



Hope for **Mental Health** Community



SADDLEBACK CHURCH

*The faith community is not a substitute for professional mental health care.
We recommend seeking professional help to diagnose and manage illness.*

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A New Approach to Building Community for People Living with Mental Illness and Their Family Members

From its inception in 1980, Saddleback Church in Lake Forest, California, has sought to address the physical, spiritual, relational, and emotional needs of the people in the Saddleback Valley. Through the years, the church has provided practical assistance through benevolence services, crisis and emergency care, pastoral counseling, as well as a food pantry to people in need. A robust Lay Counseling Ministry using well-trained volunteers began in the 1990's to meet the emotional and spiritual needs of the burgeoning congregation, and currently provides more than 3,000 hours of non-professional counseling annually.

The commitment of Saddleback Church to people living with mental illness greatly increased after April 5, 2013 when Pastor Rick and Kay Warren's youngest son, Matthew, took his life following a life-long struggle with mental illness. His death impelled our efforts to find even more effective ways for the faith community to support people living with mental illness and to promote suicide awareness and prevention.

The Hope for Mental Health Ministry at Saddleback Church launched with a highly successful one-day conference, "The Gathering on Mental Health and the Church" in March 2014, and held a second, expanded conference in October 2015. The conference speakers included respected and diverse professionals from medicine, psychiatry, social work, law enforcement, government, advocacy groups, people with lived experience, and of course, the faith community. As effective as these conferences were in raising awareness, reducing stigma, and increasing compassion for people living with mental illness and their families, it became clear that once a year events were insufficient to actually bring hope, resilience, and social connection to the people we sought to serve.

Loneliness is on the rise around the world, even as we are more digitally connected than ever before,¹ leaving many living with a mental illness feeling alone and isolated. Despair and hopelessness often grow in the absence of meaningful social connections. Numerous studies show that feeling connected in the community where we live and work is a protective factor against suicide, and the more connected a person is, the less likely they will be to end their life.² Yet people living with serious mental illness lack safe, caring places to build and strengthen much needed social connections. Family members also lack safe and caring places to receive the encouragement they need to support their struggling loved ones.³ Who can adequately address these unmet needs?

We believe the solution is not merely to add mental health professionals to the workforce, although there is certainly a serious need for more mental health professionals. And while almost every city would benefit from an increase in mental health services - crisis intervention, improved mental health facilities, and upstream prevention programs - a critical piece is still missing: meaningful social connections. The Hope for Mental Health Community was begun in April 2018 as a new model of building connections and a sense of belonging to a community using local churches.

The Hope for Mental Health Community is a monthly upstream effort to address the need for social connection, meaningful interactions, and accurate psychoeducation for people living with mental illness and their families. These gatherings are led by non-professionals and volunteers with lived experience who extend the radical friendship of Jesus by providing transforming love, support, and hope. The heart of this ministry comes from three passages of Scripture: “(Jesus) *I have called you friends*,” (John 15:15a), “*Serve one another in love*” (Galatians 5:13b), and “*May the God of hope fill you with all joy and peace as you trust in Him, so that you may overflow with hope by the power of the Holy Spirit.*” (Romans 15:13).



Partnership in Mental Health Care

More than 50% of Americans will be diagnosed with a mental illness or disorder at some point in their lifetime.⁴ Many will seek help from their primary care physician or a mental health professional, but 50% of people living with a mental illness will not receive treatment.⁵ Even those who seek help or are able to access the mental healthcare system are only seen in therapy or a program for a few hours a week. The rest of their waking hours can be lonely and isolated, with most of their social interactions being with family who form the backbone of support for millions. The faith community can step in to the gaps left between the medical community and family support; studies show that people often turn first to clergy when they experience mental health concerns.⁶ This creates a unique partnership that yields hope, health, and healing to people living with mental illness.

The diagram on the next page illustrates this partnership as it follows an individual through the phases of managing life well, an intensifying mental health crisis, an acute mental health crisis, in treatment/recovery, and back to baseline. There is a role for both professional mental health care and the faith community at every phase.

