



Preparation Strategies for a Mental Health Ministry

(The page numbers in this section refer to the book [“Mental Health and the Church by Stephen Grcevich”](#))

1. An Overview

A. Biblical example Mark 2:1-5.

- Goals clarified.
- Faithfulness of friends
- The presence of Jesus was sought
- There was a plan.
- Tools/resources were available
- Time and expense were involved

B. Faith-driven (“When Jesus saw their faith,” Mark 2:5)

C. Understanding Three Attributes of Mental Illness (p. 36)

- Episodic – Common mental health conditions are often characterized by symptoms that come and go.
- Hidden – The presence of mental health-related disabilities is often difficult to quantify. Due to attached stigmas, they are often not shared with others.
- Situation-specific – Signs of mental health-related disability frequently emerge from unique demands and cultural expectations.

D. Barriers to Church Involvement as Related to Those with Mental Health Challenges

- Stigma – “perpetuates the resistance to acknowledge the presence of a mental health condition and to seek effective treatment” (p. 54).
- Anxiety – “is a normal and healthy response to *future* threats, while fear describes the emotional response to an *imminent* threat, whether real or perceived.” (p.64, 127-138)
- Social Related Barriers
 - Executive functioning – is a reference to skills that enable us to plan, focus attention, remember instructions, and manage multiple tasks. (pp.69-76, 139-151)
 - Sensory processing – is not recognized as a stand-alone medical condition, but is common among children and teens with autism spectrum disorders, AHD, and anxiety disorders. (pp.76-79, 153-160)

- Social communication – as a disorder, social communication is characterized by difficulties with the use of verbal and nonverbal language for social purposes. (pp.79-82, 161-168)
- Social isolation – as a disorder is characterized by social discomfort and avoidance of interpersonal contact. (pp.82-85, 169-177)
- Family experiences with a church – Factors include a family’s history of church involvement with mental health issues and a bad experience with church leadership or members regarding the mental health of a family member. (pp.85-86, 179-187)

E. The Mindset of a Ministering Church

- A “doing ministry” rather than a “program ministry”
- The basics for a healthy mindset
 - Use people-first language (Example: the boy who is depressed rather than the depressed boy)
 - Don’t define someone by their disability or condition.
 - Don’t minimize and Why Are They Harmful the severity of mental illness
 - Don’t question the validity of specific diagnoses.
 - Don’t question the legitimacy of treatment dispensed by licensed professionals.
 - Don’t assume that spiritual remedies alone will be the only way that God chooses to heal persons with mental illness.
- The ministry of presence
 - Being with the person affirms the value of the person.
 - The incarnation of Jesus modeled this (John 1:14)
 - The practice of Jesus: “Christ’s method alone will give true success in reaching the people. The Saviour mingled with men as one who desired their good. He showed His sympathy for them, ministered to their needs, and won their confidence. Then He bade them, ‘Follow Me.’”—*The Ministry of Healing*, p.143.

2. Considerations Before Implementing Your Ministry Plans.

A. Basics of Biblical Inclusion

- Everyone is unique with individual differences and needs.
- Everyone is created in the image of God with an inherent dignity
- Everyone is needed in the body of Christ for it to be whole
- Everyone is valued for whose and who they are

B. Personal Openness in Church Activities

- Programs and activities are warmly open to others.
- Use of inclusive language

- Friendship ties, associations, common interests exist for those who come to visit.
- Leaders desire to accommodate special needs if necessary
- What is the commitment of the church to reach these individuals?
- Will those who come to visit leave feeling that they are welcomed because they are valued for who they are as individuals?

C. Training Needed

- Collaborative Team – What training may be needed for a collaborative team approach to reach out to these children?
- Encouragement – A mindset of understanding, support, and seeing possibilities in others.

“In every human being He discerned infinite possibilities. He saw men as they might be, transfigured by His grace—in “the beauty of the Lord our God.” Psalm 90:17. Looking upon them with hope, He inspired hope. Meeting them with confidence, He inspired trust. Revealing in Himself man's true ideal, He awakened, for its attainment, both desire and faith. In His presence souls despised and fallen realized that they still were men, and they longed to prove themselves worthy of His regard. In many a heart that seemed dead to all things holy, were awakened new impulses. To many a despairing one there opened the possibility of a new life.” Education, p.80

- Personal Accommodation – What can be done to provide for meaningful participation by all?
- Allocation of Resources – Has sufficient financial funding for this ministry been provided?
- Leadership – Model how to treat others respectfully, physically, emotionally, culturally, and socially?

D. Review the “Accessibility and Belonging Questionnaire.” Consider the following structural areas of concern:

Accessibility (See Adventist Possibility Ministries Accessibility Form)

Review the following categories for accessibility:

- Physical structures,
- Entries to buildings
- Parking lot
- Lighting
- Audio
- Restrooms
- Seating/wheelchair spaces
- Ease of Participation
- Church hardware – doorknobs, switches
- Directional signs
- Platform accessible for participation by all

Helpful Resources:

(Biblical Basis for Inclusion)

See also the following booklets produced by the General Conference Sabbath School and Personal Ministries: [Keys to Special Needs Ministries – Intellectual Disability and Emotional and Psychiatric Disability and Communication Disorder.](#)

3. Steps for Beginning the Ministry ([Creating a Team](#))

- A. Get the support of the pastor and church board.
- B. Recruit a leader who can develop a team.
- C. Carefully select a mental health team
- D. Allocate a budget
- E. Communicate this new ministry to your church.
- F. Tell stories to inspire, educate, motivate, and foster inclusion.
- G. Evaluate, improve, and celebrate

(Key Ministry

<https://static1.squarespace.com/static/56d87a50d210b825aa8f70a9/t/5b9bc07a1ae6cf0d5abe118c/1536934011988/Biblical+Basis+for+Inclusion+%282018+version%29.pdf>)

4. Organizational Structure

- A. Main Leader and/or Co-Leaders
 - Responsible for calling members, setting an agenda, scheduling, and leading out in planning committee meetings
 - Delegate responsibility for various projects
 - Ensure that all jobs are delegated and implemented
 - Member of the church board
- B. Create a Mental Health Team Positions
 - Program/Ministry Leader
 - Visitation Group Coordinator
 - Mentor/Coach Coordinator
 - Leader for Networking with Professional Organizations
 - Membership/In-Church Ministry Leader
 - Social Media Manager

(Key Ministries ([Creating A Team](#)))

C. Coordinating Ministries

- Prayer Ministry
- Youth & Young Adults
- Deacons, Deaconesses, & Greeters