
Mental Illness Manual

Prepared by the Committee on Mental Illness
Michigan District, LCMS
Revised Edition, October 2010



“You will be secure, because there is hope.” Job 11:18a



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Brothers and Sisters in Christ,

This manual is needed because there are many people in our congregations in the Michigan District of the LCMS who suffer from mental illness. The families of those who are ill also suffer. Our professional church workers do not receive the training needed to understand and minister to people affected by mental illness. Information and guidelines are needed to help professional church workers and congregations recognize symptoms of mental illness and minister to families affected by it.

The manual can be helpful in giving some direction to the professional church worker and congregations when confronted with symptoms of mental illness. It can help them minister to families of people with mental illness when these symptoms become apparent. It can help them become more aware of people with mental illness in order to encourage and involve them in the life of the congregation.

Without the dedicated work of Chaplain Tom Oie, who served as chairman of the Michigan District Task Force on Mental Illness until accepting a call to serve in Wisconsin, this manual would not have been possible. The manual was updated and revised by the Committee on Mental Illness under the supervision of Rev. Warren Paulson, District Executive to the committee. Secretarial assistance was provided by Debbie Austin.

Members of the Mental Illness Committee when the first edition of the manual was completed in June 2006 were Erma Barber, Rev. Barton and Laura Gray, Rev. Mark Hill, Carolyn Koppenol, MD, Orville and Elaine Ritterling, Carol Staudacher, and Executive Chaplain Warren Paulson.

This revised edition of the manual was approved by the Michigan District Committee on Mental Illness under the supervision of Rev. Warren Paulson, District Executive to the committee, in October 2010. With the help of Linda Preus and Gene Schnelz, an attorney who served for many years as parliamentarian for the Michigan District, the need for revision of the first edition of the manual became apparent to the committee. The concerns and advice of both were helpful to the committee in preparing this revised edition. The committee also thanks Dr. Carolyn Koppenol, Medical Director of Behavioral Health Services at Alpena Regional Medical Center, and Rev. Herbert C. Mueller Jr., First Vice-President of the Lutheran Church – Missouri Synod, for their articles in the manual. Finally, the secretarial assistance of Allison Wolf is gratefully acknowledged by the committee.

A word from the apostle Paul that provides encouragement to those who face the difficult task of helping people with mental illness and their families who suffer with them is found in Galatians 6:9-10: "Let us not become weary in doing good, for at the proper time we will reap a harvest if we do not give up. Therefore, as we have opportunity, let us do good to all people, especially to those who belong to the family of believers."

In Christ,

Rev. Barton Gray
Michigan District Committee on Mental Illness



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UNDERSTANDING MENTAL ILLNESS

WHAT IS MENTAL ILLNESS?

Mental illness is a disease of the brain and is defined as a group of disorders causing severe disturbances in thinking, feeling, and/or relating. The result is a diminished capacity for coping with the ordinary demands of life. Although mental illness is an ongoing chronic illness with periodic episodes, it generally produces symptoms such as overwhelming fear, unexplained confusion, unavoidable loss of control, intense self-blame, disorientated/bizarre thinking, and dark despair.

Individuals experience mental illness in their own way. The conditions often happen without a regular pattern. If there are any observable "flags" which could indicate a likelihood or propensity of mental illness, it possibly could be the use of alcohol and other drugs (for purpose of self-medication) and family histories (there may be a genetic component to this disease). Some conditions may be treated by medications, others by psychotherapy, and still others by a combined treatment approach with some type of vocational rehab training and services (this approach has proved most effective). Mental illness can range from common depression and anxiety to schizophrenia and bipolar disorder (manic-depression).

I. GENERAL INFORMATION

- A. In any given year, about 5 million American adults suffer from an acute episode of one of five brain disorders: schizophrenia, bipolar disorder, major depression, obsessive compulsive disorder, and panic disorder. More than 3 million of America's children also suffer from these disorders.
- B. These medical disorders of the brain are best understood as resulting from a combination of factors: disturbances in the brain's "wiring" process during early development, genetic influences, chemical imbalances, brain trauma, and severe life stress.
- C. Mental illness is a brain disease, a medical condition that is treatable. Many people with mental illness can manage their symptoms by taking prescribed medications. Counseling or psychotherapy, family and church support, and adequate community services can also be helpful.
- D. Mental illness may strike any age group, at any time, under any kind of circumstances.
- E. Brain diseases are often chronic in nature.
- F. Due to the nature and severity of the illness, stigma, denial, guilt, anger, anxiety, and similar attitudes often mask symptoms, making acceptance of the illness and obtaining proper medical treatment difficult.



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- G. People with mental illness will often self treat or medicate depression, anxiety, mania, and other symptoms with alcohol and/or illicit drugs (dual diagnosis).

II. SCHIZOPHRENIA

- A. Affects approximately 1% of the adult population in the United States and often begins when people are teenagers or young adults.
- B. Positive symptoms (the outward or more visible symptoms) include delusions, hostility, hallucinations (visual, auditory and/or tactile), feelings of persecution, disorganized thinking, inappropriate responses, incoherence, and/or excitement.
- C. Negative symptoms (the inward or less visible symptoms) include emotional withdrawal or isolation, apathy or social withdrawal, lack of emotion or inappropriate emotion, or inability to follow the flow of conversation.