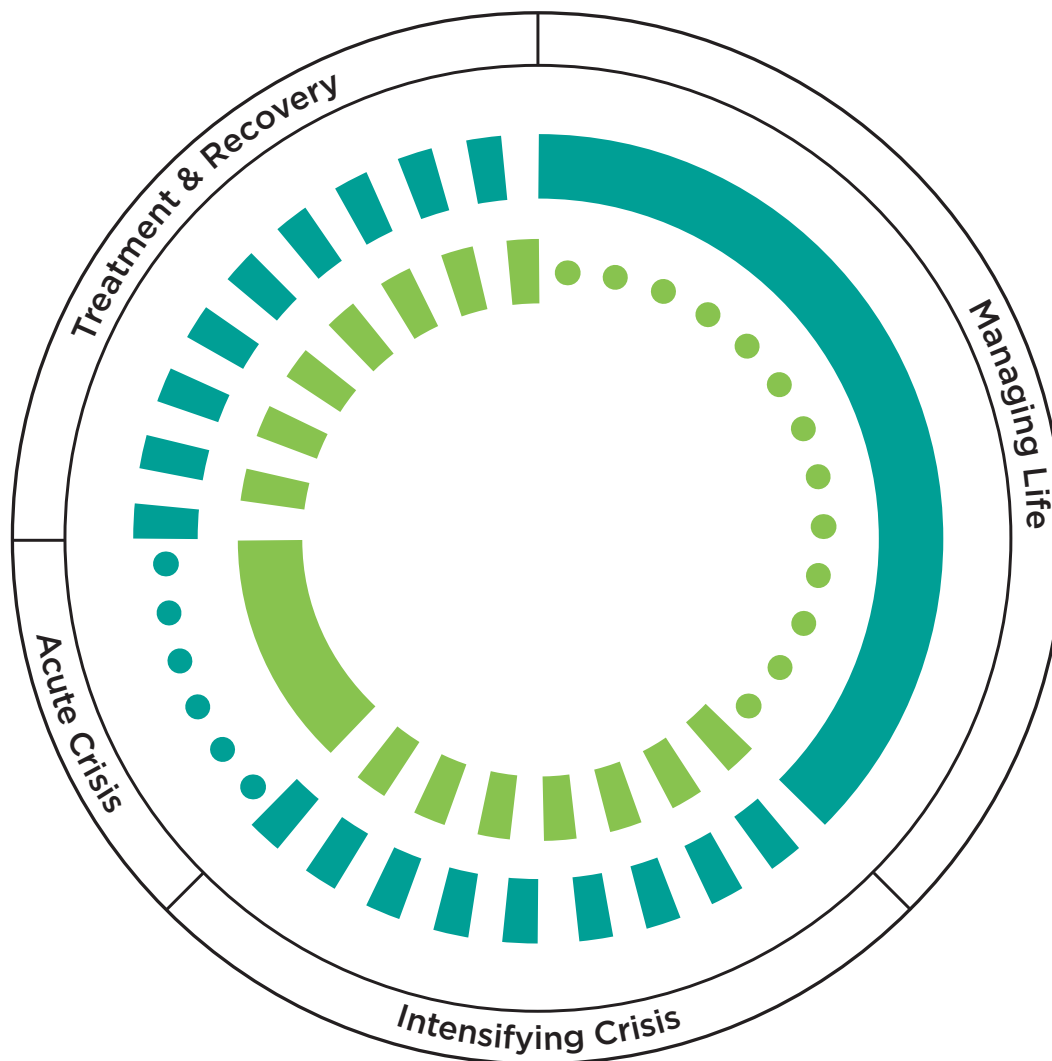
The US Preventative Services Task Force and The American Academy of Pediatrics currently recommends that all Americans 12 years and older be given a routine depression screening every year by their primary healthcare physician.⁷ Such screenings can play an important role in determining if someone needs additional mental health support. Their faith community can play a role in their mental wellness by providing support through community involvement such as weekend services, support group participation, and can offer meaningful ways for people to give back through volunteer opportunities.

In times of an intensifying mental health crisis, an individual will need additional support from both mental health professionals and their faith community. Crisis stabilization units, partial hospitalization programs, intensive outpatient programs, as well as more frequent meetings with their therapist and psychiatrist can be helpful. Faith support through groups like Celebrate Recovery, more connection in a support group, as well as accessing a church's food pantry or benevolence support can also help someone during this time.

When a person is in an acute mental health crisis, they may need in-patient hospitalization or a residential treatment center. While their need for mental health care is at a higher level, they can also benefit from faith community support including hospital visitations, meals for families, childcare, prayer, and cards.

As a person enters a time of treatment and recovery, their need for mental health support will lessen from an acute crisis and they may step down to a partial hospitalization program or an intensive outpatient program. During this time, it is important that they also receive support from their faith community through groups like Celebrate Recovery, more connection in a support group, as well as food pantry and benevolence support.

The medical community will simply never be able to meet all the physical, emotional, and spiritual needs of people living with mental illness. But with the faith community as a partner, individuals can be given **whole person support**, increasing the likelihood of recovery and wellness.



