church of Christ, of Boulder, Colorado, vote to continue to be a welcoming, inclusive, supportive and engaged (WISE) congregation for mental health.

Call to action:

We pledge to create a welcoming environment for people with mental health challenges and their families:
• We pledge to educate ourselves and offer educational opportunities to help our whole congregation understand the issues surrounding the mental health challenges such as mental illnesses/brain disorders, addictions and trauma and the implications of this covenant.
• In an effort to reduce social stigma, we pledge to examine our own attitudes and preconceived notions about mental health challenges and mental health and to confront our own ingrained stigma.
• We pledge to actively welcome those with mental health challenges into our faith community and provide a safe environment in which people can tell their stories and share their journeys.

We pledge to include people with mental health challenges in the life, work and leadership of the congregation:
• We commit to recruiting, nominating and supporting persons with mental health challenges to serve on teams and in leadership positions within the congregation.
• When calling clergy and other staff, we pledge to be open to hiring persons with mental health challenges.

We pledge to support people in our congregation who have mental health challenges and their families:
• We pledge to reach out to those suffering from brain disorders/mental illnesses, addictions, and trauma in the same way we reach out to those living with other physical illnesses.
• We pledge to offer companionship and compassion for individuals and families living with mental health challenges.

We pledge to engage with other organizations that work at the intersection of mental health and faith/spirituality/religion:
• We pledge to welcome and encourage outside groups who deal with mental health challenges, brain disorders/mental illnesses, addictions, and trauma to use our church facilities.
• We pledge to engage with other organizations to find opportunities to be in shared mission, ministry and advocacy together. This includes working with our church’s Mental Health Ministry team, the UCC Mental Health Network and the UCC Disabilities Ministry. This vote affirms that we join in the process of always becoming more welcoming, inclusive, supportive and engaged with all of God’s people.

Note: For online information about the UCC Mental Illness Network visit http://mhn-ucc.blogspot.com/
Pathways resources for clergy and congregations

Pathways to Promise offers numerous pamphlets, brochures, and videos on various aspects of mental health ministry. These materials are available for purchase at nominal costs. The following titles are particularly recommended:

Caring for the Soul: R fu’at HaNefesh—A Mental Health Resource & Study Guide

A study guide by Rabbi Richard F. Address, written for congregations to raise awareness and combat the stigma surrounding mental illness for those who are ill and their families. This 136-page guide includes sacred texts and both traditional and modern readings for use in services and support groups, as well as sample sermons, background information on mental illnesses, and other resources.

Pathways to Partnership: An Awareness and Resource Guide on Mental Illness

A booklet of information about mental illness, pastoral and congregational resources, educational models, ideas for community research, and more. Available in Christian and Jewish versions.

Who Has Mental Illness?

A pamphlet about mental illness, resources, and community research. Available in Protestant, Roman Catholic, and Jewish versions.

Mental Illness Awareness Interfaith Worship Resources

A three-booklet series especially useful during Mental Illness Awareness Week (usually the first week in October). The three parts are:
- Worship Resources
- The Bible as a Resource: Materials for Sermons and Articles
- Caring Congregations: Observations and Commentary

Where to find it online:

All materials mentioned above plus more: [http://www.pathways2promise.org/shop/](http://www.pathways2promise.org/shop/)
Additional materials: [http://thecrg.org/](http://thecrg.org/)
Section Three: Hospitality

Welcome those who suffer
A hospitality review

Is your faith community truly welcoming toward everyone, including those who struggle with mental illness? What are some of the ways you can tell how well you are meeting the hospitality challenge? This checklist will help you get a picture of what you’re doing right and what may need improvement.

✓ Do we have signs and symbols that welcome persons who are emotionally fragile or cognitively impaired?

✓ Are our ushers and greeters trained to assist a person who may be struggling with a mental disorder?

✓ Do we have a “companion,” someone from the congregation designated to reach out to and engage persons with special needs during worship times or other gatherings of the faith community?