III. MOOD DISORDERS

- A. An estimated 10% of all people living in the United States will experience a significant depression in their lifetime. Depression can occur as early as childhood, but often first occurs between ages 25 and 35. Of the elderly and the medically ill with depression, 25 to 50% are undiagnosed.
- B. Depression is more than just the "blues"; it is more severe and persistent. People who are depressed can't think clearly, concentrate, or enjoy life. They may think about death; they may feel worthless. Decreased or increased appetite and sleeping too little or too much are also symptoms.
- C. Mania is the opposite of depression. People with mania may be excited, elated, hyperactive, irritable, easily distracted, and extremely talkative. They may have an inflated self-esteem and grandiose ideas, a decreased need for sleep, and may go on spending sprees. As a manic episode worsens, a person can experience delusions and hallucinations, making this episode indistinguishable from schizophrenia.
- D. Bipolar disorder occurs when people alternate between episodes of mania and depression. There may be days, months, or even years between mood swings.

IV. ANXIETY DISORDERS

- A. Symptoms of anxiety disorders are similar to, but go beyond, normal stress and difficulties of living, affecting 8.3% of all Americans.
- B. Generalized anxiety disorder includes symptoms such as jumpiness, irritability, tension, difficulty concentrating, or fatigue. People may be on edge and have trouble



falling asleep. Excessive anxiety and worry about activities such as work or school are difficult to control and persistent, lasting more than a few weeks.

- C. People with panic disorder experience sudden episodes of overwhelming anxiety symptoms without cause. They become very frightened and often think they are going to die. Heart palpitations, sweating, trembling, dizziness, chest pains, and a sense of unreality are some of the symptoms. These attacks may last from a few seconds to several hours. Panic disorder may last a few weeks or months or reoccur over time. People with phobias experience panic attacks related to a specific situation, object, or activity.
- D. Post-traumatic stress disorder is a reaction to an overwhelming or extraordinary event such as war, rape, flood, or torture, when people felt intense fear and helplessness. They relive the experience over and over in their thoughts and dreams. They become unresponsive to others, have little interest in activities, can't sleep or concentrate, and suffer from memory problems, angry outbursts, and depression.

V. PERSONALITY DISORDERS

- A. An inflexible pattern of thinking and behavior that deviates markedly from what's expected can indicate a personality disorder. Dysfunctional perceptions, emotions, and poor impulse control can cause difficult social and occupational adjustments. Personality disorders usually begin when people are teens or young adults. Often these people are described as having a severe "attitude" problem.
- B. Antisocial personality is diagnosed when people are always in legal or social trouble. They are oblivious to parental or social punishment, showing reckless disregard for others and no remorse for their actions.
- C. Borderline personality is diagnosed when people have a pattern of unstable relationships, an unstable image of themselves, difficulty controlling anger, and when they act impulsively, often putting themselves at risk.
- D. Paranoid personality is diagnosed when people are unreasonably suspicious or distrustful of others, believing that others are out to get them, even when that is not the case.

VI. MENTAL ILLNESS AMONG THE ELDERLY

- A. Dementia, characterized by confusion, memory loss, and disorientation, affects as many as 15% of older Americans.
- B. Alzheimer's disease is by far the most common type of dementia. The most prominent symptom is loss of recent, short-term memory.



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10 WARNING SIGNS OF MENTAL ILLNESS

1. Marked personality change.
2. Inability to cope with problems and daily activities.
3. Strange or grandiose ideas.
4. Excessive anxieties.
5. Prolonged depression and apathy.
6. Marked changes in eating or sleeping patterns.
7. Thinking or talking about suicide.
8. Extreme highs and lows.
9. Abuse of alcohol and other drugs.
10. Excessive anger, hostility or violent behavior.



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10 CLUES TO MENTAL ILLNESS IN CHILDREN

1. Excessive restlessness, constant fidgeting and squirming.
2. Impulsiveness or aggressiveness.
3. Very short attention span.
4. Marked change in activity level or school performance.
5. Listlessness, lack of interest.
6. Extreme irritability.
7. Failure to gain weight as expected.
8. Extreme shyness; refusal to go to school or leave a parent.
9. Inability to get along with other children.
10. Inability to keep up socially or academically with most children of the same age.



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MENTAL ILLNESS ATTITUDE ALERT

(True or False)

1. Mental illness does not affect the average person.
2. Most people who struggle with mental illness live on the streets or are in mental hospitals.
3. Children do not get mental illness.
4. A person can recover from a mental illness by thinking positive thoughts and by praying.
5. All people who have mental illness are dangerous.
6. If you have a mental illness, you are "crazy" (out of control) most of the time.
7. Mental illness is similar to mental retardation.
8. Most mental illnesses can be cured by the patient's taking medication.
9. Mental illness is always caused by dysfunctional environments, emotional stressors, and even by alcohol or other drugs.
10. One will rarely find people with mental illness in church.
11. When a person has a psychotic crisis, usually ten minutes of the pastor's time and a short prayer will be sufficient.
12. If a person is threatening to commit suicide (has verbalized the threat and has a plan in place), one should immediately dial "911."