Faith Mental Health Support

- Volunteering, Small Group, Weekend Services, Celebrate Recovery®, Hope for Mental Health Community
- ■ ■ Celebrate Recovery®, Small Group, PEACE Center Resources, Food Pantry, Benevolence Fund
- ● ● Hospital Visitation, Meals for Family, Childcare, Prayer, Cards

Professional Mental Health Care

- Inpatient Hospital, Residential Treatment Center
- ■ ■ Crisis Stabilization Unit, Intensive Outpatient Program, Partial Hospitalization Programs, Therapist, Psychiatrist
- ● ● Primary Care Physician, General Practitioner, Therapy as Needed

Benefits of Family Psychoeducation and Peer Support

Studies have shown peer support in faith communities can help individuals living with mental illness increase connection, expand knowledge about mental illness, and improve coping skills.

MENTAL HEALTH, RELIGION & CULTURE JOURNAL⁸

In America, 44 million people - that's one in five adults - will experience a mental illness in the coming year.⁹ That means everyone knows someone who is affected by mental illness. No one should go through a mental health crisis alone. We all need a support system of family, friends, mental health professionals, support groups, and a faith community in challenging times.

Families who participate in psychoeducation see greater reduction in hospitalization and relapse for their loved ones living with mental illness as well as an increase in wellness.

SUBSTANCE ABUSE AND MENTAL HEALTH ADMINISTRATION¹⁰

When faith communities open their hearts and their doors to people with mental illness and commit to walk with them on their path toward wellness, suffering is reduced and connections grow. People may see for the first time that they matter and there is a purpose for their life.

Community programs are important for suicide prevention and can reduce rates of suicide in numerous ways by: expanding social connection and improving life skills, identifying people at risk for suicide and connecting them with needed support, connecting people with appropriate mental health providers and treatments, as well as providing support for people who have lost loved ones to suicide.

NATIONAL ACTION ALLIANCE FOR SUICIDE PREVENTION¹¹

*It is such a relief to be able to share and pray with others
who understand what I am going through.*

RICARDO, Hope for Mental Health Community attendee
whose wife lives with Bipolar Disorder

*Through the support of the community, I have been
able to stay on my medication and I have not had
suicidal thoughts for months.*

MARK, Hope for Mental Health Community attendee
living with Borderline Personality Disorder