✓ How do we respond to individuals or families who may need help with a mental health issue?

✓ Are our building and our life as a community open and encouraging of people in need?

✓ Are there multiple opportunities during the week, both large and small, that welcome the stranger, the person who is seeking healing and recovery?

✓ Are we clear about what we can and cannot do to help?

✓ Are we proactive in building relationships? Are we present in our community as volunteers and participants in mental health services and programs?
Signs of care and hospitality

In 2007, Pathways to Promise began a project to distribute “Sunshine From Darkness: setting us free from the stigma of mental illness” posters to 26,000 congregations around the country. This effort was designed to begin a campaign to raise awareness and reduce stigma in faith communities. We encourage you to think of a slogan that your faith community can adopt to share a message of hope and recovery.

Other messages that have been used by communities of faith to signal a welcome include signs bearing the following words:

✓ Come as you are, all are welcome
✓ Whoever you are, wherever you are on life’s journey, you are welcome here
✓ 39 Twelve-Step groups meet here
✓ A Home for Healing and Growth
✓ Our Community Mental Health Resources

Some local faith communities have used bulletin boards with notices such as these:

• Mental Health Ministry: Coming activities . .
• National Alliance on Mental Illness (NAMI) Family-to-Family class meets here

Where to find it online:

https://www.thefreshquotes.com/mental-health/
Guidelines for ushers and greeters

Welcome often begins at the door as a faith community gathers for worship or a program. Checking the internet for guidelines for ushers and greeters will give you pages of possibilities, mostly in the form of material developed by local congregations and suggestions from groups engaged in ministries of inclusion.

The United Church of Christ Disabilities Ministries have developed an initiative called Access to All (A2A) and, in conjunction with the initiative, they offer a downloadable brochure titled “A2A Disability Etiquette: What You Should Know.” The general tips and suggestions in the brochure apply to welcoming persons who face a wide variety of disabilities. There is a brief special section on mental illness.

Where to find it online:

A2A Disability Etiquette [http://uccdm.org/resources/](http://uccdm.org/resources/)
Companioning

Companionship is a relationship responsive to suffering, supportive of healing, and practiced in public. Companioning, developed by the Mental Health Chaplaincy in Seattle, Wash, is a way of sharing the journey with a person who faces mental illness, addictions, or trauma. Companions receive a basic three-hour training and meet regularly together for mutual support in their ministries of presence and encouragement.

During services of worship, Companions make themselves available to any person who comes in struggle or distress. Companions are alert to the needs of persons who may be mentally ill, intoxicated, or deeply vulnerable and afraid.

- Companions practice hospitality by creating safe space; offering a deep respect for each person’s soul, worth, and dignity; and sharing simple gifts of refreshment and nourishment: a quiet place to sit, a cup of water or coffee, an early visit to the fellowship hour table.

- Companions introduce themselves as neighbors and fellow human beings.

- Companions share the journey side by side, perhaps joining a person in a pew.

- Companions listen, hearing a person’s story however the individual chooses, or is able, to tell it.

- Companions are ready to help a person take a next step on the healing journey by making a referral or, on occasion, going with the person to an appointment or service center, but often simply by holding the person in thought and prayer.

- Companions provide a basic relationship of care and trust as one way to support a person in building a healing team.

- Companions also serve in the community at points of need and service such as shelters and meal programs. In some congregations, companions are available for regular, longer-term visiting (e.g., once a month). Companions also serve as volunteers in residential settings, and as volunteers in outreach on the streets. Whatever the setting, companions offer the grace of welcome to our sisters and brothers on the margin, and the gift of relationship to the most isolated and estranged of our neighbors.

Pathways to Promise and The Mental Health Chaplaincy offer a companionship training to be used by clergy and laity to build companion teams in the local congregation. If you are interested and desire to teach the companionship course, please contact Rev. Jermine Alberty, Lead Consultant/Executive Director at jalberty@pathways2promise.org or Kae Eaton, MA Executive Director, Mental Health Chaplaincy at kae@mentalhealthchaplaincy.org if you would like to discuss the possibility of obtaining a training in your community.