(All of the above statements are false.)



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MENTAL ILLNESS AND YOU

by Dr. Carolyn Koppenol

Mental illness in one form or another is extremely common in our society. In fact, major depression is the leading cause of disability worldwide. Unfortunately, in the past mental illness was not understood for what it is—a biological illness. Instead, it became something embarrassing and frightening. Mental illness became stigmatized and that stigma has persisted to the present day. For some the stigma of mental illness can be as distressing as the illness itself because it isolates the mentally ill individual from those who should be close and supportive: family, friends, and coworkers. So many important people in our lives seem to disappear when they are confronted with the issue of mental illness. The stigma that surrounds all forms of mental illness can only be fought with knowledge and understanding.

Here are some basic facts about mental illness:

1. Mental illnesses are more common than cancer, diabetes, or heart disease. In fact, major depression (only one of many mental illnesses) is the leading cause of disability worldwide.
2. Mental illness can affect people of any income level, belief, race, or age.
3. The most severe forms of mental illness, such as schizophrenia, bipolar disorder, or major depression, affect at least one in five families in the United States. Nearly everyone in this country at one time or other has been exposed to or has experienced first hand some form of mental illness.
4. Mental illness is real illness and just as physical as diabetes or stomach ulcers or heart disease.

We know that people who experience mental illness have not done “something” to cause their own illness. However there are many things people can do to fight the stigma of mental illness, take control of their lives despite that illness, and help those around them deal with it as well.

Here are a few suggestions:

1. **ACCEPT** that you have mental illness. This can be difficult and takes time but absolutely must happen before any real recovery can begin.
2. **LEARN** everything you can about your illness. Go to a reliable online source (there are many), ask questions, and talk about treatment options with your doctor or therapist or get reading suggestions from them and follow up.
3. **MANAGE** your illness: consciously, actively take control of the course of your illness and involve yourself in the treatment you receive. Seek and follow professional advice, keep appointments, take medications as prescribed, do what you can to limit unnecessary stress.



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4. **EVALUATE** your strengths and the limitations your illness has imposed. With assistance from involved professionals as well as family and informed friends, set specific and realistic goals. Write down what you wish to accomplish for yourself by the end of this week or this month and plan what you will work toward by the end of this year, in five years, etc. Keep some flexibility in your expectations of yourself. You don't want to simply add more stress to your life.
5. **STRUCTURE** your activities each day. For example, eating sensibly, sleeping enough, and doing both regularly and predictably will have a very positive effect on energy, concentration, and mood.
6. **EXERCISE**, exercise, exercise! Keeping physically healthy and strong has a dramatic effect on your mental health as well as your physical health and in some cases may be as important as therapy and medications.
7. **MEDICATIONS** are considered the cornerstone of treatment in mental health. If medications have been prescribed for you, take them exactly as the prescription indicates. Never suddenly stop a medication or double up on a medication without discussing this with your doctor.
8. **AVOID** alcohol and illegal drugs or any drugs not prescribed specifically for you. Alcohol, all street drugs, many medications prescribed for physical ailments, and even caffeine may have profound effects on brain biochemistry; they can seriously interfere with the effects of medications that have been prescribed for your illness and can negatively affect the illness itself.
9. **EDUCATE** others around you about your illness. Help them to understand how best to communicate with you, especially on a bad day. Help them to recognize that there may be times when disturbing words and actions have little to do with them and are happening because of your illness. It is often remarkable how well people respond to even a little bit of information that can help them understand you. This is also what helps reduce the stigma that so interferes with your recovery.
10. **SOCIALIZE** often. Many studies show that being around other people, engaging in enjoyable activities, and just plain relaxing with friends is very beneficial in staying healthy and in recovering from both mental and physical illness.
11. **SUPPORT** and encourage others who may be suffering some of the same problems as you. This is so important for them and will help you to better understand your own illness and find your own solutions to tough problems.
12. **PLAN** for the probability of relapse or worsening of symptoms. Determine what may be the earliest warning signs for you that your illness is getting bad again. Write down a plan of action to take when these signs occur and share it with



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family, friends, and involved professionals. When you deal with a relapse early, a serious recurrence of illness can often be prevented or at least kept mild. This is one more way of taking control of your illness rather than letting it control you.

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LCMS HEALTH MINISTRIES COMMITS ITSELF, ON BEHALF OF PEOPLE WITH CHRONIC MENTAL ILLNESS AND THEIR FAMILIES, TO:

Encourage pastors and congregation members to become accurately informed about disorders in the brain that cause mental illness so they may interact appropriately with people who have a mental illness and their families.

Encourage pastors and congregation members to welcome and involve people with a mental illness and their families into the life of the local congregation.

Encourage pastors and congregation members to support people with a mental illness and their families in ways that help ease the heavy burdens they bear.

Encourage pastors to continue to minister with Word and Sacrament, prayer and visitation to people and families who are experiencing a mental health crisis.

Encourage pastors and congregation members to remember that mental illness is a treatable brain disorder enabling many people with chronic mental illness and their families to live full, rich, rewarding lives and contribute to their local congregations.

