Over the past several years, I have increasingly seen social media posts and been privy to private conversations in hushed tones among Christians about the importance of mental health. Some of these conversations have been sparked by well-known leaders—for example, Pastor Rick Warren’s recounting of his son’s suicide, and Pastor Marvin Sapp’s acknowledgment of his profound depression subsequent to the loss of his wife. Pastor Sapp even disclosed that he needed to seek, and did in fact receive, professional counseling during this difficult period.

While these prominent figures have in part, out of necessity, made efforts to spearhead conversations about mental health within faith-based communities, for many years the prevailing stance within the church has been one of silence. Among various subgroups, help-seeking behavior is decidedly taboo, undergirded by some degree of culturally validated paranoia, stereotypes, or sheer myths. “Jesus will fix it” is the motto.

More Than a “Thorn in the Flesh”

There are very rigid, even punitive, ideas that mental anguish and emotional suffering only persist because one’s faith is too weak, and/or one’s prayer life is deemed inadequate, or that there is an underlying moral defect from which one needs to be delivered. These notions have been perpetuated within our community, supported by some religious texts. If a brother or sister dares to share that s/he is struggling emotionally, there is a rapid, most often perfunctory assessment of the problem with the solution being delivered just as quickly. Seek counsel—meaning, seek “Godly counsel”—from a minister (or elder), and then have that issue wrapped up by the end of that initial conversation. If one acknowledges having mental health issues and/or needing help, there are very narrow parameters around what such help should look like and, more importantly, how long it should take.

Unsurprisingly, many individuals feel isolated. Having done all they can do in reading the Word and attending religious services or workshops, some Christians are burdened by the load of their internal struggle, feelings exacerbated by the inability to be transparent by talking to others about their challenge. They make efforts to hide “this demon” and/or resign themselves to thinking that, like Paul, this is merely the “thorn in their flesh.” The underlying belief is that mental or emotional issues equate to weakness; seeking help provides grounds for condemnation.

Remembering Mind, Body, AND Soul

One of the major hindrances in our thinking about mental health is the failure to appreciate fully the tripartite nature of man. God created us body, soul, and spirit as one being. We understand that we have a physical form that others see. This body is comprised of internal organs and allows for sensory perceptions. We quote scriptures referencing our “temples” as being holy and belonging to God. Similarly, we highlight the importance of the spirit, citing scriptures like John 4:24 about the importance of our spirit worshipping and connecting to God the Father, who is a Spirit.

What is often overlooked, however, is the soul, which is believed to be the seat of our emotional lives. The soul includes our mind (both conscious and subconscious), reasoning, and personality. How often have we reflexively given lip service to the existence of the mind, body, and soul, but then ignored the needs that arise from one part, typically the soul? In our usual tendency to be dismissive of things that are complex, not easily understood, and/or take longer to address, we have ignored emotional and mental health issues rather than pursuing greater knowledge and seeking discernment.

Speaking to this topic is 3 John 1:2 (TLB):

“Dear friend, I am praying that all is well with you and that your body is as healthy as I know your soul is.”

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Here, the word “soul” translates to the “psyche,” or the whole person. In essence, the text highlights the significance of all aspects of the individual—body, soul, and spirit—in defining health and well-being. In addition, the Bible suggests that we are to embrace healing, which may come supernaturally (James 5:14), or through medicine (Jeremiah 8:22, Matthew 9:12, Mark 2:17). Let’s think critically for a moment about the varying passages in the Bible wherein the lame, blind, or others with unclear diagnoses were brought to Jesus or the disciples for healing. Are we actually to assume that there were no emotional or “heart issues” accompanying the physical ailments with which these people presented? That’s really difficult to imagine based on what we know about humans and what we observe today in our communities. Perhaps it is time to broaden our perspective.

Making Us Whole
It has been slightly more palatable to accept that God works through medicine and/or medical professionals from the neck down, or if we are dealing with the physical structure of the brain. What has languished is our attention to our community’s mental health. At best, we have determined that only certain types of interventions or brief conversations are appropriate. The Bible makes clear that God’s ultimate plan is to have us prosper in all aspects of our lives, and to live fully and abundantly. He wants us to be whole! Therefore, it is incumbent on us as a community to be just that, like-minded believers assembling together to worship AND to attend to the needs of the whole person—body, spirit, soul. Doing so is not antithetical to the teachings of Christ.

In closing, there are many among us who are suffering, due to beliefs that by acknowledging their struggle, they are betraying their faith. We have a high priest who is familiar with our infirmities—meaning that He understood ALL of our struggles. Indeed, the great I Am is a healer, and, when needed, He elects to use others to enable that healing process, whether through traditional medicine or any number of methods.

There are two clients with whom I’ve had the recent honor of working who come to mind at this time. One was a minister who asked the question in one of his sessions, “Where does the minister go when he needs to talk?” The other client sent a text to me one evening after our scheduled session marveling that in her years of “talk therapy,” she had never felt free to discuss her faith. This woman surmised that this freedom would be key to her recovery this time, and thanked me profusely for integrating her spirituality into her treatment with its focus on bolstering resilience. These examples are particularly poignant as I recall my own experience of excitedly preparing to head off to graduate school to pursue training and having an associate pastor dismiss the need for psychology/mental health professionals almost immediately after he had just prayed over me before I left for school.

In my view, it is the church’s responsibility to acknowledge, rather than ignore, the mental health needs of its membership, identifying and facilitating dialogue about how to attend to mental wellness within the community. Although our bias against mental health issues is real, my prayer is that we will commit to educating ourselves, continuing this conversation, and challenging ideas on the topic that may not be serving our community well.

“May your spirit and soul and body be kept strong and blameless until that day when our Lord Jesus Christ comes back again.” - 1 Thessalonians 5:23b (TLB)

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