Where to find it online:

http://www.pathways2promise.org/pages/companionship-series/
Other congregations

Mental illness, chemical dependency, trauma, and abuse are often issues for persons facing homelessness. In many cities, faith communities and organizations have developed ministries of welcome and hospitality for the people on the street where they are — outdoor places of worship, for example — that serve to create faith community outside. Not only are such ministries effective in and of themselves, but they can teach “housed” congregations helpful lessons in outreach and building caring, supportive relationships with souls hidden or marginalized in our neighborhoods.

A good example is Ecclesia Ministries, the sponsor of Boston’s Common Cathedral, an outdoor congregation that meets on the common in the heart of the city. Ecclesia has built a network of such congregations in other cities around the country and offers a variety of resources and learning opportunities.

Missions and faith-based survival services such as shelters, meal programs, and drop-in centers also provide a readily accessible point of hospitality and entry into care for those in our communities who have the least and may be the most difficult to reach. Congregations have partnered with both outdoor congregations and local mission groups to share in providing front-line hospitality with people who are homeless and struggling with mental health issues.

Where to find it online:

Common Cathedral (Ecclesia Ministries) [http://commoncathedral.org/](http://commoncathedral.org/)

*Use this space to begin a list of local faith-based ministries and services serving persons who are*
Section Four: Service

Resources and models for serving those in need
Know where to find help

Individuals and families may ask for help or a referral. It’s useful to have a basic list of local resources to call on for direct assistance or consultation in creating mental health ministry services in your faith community.

Mental health ministry local resources

<table>
<thead>
<tr>
<th>Name of Resource</th>
<th>Contact Information i.e. phone, email, website</th>
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<tbody>
<tr>
<td>Pastoral counselor</td>
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<tr>
<td>Psychologist, therapist, counselor</td>
<td></td>
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<tr>
<td>Addiction Recovery counselor</td>
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<tr>
<td>Psychiatrist</td>
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<tr>
<td>Community mental health center</td>
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<tr>
<td>Walk-in clinic</td>
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<tr>
<td>Crisis line</td>
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<tr>
<td>Emergency room</td>
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<tr>
<td>Emergency</td>
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<tr>
<td>Local mental health department</td>
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<tr>
<td>NAMI (National Alliance on Mental Illness)</td>
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<tr>
<td>Mental health chaplain</td>
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</table>
Just as CPR helps you assist an individual having a heart attack, Mental Health First Aid helps you assist someone experiencing a mental health or substance use-related crisis. In the Mental Health First Aid course, you learn risk factors and warning signs for mental health and addiction concerns, strategies for how to help someone in both crisis and non-crisis situations, and where to turn for help.

**Topics Covered**
- Depression and mood disorders
- Anxiety disorders
- Trauma
- Psychosis
- Substance Use disorders

Mental Health First Aid teaches about *recovery and resiliency* – the belief that individuals experiencing these challenges can and do get better, and use their strengths to stay well.

**The Mental Health First Aid Action Plan and Interventions Learned**

When you take a course, you learn how to apply the Mental Health First Aid action plan in a variety of situations, including when someone is experiencing:

- Panic attacks
- Suicidal thoughts or behaviors
- Non-suicidal self-injury
- Acute psychosis (e.g., hallucinations or delusions)
- Overdose or withdrawal from alcohol or drug use
- Reaction to a traumatic event

ALGEE, the Mental Health First Aid mascot, and mnemonic for the 5-step action plan

Assess for risk of suicide or harm
Listen nonjudgmentally
Give reassurance and information
Encourage appropriate professional help
Encourage self-help and other support strategies

The opportunity to practice — through role plays, scenarios, and activities — makes it easier to apply these skills in a real-life situation.

