"The church has a key role in supporting and welcoming people with mental-health difficulties. To do this alongside the professional medical services means that the church needs to know *enough*—not too much, for we are not competing, but not *nothing*, for there are past errors of over-spiritualising we can learn from. This book delivers just the right amount and then wraps it in a biblical model to integrate this with our faith and enable real change. Helpful indeed!"

**Dr Rob Waller FRCPsych,** Consultant Psychiatrist; Founding Director, The Mind and Soul Foundation

"What a brilliant resource! The authors bring compassion, intelligence, biblical wisdom and practical help to bear on this most difficult of topics. Combining exceptional clarity of thought with real-life examples, they empower readers to offer genuine Christian hope and help to those struggling with mental-health challenges."

**Dr John Burns,** Head of Counselling Services, Shore School, North Sydney, Australia

"Steve and Helen have achieved the seemingly impossible task of taking a complex issue and framing it for a local-church audience. This book brims with a helpful distillation of mental health—terms, definitions, explanations—while also presenting the beauty and depth of the gospel. Readers will be educated, encouraged, equipped and edified for the privilege of caring for souls."

Jonathan Holmes, Pastor of Counseling, Parkside Church, USA

"As one who has suffered with my own mental health in recent years, I am utterly delighted that Helen and Steve have written this book. It's all that I hoped it would be and much more! Full of wisdom, warmth, compassion and practical help, it left me full of hope. I will be encouraging every church member to get hold of a copy."

**Andrea Trevenna,** Minister for Women, St Nicholas Church, Sevenoaks, UK

"I am so grateful for this outstanding and timely book. Every church will benefit from reading it in book groups, as individuals and in pastoral teams. The writing is warm, soaked in grace and informed by years of caring, listening and loving. The content is intensely and realistically practical. I look forward to reading it again and learning to put it into practice."

Christopher Ash, Writer-in-Residence, Tyndale House, Cambridge

"Without sidestepping the important roles of mental-healthcare professionals and medications, the authors highlight, through worked examples, what the church can and should do to become a welcoming, wise, Christ-like community for strugglers."

Michael R. Emlet, Dean of Faculty, CCEF;

Author, Saints, Sufferers and Sinners

"Instructive, compassionate, encouraging and informative. This is a timely, significant and much-needed book for church members and church leaders. Awareness of our own mental health is growing, and some struggle more than others with the severity of mental illness. This book highlights that we are in the struggle together."

Elinor Magowan, Director of Women's Ministry, FIEC, UK

"I have had mental-health problems for a long time and have sat with countless others who do too. I found this a really helpful book and would strongly encourage pastors and those in pastorally supportive roles in churches to read it."

Julian Hardyman, Senior Pastor, Eden Baptist Church, Cambridge, UK

"I wish I had had this vital and timely book 30 years ago; I'm glad I have it now. It's easy to read, insightful in content and thoughtful in application. It's especially encouraging to read how a healthy local church community can be a help and blessing to those in need and that the approaches needed are within reach of every Spirit-filled believer. Helen and Steve's book is now on my 'essential reading' list."

Adrian Reynolds, Head of National Ministries, FIEC, UK

# MENTAL HEALTH AND YOUR CHURCH

A Handbook for Biblical Care

Helen Thorne and Dr Steve Midgley



Mental Health and Your Church: A Handbook for Biblical Care © Helen Thorne and Steve Midgley, 2023.

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## LIFE IN THE LOCAL CHURCH

The local church is a messy place. But it doesn't always look that way.

Sometimes we can walk into church and get the impression that everyone is fine. But many are not. Behind the bright smiles and buzz of conversation, they are struggling with something hard. It's one of the consequences of the fall—that moment recorded in Genesis 3 when humanity decided to stop living God's way. Since then, we've all had bodies that don't quite work as they should, hearts that go astray and minds that are broken in one way or another. Since the fall, we've all experienced hurtful things and had to live with the legacy of that pain.

For some, that hardship is relatively manageable: a little stress, an occasional worry, a few aches and pains—nothing that requires a medical diagnosis or any sustained pastoral support. For others, however, the pain of life runs deep; they are dealing long-term with the fallout from serious illness or the lingering consequences of deep relational hurt. For some of our brothers and sisters in Christ, life can be dominated by struggles of the mind: long-term battles with thoughts, feelings, impulses and even voices that distract, drag down and nudge them towards despair.