OUR MINISTRY ARISES OUT OF OUR FAITH

We believe that all members of the human race, including people with chronic mental illness, have been redeemed by the atoning sacrifice of Jesus Christ. We invite them into the fellowship of faith with us.

We believe that all people, including people with chronic mental illness, baptized into the community of faith, need to be nurtured by the gospel within the framework of their special needs.

We recognize that the local congregation is a community of God's people, one of whose hallmarks is mutual care and support.

MISSION STATEMENT OF THE MICHIGAN DISTRICT COMMITTEE ON MENTAL ILLNESS

To make it possible for people with mental illness to be as fully involved as possible in the work of the congregation



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MINISTRY TO PEOPLE WITH MENTAL ILLNESS AND THEIR FAMILIES

WHAT CAN CONGREGATIONS DO?

Much can be done by congregations to help people with mental illness and their families.

- A. It is important that we recognize the isolation of people with mental illness. Simple questions like "How are you?" show care. Empathizing, visiting, praying with, and encouraging participation in the congregation, rather than isolating them, show concern for individuals and families affected by mental illness.
- B. Because this illness often negatively affects the person's ability to create and maintain relationships, the congregation can help people with mental illness by reaching out in conversation and other socially accepted ways to include them in healthy relationships. Because of the nature of the illness and the stigma associated with it, the illness is often undiagnosed, further adding to the pain and suffering of the afflicted person and the family. The congregation can be present to reflect God's care and comfort.
- C. The congregation can be sensitive to the financial and social burdens of the family affected by mental illness. By word and deed, the congregation can assure the family that they are not alone. As God's caring people, the congregation can encourage and help families to talk about their struggles without fear of rejection. As Paul writes: "Carry each other's burdens, and in this way you will fulfill the law of Christ." (Galatians 6:2)
- D. To provide more awareness, understanding, and help for people with mental illness and their families, congregations can also ask their pastors to include them, along with those with other kinds of illness, in the prayers during the worship service at least once a month. Because of stigma, prayers for people with mental illness should be general and avoid names.
- E. The first week in October is designated by the National Alliance on Mental Illness (NAMI) as Mental Illness Awareness Week. Our Michigan District observes the month of October each year as Mental Illness Awareness Month. A general prayer for all people affected by mental illness in the worship service is encouraged.
- F. Congregations can also put up a bulletin board showing resources and local NAMI numbers and community mental health or private clinic numbers. The website www.NAMI.org has a wealth of information about mental illness.



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WHAT CAN PASTORS DO?

Pastors can become more aware of what mental illness is and is not (the first pages of this manual can be helpful). They can:

- A. Acknowledge that families in their congregations may be affected by mental illness and in need of their encouragement and prayers as well as their pastoral care.
- B. Include a general prayer for people who are suffering with mental illness and their families (without naming anyone) in the worship service.
- C. Refrain from using words like "crazy" or "schizophrenic" in sermons or other speech. Schizophrenia is a break from reality, not a person with a "split" or dual personality.

Pastors can also share information about mental illness with other pastors at circuit conferences.

- A. An excellent resource for a topic discussion at this kind of meeting is the presentation by Rev. Daniel Preus, included in *YOU ARE NOT ALONE*, a DVD based resource provided by LCMS World Relief and Human Care and available without cost at lcms.worldrelief@lcms.org. This DVD is also a CD filled with a PowerPoint presentation, articles, and information on how people can have an educational conference.
- B. An interdenominational website that has valuable information and links to every kind of mental health organization is www.Pathways2Promise.org.
- C. Another website filled with information about mental illness and support groups is www.NAMI.org.

Pastors can also seek information about mental health services in or near the community where they serve.

- A. They can find out what agency or private service providers are available.
- B. They can ask if the police in the community have Crisis Intervention Teams (CIT). These teams are specially trained to intervene in mental health crisis situations.
- C. Pastors need to be aware that it is not possible to have someone experiencing a psychotic episode (has lost touch with reality) committed to the hospital against his or her will without a court order. To get a court order an affidavit must be signed and filed by someone. Petitions are available at the local courthouse. The police or sheriff will serve the petition and bring the person to the hospital.



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Sometimes a court will mandate treatment for 90 days. Petitions are also available at the hospital if the person is in an emergency room. Often a person is willing to go to a hospital but is not willing to check in. Requirements and procedures can vary by state. Check with your local NAMI affiliate for up-to-date information. Without this court mandate, even a suicidal person can sign himself or herself out of the hospital or refuse out-patient treatment.

Pastors can provide information and encouragement for the family during this difficult time.