**Where to find it online:**

[https://www.mentalhealthfirstaid.org/cs/](https://www.mentalhealthfirstaid.org/cs/)

[https://www.mentalhealthfirstaid.org/cs/take-a-course/find-a-course/](https://www.mentalhealthfirstaid.org/cs/take-a-course/find-a-course/)

*Use this space to list local MHFA instructors.*
Pastoral crisis intervention

When a crisis occurs because of a person’s behavior, it is critical to take action. Failure to respond immediately can contribute to the person’s deterioration and, in some instances, can result in a frightening or threatening situation for the person and others present.

Guidelines for pastoral crisis intervention are available on the Pathways to Promise Web site. The “What to Do in a Crisis” topics cover responding to inappropriate language and behavior, highly agitated or threatening behavior, overdose or ingesting a toxic substance, and threats or attempts at suicide.

Where to find it online:

Crisis guidelines  www.pathways2promise.org/crisis/
Suggestions for clergy: Providing pastoral care to persons with mental illness and their families

“Guidelines for Clergy” is a two-page brochure developed by Mental Health Ministries, available online in a downloadable format. The brochure includes specific suggestions for working with mentally ill persons and for helping families who have a loved one with mental illness. As well as a brief but very useful section with suggestions for referrals and working with mental health providers in the community.

The brochure’s section on “Congregations Called to Be Caring Communities” will assist both clergy and laity in making a short, clear, and eloquent case for mental health ministry.

Additional resources include:

- Pathways to Understanding, a manual on ministry and mental illness created by Pathways to Promise, especially the sections titled “The Faith Community and Mental Illness” and “The Person and the Family.”


Where to find it online:

Resources for Clergy http://www.mentalhealthministries.net/resources/resource_guides.html
Pathways to Understanding http://www.pathways2promise.org/product/pathways-to-understanding-manual-for-instructors-students/
COPE article (abstract available to all, full article available to registered users):
Spiritual care resources

Mental Health Ministries has developed a number of downloadable brochures relating to spiritual care, including the following:

- “Comfort from the Scriptures,” containing Bible verses of comfort for persons with a mental illness (available in English and Spanish versions)
- Spiritual care for ministry with older adults (English and Spanish)
- Self-care tips for clergy families (English only)
- Coping with the holidays (English and Spanish)
- Postpartum depression (English only)

The Mental Health Chaplaincy offers a downloadable “Gentle Bible,” a year’s worth of daily readings adapted from scripture verses, organized in monthly topics such as healing, companionship, and community. A Spanish Version has been prepared by the Spiritual Roundtable of the Connecticut Mental Health Center and is also available by downloading.

The Chaplaincy also has articles available on topics that include:

- A call to mental health ministry
- Spiritual care with psychiatric patients
- Mental disorders and ministry
- Companionship
- Relational Outreach and Engagement.

PlainViews, an e-newsletter for chaplains and spiritual care providers, also includes occasional articles on spiritual care and mental disorders.

Where to find it online:

Mental Health Ministries brochures: http://www.mentalhealthministries.net/resources/brochures.html
Mental Health Chaplaincy blog: http://mentalhealthchaplaincy.org/index.php/blog/
PlainViews e-newsletter: https://plainviews.healthcarechaplaincy.org/
Models of service
A number of organizations in the U.S. have developed innovative ministries or initiatives that are at work serving mentally ill people. The following are a few of them, listed with their online addresses:

**Bridges to Care and Recovery** is a collaborative, community initiative designed to extend the system of care for people challenged with behavioral health disorders, specifically in North St. Louis City and County. BHN works with key partners to include hospital and community behavioral health leadership, advocacy groups, and faith leaders to provide a multi-pronged approach to expand the role of faith-based organizations in the identification of mental health and substance use disorders, and the reduction of stigma to support referral and access to behavioral health care. Please click this link [Bridges to Care and Recovery](http:// Bridges to Care and Recovery) to learn more about this ministry model.