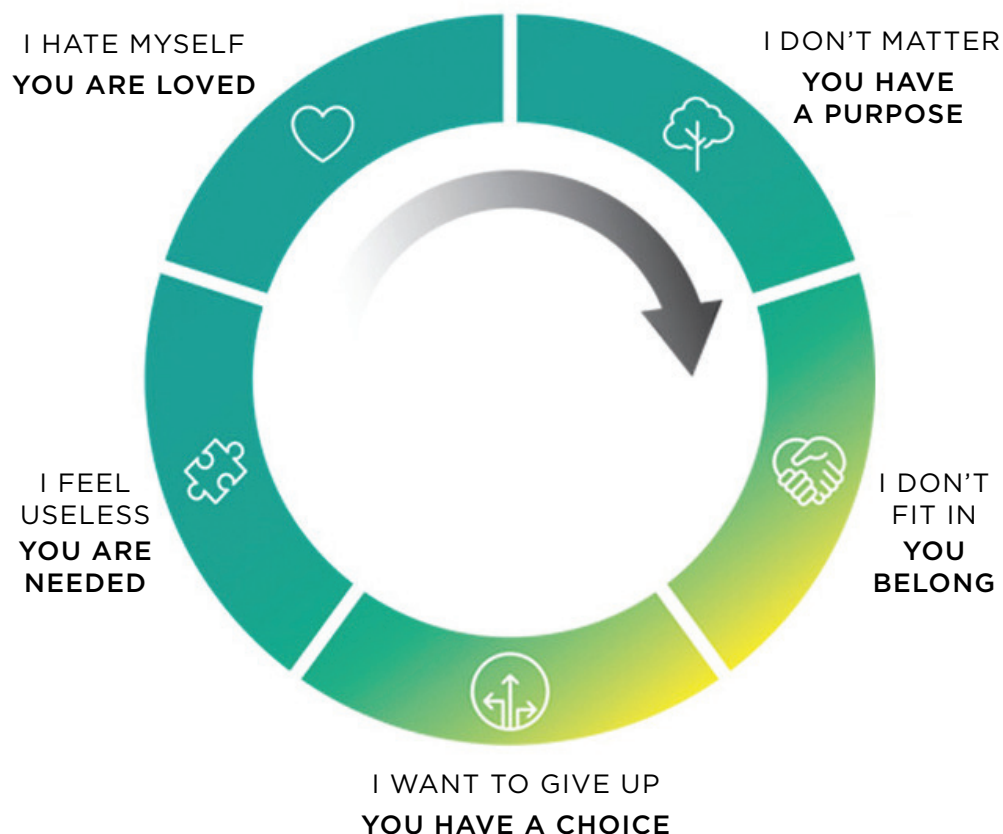


The Hope Circle

Hope is often hard to define or pin down; it can seem mysterious and illusive. When individuals living with mental illness repeatedly have the painful experience of dashed expectations for wellness, recovery, and emotional stability or continue to be plagued with suicidal thoughts, hope can disappear. A positive, optimistic outlook for the future can be replaced with a flood of negative thoughts, cognitive misperceptions, and even dangerous self-loathing. And yet we cannot live without hope! The Hope for Mental Health Community is founded on five simple spiritual truths that speak to the deepest longings of the human soul: to be loved, to believe you have a purpose, to belong, to have autonomy, and to know you have a contribution to make. These five truths also combat the damaging messages that can keep people from moving toward hope.

These truths form The Hope Circle:

- You are loved
- You have a purpose
- You belong
- You have a choice
- You are needed



Hope is essential to life; for people dealing with bleak circumstances, the power of hope cannot be underestimated.

PSYCHIATRIC NEWS¹²

People living with mental illness can benefit greatly from religious and spiritual support.

MENTAL HEALTH, RELIGION & CULTURE JOURNAL¹³



The Hope for Mental Health Community

When the faith community views people living with mental illness through the lens of “persons with an *illness*,” it’s easy to conclude there is little we can do to help, as medical illnesses are typically outside the purview of the church. But when we shift the perspective to “*persons* with an illness,” then it becomes crystal clear that the faith community is poised to offer a level of care that no one else can. The faith community is intrinsically involved with the care and nurture of persons.

“Friendship is a deeply intimate and committed relationship that encompasses people in all their fullness. It is not bounded or dictated by stereotypical presumptions of biological malfunctioning. The priority of friends is the personhood of the other and not the illness.... It allows us to move beyond pathology, and begin to explore those aspects of people with mental health problems that fall outside the boundaries of the medical model.”¹⁴

The primary mode of conveying care in the Hope for Mental Health Community is through building relationships and forming intentional friendships.

Helping people feel wanted and welcomed is always our goal, and our volunteers invite attendees to get refreshments and help them find seating. A genuine smile, hug, or a handshake lets people know this is a place of belonging. Sharing an occasional meal together at a summer picnic or holiday party, or something as simple as providing a warm greeting are all part of the effort to create a family atmosphere where connections can begin and friendships can grow.

As a result, shame has no place in our conversations about mental illness; in this safe environment, each attendee is encouraged to share openly from their lived experiences. We value the stories of men and women living with mental illness and seek to provide opportunities for them to tell those stories as they are comfortable.

We invite local mental health professionals from major universities, hospitals, and treatment centers, as well as suicide prevention trainers and relational experts to provide education for both individuals and families across the life cycle. Topics have included: the basics of mental illness (definitions of mental health and mental illness), how to help a loved one who lacks insight accept treatment, dual diagnosis, illness-specific education (such as depression, anxiety, bipolar disorder, BPD), pediatric mental health, how to work through relational conflict, how to navigate a mental health crisis, suicide awareness and prevention, how to increase a sense of hope, and how to create a holiday survival plan.

Each monthly Hope for Mental Health Community includes lived experience stories, a practical wellness tool, connection around table discussion, psychoeducation from mental health professionals, question and answer time with speakers and hosts, as well as personal prayer with a caring volunteer for those who desire it.

Start a Hope for Mental Health Community

How to start a Hope for Mental Health Community in your area:

1. Find a local church willing to host the Community
2. Decide regular time of meeting (keep it the same time every month)
3. Recruit volunteers
4. Choose a topic for the gathering
5. Invite a mental health professional from the community to provide psychoeducation
6. Ask a person living with mental illness or a family member to write out and share their story surrounding mental illness
7. Prepare a devotional moment
8. Ask a mental health professional to share a practical wellness tool
9. Create questions for the table discussion time
10. Provide a resource table with free handouts, relevant books, and local/regional services
11. Provide refreshments

Visit KayWarren.com/Community for Hope for Mental Health Community videos and downloadable handouts and resources to help you host a live-streamed or pre-recorded Hope for Mental Health Community.

For the first time I am learning to trust my mental health providers and am starting to understand that they really want to help me.

LISA, Hope for Mental Health Community attendee
living with OCD

As a caregiver, I love this program and really need the training and support it provides.

SUSAN, Hope for Mental Health Community attendee
whose daughter lives with Schizophrenia


Endnotes

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Please visit KayWarren.com/Community to find previous Hope for Mental Health
Community videos and downloads to help you host your own gathering.