As you cast your mind around the congregation of which you are part, maybe you can think of people who are struggling now—people who have shared their pain with you and,

possibly, asked for help. Maybe, with sadness, you can remember those who used to come but have drifted away—people you tried to get alongside but who didn't stay. Undoubtedly, there will be people whose hardships you don't know about. Battles with mental ill-health are often kept deep inside.

#### People you may know

Maybe you know people like these:

- Chi has been a Christian for as long as she can remember. She loves Jesus deeply and wants to serve him with all of her life. Every Sunday she's at the service and every Wednesday she attends her small group, but she rarely says a word. It's not that she doesn't love people. It's not that she has nothing to contribute to discussions about God's word. She's just scared. Chi is utterly paralysed by a fear of getting things wrong or saying something that may upset someone else in the room. At night, she battles panic attacks. Gastrointestinal challenges blight her day. And frequently she cries. Life feels so very hopeless—she just doesn't want to be this way.
- Andy is young, single, intelligent and doing well in his career. Normally, he's the life and soul of the Bible-study group—always cracking jokes, offering to help or organising social events. But things haven't seemed quite right in recent months. It's been a gradual thing, but he and a couple of people around him have been noticing that he has less energy, less enthusiasm and a kind of gloominess that just isn't like him. Despite having many friends, Andy feels increasingly alone. A natural self-confidence is giving way to darker thoughts about being a failure and having let everyone down. The early mornings are the worst.

Sleep is elusive, and lying in the darkness, he can genuinely believe he's unlovable and without value, and that the world would be a better place without him. His thoughts get very bleak then, and a cursory glance at his tablet search history would show that he has recently begun to explore how people go about ending their lives.

- Possibly you know someone like **Siobhan**—an occasional attender at church, at best. Her life is chaotic, marred by abuse past and present, the pain of which she dampens with whatever she can afford. Every day there's alcohol; her flat is littered with empty bottles and the cheap corner-shop bags in which they came. Some days there's cash for drugs—cannabis or occasionally heroin if she's been able to beg, borrow or even steal from family or friends. When she's sober, she loves reading God's word and praying. There have been so many times when she's tried to get clean. But the bottle always seems to trump the Bible in the end. Most people gave up on her long ago.
- Every now and then we meet a **Ben**. He's been ill since his early 20s—which is when the voices began and his grip on reality started to drain away. His parents remain supportive, and he usually joins them at church, but at times it's been extraordinarily difficult. When his psychotic symptoms are acute, Ben's convinced that he's Jesus—reincarnated and with new revelations to share. Even when things are calmer, he still struggles to order his thoughts and to locate himself reliably in reality. Medication helps, but it has side effects, and these make him reluctant to take it. He finds it hard to sit still. So often you can see him pacing at the back of the service; he wanders out for a cigarette before coming back in. Ben sometimes attends a small group

but expressing himself is difficult. He either dominates with inappropriate expressions of his delusional beliefs or sits looking distracted as if his thoughts are elsewhere. People want to love him, but they just don't know how to.

• Or how about **Kelly**? She's a lovely, godly woman. She's gifted, humble, kind—just the sort of person you want reading the Bible one to one with the younger women in the church. But she's struggling at home as her youngest teenage daughter seems to be disappearing before her eyes. She doesn't understand why her daughter isn't eating; she can't get her head around the cuts on her daughter's arms. This time last year the family were so happy: mealtimes were a joy, and feelings were shared and not suppressed. But something somewhere broke. Now she feels impotent in the face of her daughter's slow-motion self-destruction. And nothing, either from friends or anyone else, even begins to help.

There are plenty of other stories we could include here. Stories of people with phobias, personality disorders, obsessions and flashbacks—those riding the bipolar roller coaster from mania to despair and back again or those quietly wondering "Am I going mad?" because of the unexpected impulses they are feeling. Statistics tell us that, worldwide, one in six of us will have experienced a mental-health struggle in the past week. Globally, serious depression is the second leading cause of disability. This is reality. And here is the first thing we need to grasp. Mental unwellness is not the rare exception—this is normality for every church.

<sup>1</sup> Source: www.mentalhealth.org.uk/statistics/mental-health-statistics-uk-and-worldwide (accessed 11 August 2022).