**Faith.Hope.Life.** is an initiative of the Faith Communities Task Force of the National Action Alliance for Suicide Prevention. All the information and resources necessary to launch Faith.Hope.Life. in your faith community are available on this website. For Faith.Hope.Life frequently asked questions, [click here](http:// Faith.Hope.Life) or view the recent Faith.Hope.Life webinar “The Role of Faith Communities in Suicide Prevention.”

**Fourth Presbyterian Church** in Chicago has created a nonprofit organization called Chicago Lights that comprises several outreach programs, including the Elam Davis Social Service Center and the Center for Whole Health, offering survival and holistic health services to homeless and low-income neighbors. [http://www.fourthchurch.org/chicagolights/](http://www.fourthchurch.org/chicagolights/)

**Plymouth Congregational Church** in Seattle founded Plymouth Healing Communities to provide convalescent housing for homeless, mentally ill individuals leaving the hospital, and companioned housing that functions to support long-term healing and recovery. [www.phoh.org](http://www.phoh.org)

**Faith and Fellowship** is a program of the Mental Illness Ministries of the Roman Catholic Archdiocese of Chicago. Gatherings provide a time for prayer, quietly shared activities, reflection on the theme of the meeting, and a time for Agape. [www.mimministry.org](http://www.mimministry.org)
Section Five: Advocacy

*Toward individual healing and a more just system*
A prayer of advocacy

Healing begins with our sensitivity, compassion, and concern for one another. Recovery begins in the individual person, supported by a community of care. Our well-being depends upon the knowledge, skills, and services of others, and on systems that provide treatment, aftercare, and a place for those in recovery to strengthen and grow. Health has to do both with individual lives and with the larger life of our neighborhoods, nation, and world. The petitions in the prayer below remind us that the work of healing involves many levels.

We pray for all who struggle with brain injuries, mental illness, addictions, trauma, and abuse; for all who are fearful and anxious, and for all who suffer in the health of their self and personhood.

We pray for our families in their love and care and limits as they seek to provide relief and foster recovery for loved ones.

We pray for counselors, nurses, doctors, therapists, psychologists, social workers, and case managers, for their good training; and for the administrators and support staff of mental health centers, clinics, and hospitals.

We pray for our neighborhoods, that in every community there may be effective outreach, doors that open readily to care, supportive housing, meaningful work, and opportunities to share in sport, craft, art, and fellowship.

We pray for our public servants, representatives, and leaders, that they may organize effective systems of service and care, blending well the strengths and power of local, county, state, national, and world resources, both public and private.

We pray for institutions of research and learning, so that the human community may advance in its understanding and treatment of mental disorders.

We pray for the conditions of peace, justice, and harmony necessary to the health of us all.

We pray for this congregation, and for all communities of faith, that we may continually take up the work of healing and care as we each are able.

We pray that each may have a home, that all may rest safely and be well.
Faith group statements on mental illness

On the Pathways to Promise website you will find statements on mental illness from 14 national faith groups who advocate for care and call upon local, regional, and national faith bodies to act on a variety of specific concerns. National faith groups have the capacity to draw on the wisdom and experience of local congregations around the country, and many of them have staff at the national level dedicated to issues concerning health, welfare, and social justice.

Where to find it online:

Pathways to Promise

Links to faith group organizations and networks:
National mental health organizations affiliates with local and state

National organizations concerned with mental health learn from the pooled experience of their affiliates, share knowledge and work together to address issue. Check with the following national groups and their affiliates or local chapters for help with advocacy issues:

Where to find it online:

- National Alliance on Mental Illness (NAMI) www.nami.org
- Mental Health America (MHA) www.nmha.org
- National Association of State Mental Health Program Directors (NASMHPD) www.nasmhpd.org
- National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) www.nacbhd.org
- American Association of Pastoral Counselors (AAPC) www.aapc.org
- Association of Professional Chaplains (APC) www.professionalchaplains.org
- Association of Clinical Pastoral Educators (ACPE) www.acpe.edu
- American Psychiatric Association (APA) www.psych.org
- American Psychological Association (APA) www.apa.org