- A. It is usually hard to get someone with mental illness to agree that he or she needs medical care from a professional. Due to privacy laws, professionals will not share information about anyone over age 18 without their written permission. Pastors can provide a caring, loving, supportive presence by encouraging the person with mental illness to sign that paper. They can encourage the family to ask about the paper when the person is brought in for treatment.
- B. If the person with mental illness has been hospitalized and is receiving medical treatment, pastors can provide support and encouragement by visiting the person and assuring him or her of God's love by listening carefully and sharing an appropriate Scripture reading and prayer. When a person is psychotic, be prepared to listen to strange ideas. It will not help to argue, laugh, or be sarcastic with the person. He or she will remember that you have been there and spoke to them accurately about God's love.
- C. Pastors can also visit with the family to assure them that mental illness is a treatable brain disorder and that God is still with them and will help them through the long and difficult struggle ahead. They can listen with a caring and loving heart to their pain and suffering. They can ask permission to share an appropriate Scripture reading and pray with the family. They can also ask permission to arrange a meeting with someone in the congregation who has experience with the kind of challenge they face for information and support.
- D. They can give people permission to seek help from psychiatrists, psychologists, and trained counselors. Better yet, they could refer them to specific professionals (which means the pastor has taken the time to find good resources). This kind of understanding and encouragement can assure the family that there is hope and support.
- E. Pastors can remind the family of the need for boundaries to protect themselves as they provide support for their loved one and that nothing can separate us from the love of God in Christ Jesus who endured the cross for us and rose from the dead to give us the deepest healing of all.



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SCRIPTURE PASSAGES

Selected quotations are from the New International Version (NIV).

Psalm 23

"The Lord is my shepherd, I shall not be in want. He makes me to lie down in green pastures, he leads me beside quiet waters, he restores my soul. He guides me in paths of righteousness for his name's sake. Even though I walk through the valley of the shadow of death, I will fear no evil, for you are with me; your rod and your staff, they comfort me. You prepare a table before me in the presence of my enemies. You anoint my head with oil; my cup overflows. Surely goodness and love will follow me all the days of my life, and I will dwell in the house of the Lord forever."

Psalm 103:8-12

"The Lord is compassionate and gracious, slow to anger, abounding in love. He will not always accuse, not will he harbor his anger forever; he does not treat us as our sins deserve or repay us according to our iniquities. For as high as the heavens are above the earth, so great is his love for those who fear him; as far as the east is from the west, so far has he removed our transgressions from us."

Isaiah 43:1-3a

"But now, this is what the Lord says—he who created you, O Jacob, he who formed you, O Israel: 'Fear not, for I have redeemed you; I have summoned you by name; you are mine. When you pass through the waters, I will be with you; and when you pass through the rivers, they will not sweep over you. When you walk through the fire, you will not be burned; the flames will not set you ablaze. For I am the Lord, your God, the Holy One of Israel, your Savior.'"

Lamentations 3:22-26

"Because of the Lord's great love we are not consumed, for his compassions never fail. They are new every morning; great is your faithfulness. I say to myself, 'The Lord is my portion; therefore I will wait for him.' The Lord is good to those whose hope is in him, to the one who seeks him; it is good to wait quietly for the salvation of the Lord."

Matthew 5:3-12

"Blessed are the poor in spirit, for theirs is the kingdom of heaven. Blessed are those who mourn, for they will be comforted. Blessed are the meek, for they shall inherit the earth. Blessed are those who hunger and thirst for righteousness, for they will be filled. Blessed are the merciful, for they will be shown mercy. Blessed are the pure in heart, for they will see God. Blessed are the peacemakers, for they will be called sons of God. Blessed are those who are persecuted because of righteousness, for theirs is the kingdom of heaven. Blessed are you when people insult you, persecute you and falsely say all kinds of evil against you



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because of me. Rejoice and be glad, because great is your reward in heaven, for in the same way they persecuted the prophets who were before you."

Matthew 6:25-30, 34

"Therefore I tell you, do not worry about your life, what you will eat or drink; or about your body, what you will wear. Is not life more important than food, and the body more important than clothes? Look at the birds of the air; they do not sow or reap or store away in barns, and yet your heavenly Father feeds them. Are you not much more valuable than they? Who of you by worrying can add a single hour to his life? And why do you worry about clothes? See how the lilies of the field grow. They do not labor or spin. Yet I tell you that not even Solomon in all his splendor was dressed like one of these. If that is how God clothes the grass of the field, which is here today and tomorrow is thrown into the fire, will he not much more clothe you, O you of little faith? . . . Therefore do not worry about tomorrow, for tomorrow will worry about itself. Each day has enough trouble of its own."

Matthew 7:7-8

"Ask and it will be given to you; seek and you will find; knock and the door will be opened to you. For everyone who asks receives; he who seeks finds; and to him who knocks, the door will be opened."

Matthew 11:28-30

"Come to me, all you who are weary and burdened, and I will give you rest. Take my yoke upon you and learn from me, for I am gentle and humble in heart, and you will find rest for your souls. For my yoke is easy and my burden is light."

Matthew 28:20b

"And surely I am with you always, to the very end of the age."

John 9:1-3

"As he went along, he saw a man blind from birth. His disciples asked him, 'Rabbi, who sinned, this man or his parents, that he was born blind?' 'Neither this man nor his parents sinned,' said Jesus, 'but this happened so that the work of God might be displayed in his life.'"