#### Mental illness is hard

Having mental-health struggles is a difficult pain to bear. Everyone's story is unique, but there can be some common threads among all who know its scourge. There are the very real burdens of the negative thoughts, heightened (or muted) emotions and impulses that need battling day after day. Decision-making can feel impossible and relating to others as complex as having to communicate in a foreign tongue. From the challenge of getting out of bed in the morning to the near impossibility of focusing on the tasks in hand, through to not being able to sleep when so much in your mind is going astray, the simple act of living can feel unendingly hard.

There can be challenges with medication too. Prescription drugs can be helpful in many ways—indeed sometimes they are essential for safe functioning in life—but they often come with side effects that just don't feel "right". It can be hard to stick to the medication when it means that you don't quite feel like yourself any more.

But, more than any of those medical considerations, there's something about mental illness that feels isolating—othering: it seems to mark people out as being different, and few people want to be apart from the crowd. It's so common to be, or at least to feel, misunderstood.

In recent years, great strides have been made in the Western world to promote understanding and empathy for those with mental-health issues—to bring it out of the closet. But there can still be stigma attached to mental illness. Words like "crazy", "psycho" or "mad" may be intended light-heartedly, but they often wound deeply. Many countries have legislation in place to ensure that people with mental-health struggles are not unfairly disadvantaged in the workplace. But often sufferers find it hard to be open about their battles for fear that it will end any prospects of promotion, or simply make their colleagues view them differently or doubt their capability to do their job well.

Even in the local church, there can be a reluctance to share out of fear of being ostracised or seen as someone whose faith is weak. People will rally round a congregation member with cancer far more quickly and easily than someone whose diagnosis relates to the mind. Mental illness is perceived as confusing, weird, something that only specialists should engage with and, potentially, too long-term for any sustainable care.

Sadly, many whose mental-health struggles have been made public have been on the receiving end of words that, while well-intentioned, simply make things worse. It's not hard to find people who have been falsely accused of being manipulative, lazy, making a fuss, causing a scene, or just not having enough faith to see them through. There's still a sense that they ought to be able to "snap out of it" or pull themselves together. Most would if they could. If only change could happen that simply or in that short a time.

But even when the outer voices are helpful, as they genuinely can be in many local churches, there is often an inner voice that whispers to the Christian, "If you really believed in Jesus properly, you wouldn't be like this". "Christianity is meant to be a faith of joy, peace, self-control, and victory, isn't it? So why are you feeling like this?" Such thoughts often induce guilt. They encourage people to wonder how God views those whose minds are flooded with sadness, fear, impulsivity, and despair. They nudge Christians towards believing that their Lord and his people would really rather like it if they were somewhere else.

Walking alongside those with mental illness can be complex. But supporting people with mental-health struggles can be hard too.

#### Reasons why I can't get involved

You may never have known the hardship of not being able to string two thoughts together or hold on to what is right and true. If you haven't experienced such pain yourself, it can be genuinely difficult to understand what those who are struggling are going through.

When it comes to helping, it can also be tricky to know where to begin. Is it most appropriate to start with physical needs? There's often some shopping that could helpfully be done. Or should we advocate for the person in need to access services? Or listen to them as they talk about their pain? Maybe we should be opening Scripture with them—we are believers after all? How about praying? But what do ask God for? Are we praying for healing, for help, for hope?

Some of us have maybe tried helping people in the past and just found it exhausting. We don't want to go there again. The late-night and early-morning phone calls, the circular conversations, the arrangements to meet up that keep getting cancelled at the last minute and the seeming lack of change can bring us to our knees. It's not that we don't care, but we feel we just don't have the capacity to keep on caring as much as there seems to be need.

Maybe you have known the agony of losing someone close to addiction, anorexia or suicide. The pain is unspeakable; the grief hard to bear. We didn't manage to help last time, so what makes us think we could make a difference to someone else now? Not only can our confidence to help ebb away but, much more seriously, our confidence in the Lord can be hard to maintain: after all, if he really is sovereign and so good, why didn't he make things right? Why did it turn out so horribly?

It's not hard to find people who will tell us that mental illness is for specialists only. Indeed, most of us in churches will have only a rudimentary understanding of all the

various biochemical, social and spiritual theories of mental illness there are. But often our reservations go deeper than that. Talk of faith will only confuse, we suspect. There are matters of safety to consider. An untrained helper might cause more harm than good. Only those with high levels of expertise should attempt to get involved, we're told—and when we're looking for an out, it's an appealing idea to hold on to.

For those in leadership there is the very real tension about how to deploy resources and time. There may be many sheep in our care—to what extent can we focus on the needs of the few? Will committing to help the few leave the many at greater risk than is fair? And, more fundamentally, what is our call? Is the biblical role of pastor-teacher one that encompasses care of the mentally unwell or should that high calling sit elsewhere?

Add in our own personal experiences of mental health and some of us can feel the pull to withdraw still more. Maybe we are so acutely aware of our own depression, anxiety or other struggles that we simply feel we have nothing to give—not right now anyway.

But despite the hardships of those struggling and the complexity for those trying to care, one thing is certain: when the local church is acting as a local church can, the results for all involved can be a delight and not a burden.

#### The local church can be beautiful

Come with me on a moment of imagination. Can you begin to envision a church like this?

• A family where brothers and sisters in Christ with mental-health struggles aren't just welcome but actively feel able to share openly without fear of judgment—where no one recoils from tales of depression, suicide or addiction, and lives are truly shared.

- A body where members genuinely empathise with one another on the good days and the bad—rejoicing with those who rejoice and weeping with those who weep.
- A flock where everyone's spiritual needs are provided for and everyone is given encouragement to keep following their Shepherd King, understanding that the needs of sheep are not "one size fits all". Some can walk; others need carrying. And that's ok.
- A place where all can use their gifts—even if they are struggling substantially—because we are convinced that every member of Christ's body is an essential part and, if supported appropriately, will be able to serve.
- A fellowship where resources are shared so that no one is in any physical need, and gifts are given with no thought of what we can get in return.
- A community where everyone is active in supporting others so that no one gets burned out by having to shoulder all the work.
- A congregation where everyone can be loved and safe; where gentle boundaries are in place that work for the good of all; where all can know the joy of being transformed to be more like Christ; and where perseverance is pursued and grace abounds on those inevitable days when everything goes horribly wrong.
- A gathering so countercultural in the way it treats
  people with mental-health struggles that the unbelieving world can't help but sit up, take note and ask
  "Who is the God whose followers act like this?"

Can you imagine a church like that? Can you imagine your church being like that? Is this a mere fantasy? A flighty ob-

session by someone who's been given one book contract too many?! Quite the opposite—it's what the Bible calls us to.

#### Our calling

Trawl through Paul's epistles, the letters of Peter, James and John, the narrative of Acts and the ministry of our Saviour himself (not to mention the centuries of believers faithfully living life in the Old Testament according to God's law) and we will see a consistent pattern emerge. The worshipping community is designed to be a place where all followers of Jesus can come and flourish in their faith—and where no one is excluded.

The abused, the broken, the ill, the deluded, those ground down and ostracised by the fallenness of life—all have a home in the church through Christ. The depressed Elijah, the abused Joseph, the raped Tamar, the fearful Moses, the desperate King David, the bitter Naomi, the Corinthian Christians who had come from a background of alcohol misuse, the woman at the well whose life was imploding in multiple ways—all were valued members of the worshipping community, at least in God's eyes. Those who struggle today don't have an invitation to belong merely as second-class citizens; the church is still designed to be a first-class home for everyone who puts their trust in Christ.

This side of heaven, we'll never get it completely right. The new heavens and the new earth will be such a joy when all of us have perfect bodies and minds, perfectly worshipping our perfect Saviour. But before that time, we'll all be limping a bit, and our churches will be imperfect in areas like this. But, as with so many aspects of the Christian life, we can begin to taste the beauty of the new creation now. In our local congregations, we can at least glimpse what it is for all Christians—those struggling with their mental health

and those who aren't—to worship in Spirit and in truth, in unity, in love, in relationship, in service and in hope.

It's a call worth fighting for.

And that is our aim for the rest of the book: not to turn you into mental-health professionals but to equip you with knowledge and wisdom, and to help grow that attitude of love and compassion towards those who struggle. Only when we learn to reflect the compassion that Christ has for all of us will we be able to truly play our biblical role in welcoming, nurturing, growing, and labouring alongside those who struggle—for the glory of God and the good of those around.

But what exactly is mental illness, and what does the Bible say about it? It's there that we need to start.

#### Questions for reflection

- 1. What experiences have you had of struggling with your own mental illness? How did other Christians react to you? Did you feel you could tell them about your struggles?
- 2. Which of the reasons for *not* getting involved with those suffering from mental illness most resonate with you?
- 3. How do you think your church is currently doing in regard to helping those with mental-health struggles?