Romans 8:28, 31-35, 37-39

"And we know that in all things God works for the good of those who love him, who have been called according to his purpose. . . . What, then, shall we say in response to this? If God is for us, who can be against us? He who did not spare his own Son, but gave him up for us all—how will he not also, along with him, graciously give us all things? Who will bring any charge against those whom God has chosen? It is God who justifies. Who is he that condemns? Christ Jesus, who died—more than that, who was raised to life—is at the right hand of God and is also interceding for us. Who shall separate us from the love of Christ? Shall



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trouble or hardship or persecution or famine or nakedness or danger or sword? . . . No, in all these things we are more than conquerors through him who loved us. For I am convinced that neither death nor life, neither angels nor demons, neither the present nor the future, nor any powers, neither height nor depth, nor anything else in all creation, will be able to separate us from the love of God that is in Christ Jesus our Lord."

2 Corinthians 1:3-5

"Praise be to the God and Father of our Lord Jesus Christ, the Father of compassion and the God of all comfort, who comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves have received from God. For just as the sufferings of Christ flow over into our lives, so also through Christ our comfort overflows."

2 Corinthians 12:7-10

"To keep me from becoming conceited because of these surpassingly great revelations, there was given me a thorn in my flesh, a messenger of Satan, to torment me. Three times I pleaded with the Lord to take it away from me. But he said to me, 'My grace is sufficient for you, for my power is made perfect in weakness.' Therefore I will boast all the more gladly about my weaknesses, so that Christ's power may rest on me. That is why, for Christ's sake, I delight in weaknesses, in insults, in hardships, in persecutions, in difficulties. For when I am weak, then I am strong."

Philippians 3:20-21

"But our citizenship is in heaven. And we eagerly await a Savior from there, the Lord Jesus Christ, who, by the power that enables him to bring everything under his control, will transform our lowly bodies so that they will be like his glorious body."

Philippians 4:6-7

"Do not be anxious about anything, but in everything, by prayer and petition, with thanksgiving, present your requests to God. And the peace of God, which transcends all understanding, will guard your hearts and your minds in Christ Jesus."

Hebrews 12:2-3

"Let us fix our eyes on Jesus, the author and perfecter of our faith, who for the joy set before him endured the cross, scorning its shame, and sat down at the right hand of the throne of God. Consider him who endured such opposition from sinful men, so that you will not grow weary and lose heart."

Hebrews 13:5-6

"Keep your lives free from the love of money and be content with what you have, because God has said, 'Never will I leave you; never will I forsake you.' So we



"You will be secure, because there is hope." Job 11:18a

say with confidence, 'The Lord is my helper; I will not be afraid. What can man do to me?'"

1 Peter 5:7

"Cast all your anxiety on him because he cares for you."

1 John 3:1-2

"How great is the love the Father has lavished on us, that we should be called the children of God! And that is what we are! The reason the world does not know us is that it did not know him. Dear friends, now we are children of God, and what we will be has not yet been made known. But we know that when he appears, we shall be like him, for we shall see him as he is."

Revelation 21:2-4

"I saw the Holy City, the new Jerusalem, coming down out of heaven from God, prepared as a bride beautifully dressed for her husband. And I heard a loud voice from the throne saying, 'Now the dwelling of God is with men, and he will live with them. They will be his people, and God himself will be with them and be their God. He will wipe every tear from their eyes. There will be no more death or mourning or crying or pain, for the old order of things has passed away.'"

PRAYER

A good example of a general prayer for people with mental illness and their families, as well as for the congregation as it seeks to understand and to serve them with compassion and support, is the following prayer:

O God, whose circle of care includes all, encourage us and our families, that we might cope faithfully with mental illness. Deepen our understanding. Teach us patience. Increase our capacity for empathy and acceptance. Help us not to be victimized by the stigmatizing attitude of the uninformed and uncaring. Enable us to share the journey, to find strength in partnership with others, to build together a community of support and healing. So nurture and sustain us in Your love and understanding, that we may act wisely and serve with compassion to relieve suffering, provide care, and offer hope.



"You will be secure, because there is hope." Job 11:18a

OUR THEOLOGY OF THE CROSS

by Herbert C. Mueller, Jr.

WHY?

Even "good families" with fine Christian parents may have it. In spite of their best efforts, one of the children develops schizophrenia and the family is torn apart. Where did that come from? "We did all the right things. We raised him in a loving home, we took him to church and we taught him the Word of God," his parents say, "but why did this happen? We must be horrible parents ..." as their voices trail away. Why?

Those feelings are real. My wife and I know them personally. We once had to watch them take our 13-year-old daughter by ambulance to be locked up in a juvenile psychiatric ward. My wife and I were absolutely numb. How could this happen to us? I'm a pastor, for heaven's sake. Who would walk with us? Let me explain how our theology of the cross gave us hope and a very real assurance that Jesus was walking with us.

The world is full of senseless killing, seemingly meaningless suffering. It happened in the life of Jesus even when He was a baby. While Joseph and Mary were escaping to Egypt with Him, fleeing by night, King Herod, in a fearsome jealous rage, was putting to death all the boy babies in Bethlehem. Why? What purpose could that serve? In the area where I live, just a few days before Christmas, two children ages 2 and 3 are killed in a house fire. Why? What about the mother suffering from chronic pain no doctor can pinpoint, or relieve. Why?

Philosophers and theologians debate these questions. Some people seem to have more than their fair share. Everyone searches

somehow for an answer. Why do we suffer? What about those who are dealing with severe mental illness? Could there be a purpose for it? What sort of being would impose pain for a reason?

The glib answer, of course, is that we suffer because we have done wrong. It is our fault. And yes, we can understand that if I go out and drink myself silly, I have no one to blame but myself for driving into the concrete bridge abutment. Others blame "karma" – the idea that the evil you experience now is balancing some previous (or future!) good. Of course, it's a fallen world, still others will say. People are bound to suffer. Eliphaz, the friend of Job, in the ancient biblical examination of this question, follows this opinion: "Man is born to trouble, as the sparks fly upward" (Job 5:7). It's just part of the nature of things, so why fight it?

Try telling that to a mother whose child has just been diagnosed with cancer, or a father whose daughter, despite his best efforts, seems to be slipping away into the terrifying emotional darkness of serious mental illness. "My God, why?" is a natural human response in the face of evil or pain. All illness brings pain and suffering, but perhaps one of the most misunderstood forms of suffering is that experienced by those with major mental illness and their families. Not only do they bring suffering, but individuals who are living with serious mental disorders may feel isolated from others, even family members. Siblings are divided, parents feel cut off from their children. Again, the only words that will come at times are "My God, why?"



There was Another who voiced this same cry we have all expressed from the depth of our own souls. Suspended between heaven and earth, with the total darkness of evil descending on Him, nailed to a Roman cross, abandoned for a time even by His Father, Jesus Christ Himself, in the same anguish of soul we experience – only far worse – shouted into the darkness, "My God, My God, why have you forsaken me?" (Matt. 27:46).

GOD COMES

In the mystery of the incarnation, the Christian theology of the cross, God does not give a reasoned-out three point logical answer to our "Why?" No, what He does is far more profound. He comes. To Job, God appears in a whirlwind, not to explain Himself but to call Job to account (Job 38:1ff). But He comes.

In Jesus Christ, God Himself comes to us. He is the Word of God "made flesh" for us (John 1:14). In Jesus, God Himself experiences our suffering. God's answer to our "Why?" is Jesus, nailed up to the cross for us. God does not give us a theological treatise, but He gives us His Son to suffer with us and to suffer for us. On the cross, our sin becomes His. Our suffering and pain are all given to Him. Our death He dies for us. In the midst of that suffering He also cries out with us, "My God, why?" When we ask, "What could be worse than the suffering I am experiencing?" we could also ask, "What could be worse than the Son of God Himself lying dead in a grave late one Friday?" Nothing!

Yet the Christian Gospel promises that God was not finished when Jesus was crucified. Three days later God raised Him from the dead, signaling a new reality in which God has given Him "the name that is above every

name, that at the name of Jesus every knee should bow, in heaven and on earth and under the earth, and every tongue confess that Jesus Christ is Lord, to the glory of God the Father" (Phil. 2:9-11). Jesus rises from the dead to say to us, "Fear not, I am the first and the last, and the Living One; I died and behold I am alive forever more, and I have the keys of death and hell" (Rev. 1:17-18). Jesus is the one who will "wipe away every tear," who promises, "Behold, I make all things new!" (Rev. 21:4-5).

A REALISTIC PICTURE

This crucified Jesus, now raised from the dead, brings not a sentimental view of suffering but a fully realistic picture. Jesus will not say to you, "Oh, it's not really so bad!" or "God has a purpose for all this, one day you will see." Jesus will never fool you. He knows that your pain is real, because Jesus knows pain. He understands rejection and has faced death as well. Probably you are reading this because you or a family member are faced with something beyond your understanding or control. You have just been told your daughter has borderline personality disorder. Perhaps the diagnosis has begun to explain the confusion you have experienced, but sometimes it all just overwhelms you. We pray that you come to see that Jesus does not shrink back from the horror we humans have done to one another, or the terrible things that happen to us. Jesus does not explain away the difficulty you are facing. On the cross He let it all happen to Him, because He wanted to connect with you. On the cross Jesus took it all, knew it all, suffered it all, simply so that He could be with you and know what is happening to you. Here is why our theology of the cross can be so helpful even when we are facing the terrible effects of mental illness.



Jesus knows that our suffering and pain often strip us of our possessions, our power and our pride, so that we are left alone with Him. And then He is alive to show Himself to us in His Word, the Word that invites us, "Come unto me all you who labor and are heavy laden and I will give you rest" (Matt. 11:28). Looking to Jesus on the cross, we can say, "Lord Jesus, you are my righteousness, just as I am your sin. You are my hope, just as I was in your despair on the cross. You are my sanity, just as I am your confusion; my joy, just as I am your sorrow. You are my healing, just as I am your pain. Indeed, you are my life, Lord Jesus, just as I was your death on the cross." Therefore, no matter what we suffer now, we can cling to Him and know that He will never abandon us.

Jesus will not give you a step-by-step approach to overcome your disorder on your own. But He will walk with you through all the medical tests and psychiatric treatments. In Him, God gives us hope – He holds us even when we cannot see the way out. Sometimes I hear people say, "You know, God won't give you more than you can bear!" as though God delights in loading us up just about to the breaking point. But they've quoted only the middle part of the passage. Here is the whole verse: "God is faithful, and He will not let you be tested beyond your strength, but with the testing will also provide the way out, that you may be able to bear it" (1 Cor. 10:13). First, God is faithful! You can count on Him always to keep His promises. Then the last part assures us, "He will provide the way out." The Scripture also says of Jesus, "A bruised reed He will not break, a dimly burning wick He will not quench" (Is. 42:3). In other words, when we are at our weakest, God will not break us, but will always seek to renew and restore us. He is faithful to His promise.

All of this is assured to us in the resurrection of Jesus. Even when we feel defeated, the final victory is ours, because Jesus is alive. The Scripture says, "If for this life only we have hoped in Christ we are of all men most to be pitied. But in fact Christ has been raised from the dead, the first fruits of them that have fallen asleep.... Thanks be to God who gives us the victory through our Lord Jesus Christ" (1 Cor. 15:19-20, 58). The victory does not depend on our feeling or our state of mind, but on His Word and on His resurrection. That's what is sure. That's how we can still live in hope.

TWO REALITIES

We now live under two realities. The Bible says "we walk by faith not by sight" (2 Cor. 5:7). What we see with our eyes is sin and death. What God gives by faith in Jesus is life now and forever. Which of these two realities is the more real? In Jesus it is the eternal reality of life in His resurrection. In the meantime, His promise to be with us is most clear in His cross. There Jesus shows us "God with us" most vividly in His suffering and death. For when our suffering in this world takes everything else away, even when mental illness has done its worst, Jesus is still there, He is still alive for us. He is still the one who suffered for all your sins, who died and rose that you might be forgiven, that you might be and remain a child of God. Now His life is still hidden under the cross – Jesus is God with us even in suffering and death. Now it is contained in the water connected to the Word of God in Baptism, by which we are buried with Jesus and raised to new life in Him. Now it is given under the simple forms of bread and wine, the Body and Blood of Jesus for the forgiveness of our sins. Now we receive it by faith. Then it will be fully revealed when we see Him face to face.



There is a Bible event familiar to many that can help us wrap this all up. Jesus was teaching the crowd one day in a house – in fact it was so crowded no one could go in or out (Mark 2:1-12). This made for a dilemma for the four friends of one quadriplegic. Since they couldn't get in the normal way, they decided to take matters into their own hands. They took their friend up to the roof, cut a hole, then let him down right in front of Jesus.

What was the first thing Jesus did when He saw their faith? He went right to the heart of the matter. "My son, your sins are forgiven you," He said. Your sins are forgiven you? I thought the man was paralyzed! Yes, but Jesus knew the healing needed to begin from the inside out. Specific sin does not usually cause specific suffering, but we do suffer and die because we are sinners. So Jesus forgave the man his sins, washed him clean for the sake of the blood He was soon to shed, and then Jesus did the easy thing, telling the man, "Get up, take up your bed and go home!"

There is forgiveness for you and me, too. Forgiveness for any bitterness we have toward God or others because of our condition, forgiveness for our lack of faith – forgiveness in the cross of Jesus. The Scripture says: "You who were dead in trespasses and the uncircumcision of your flesh, God made alive together with Him, having forgiven us all our trespasses, having canceled the bond which stood against us with its legal demands; this He set aside,

nauling it to the cross" (Col. 2:13-14). Jesus is alive to forgive, to strengthen, to bear us up no matter what. He is alive to heal us, either now or in the resurrection to come. That's why we have hope. That's also why Paul writes to the Galatians, "Far be it from me to glory except in the cross of our Lord Jesus Christ, by which the world has been crucified to me, and I to the world. For neither circumcision counts for anything, nor uncircumcision, but a new creation" (Gal. 6:14-15). No illness can take you away from Jesus and the new creation He will give.

Who will go with you now? Now that you or your loved one has been diagnosed with a mental illness? Jesus will. This Jesus we have been talking about, the crucified and risen Jesus, will walk with you every step of the way you have ahead of you. No matter what unknown fears you may face, no matter what anyone else says or does, nothing is more certain, more real, than this: Jesus lives! For you!

Oh, and there's one more thing. What about our daughter? A number of years have passed with more than one hospitalization. She will always struggle with her disorder but, thanks be to God, she is doing very well at present. She lives each day as a gift from Jesus, trusting His strength and His mercy for that day. May God give you the same assurance in Jesus!

Herbert C. Mueller, Jr.
Ash Wednesday 2004



"You will be secure, because there is hope." Job 11:18a

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VIDEOS AND DVDS (All are available from the Michigan District Resource Library)

Mental illness: A challenge and opportunity for God's people [Motion Picture]. Division of Church and Society, ELCA. 39 minutes with study questions.

Ministering to suicidal persons [Motion Picture]. 1988. 51 minutes.

Nobody knows [Motion Picture]. Deals with depression. 20 minutes.

Place to come back to [Motion Picture]. ALC. 29 minutes.

Carter, Jimmy. *Striving for fullness of life* [Motion Picture]. 5 sessions, 25 minutes each, with study guide with discussion questions.

Pamphlets and booklets on mental illness, including a resource manual, are also available from the Michigan District Committee on Mental Illness. Contact the District Office about them at 734.665.3791 or 888.225.2111 or www.michigandistrict.org.



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