Overview of Mental Health And Relationship Issues

Apostolic Christian Counseling and Family Services
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Questions to Consider

1) What do you think are the top three mental health issues affecting the Apostolic Christian Church today?

2) What do you think are the most common relationship problems affecting the Apostolic Christian Church today?

3) As you interact with people at your church on any given Sunday, what percentage of the people you talk to are dealing with mental health issues?

Questions to Consider

4) Do you think that rates of mental health issues and relationship problems within our church are similar to or different from rates of these issues and problems in society in general? If you think the rates are different, how? If you think the rates are the same, why?

5) Who do you think that struggling people are most likely to talk to first when they seek help for a mental health issue or relationship problem? Why?

6) What percentage of people served by Apostolic Christian Counseling and Family Services (including counseling, telephone consultations, videoconferencing, etc.) are members of the church?

Questions to Consider

7) What are the top three complaints struggling people have about getting help from ministers?

8) What do you think people in the congregation expect from ministers and ministers’ wives when someone in the congregation is hurting? Are their expectations reasonable?

9) How comfortable are you in recognizing mental health issues in someone you are talking to?

Why This Topic?

““The Spirit of the Lord is upon me, because he hath anointed me to preach the gospel to the poor; he hath sent me to heal the brokenhearted, to preach deliverance to the captives, and recovering of sight to the blind, to set at liberty them that are bruised, To preach the acceptable year of the Lord.””

Luke 4:18-19

Why This Topic? cont’d

• Caring for the hurting is part of the mission Jesus gave to the church.
  • 1 Corinthians 12:26-27 “And whether one member suffer, all the members suffer with it; or one member be honoured, all the members rejoice with it. Now ye are the body of Christ, and members in particular.”

• Satan wants us to be harmed through trials, while God wants us to grow closer to Him and to bring Him glory through them.
  • 1 Thessalonians 5:14 “Now we exhort you, brethren, warn them that are unruly, comfort the feebleminded, support the weak, be patient toward all men.”
Why This Topic? cont’d

We must encourage each other to look to Jesus for grace, strength, and guidance as we are going through trials.

- Romans 12:15 “Rejoice with them that do rejoice, and weep with them that weep.”

Showing Christian love to another person takes time, effort, and self-sacrifice. However, that is exactly what Jesus has done for you and me.

- Luke 6:31 “And as ye would that men should do to you, do ye also to them likewise.”

The Bio-Psycho-Social-Spiritual Model

Think “Both-And”
Instead of “Either-Or”

Four Key Areas of Functioning

1. Spiritual
   - Sin issues; distortions in viewing God; theological misunderstandings and lack of knowledge about the Bible; issues involving the church, elder, and/or ministers.

2. Physical
   - Biological and neurological functioning including physical health, brain function, IQ, family history, genetics, etc.

3. Psychological
   - Thinking patterns; mental and emotional struggles (grief, etc.) and disorders (clinical depression, etc.); life experiences; personality.

4. Social
   - Difficulties in relating to other people; dysfunctions in families or other groups; accountability; mentoring; social isolation.

Levels of Intervention

<table>
<thead>
<tr>
<th>Normal Life Transitions &amp; Stress</th>
<th>High Stress &amp; Difficulty Coping</th>
<th>Clinical Symptoms</th>
<th>Severe Problems</th>
</tr>
</thead>
</table>

Bible study, Prayer, Church Meet well or ministers
Physician/Wellness Activities Social Support Network Mentoring Accountability Licensed Counselor
Psychotherapy M.F. for Psy-Meds Psychiatry
Specialty Clinic In-patient
Lawyer

Reasons People Go to Counseling

1. Personal unhappiness or emotional discomfort/pain
2. Relationship problems
3. Desire to stop certain behaviors, habits, and/or types of habitual sin, etc.
4. The concerns of others
5. Legal and community problems
6. Problems that interfere with work or school performance
7. Desire to grow in some area of life or improve certain skills
Myths About Counseling

1. People who see counselors are “crazy.”
2. You should trust someone just because he or she is a counselor or has a lot of letters behind their name.
3. You go to counseling and a therapist ‘fixes’ you.
4. The goal of therapy is to find someone to blame for your problems.
5. Counselors just try to keep you in therapy for as long as they can.
6. All counselors are “just as messed up” as the people that they are counseling.
7. They make you lie down on a couch.

Types of Mental Health Professionals

- **Psychiatrists:**
  - Physicians (MD; DO) who prescribe medication to treat mental disorders.
- **Psychologists:**
  - Ph.D. or Psy.D. who specialize in the assessment and psychological treatment of mental disorders
- **Counselors/Therapists/Psychotherapists:**
  - Master’s degree in counseling or psychology, work with mental health issues and relationship problems.
- **Clinical Social Workers:**
  - Master’s degree in social work; work with people in counseling, social service agencies.
- **Marriage & Family Therapists:**
  - Master’s degree in MFT; work primarily with relationships

Common Mental Health And Relationship Issues Seen In Counseling

- Difficulty working through hurts & forgiving
- Perfectionism
- Obsessive Compulsive Disorder & Scrupulosity
- Grief and Loss
- Body Image Distortions, Emotional Eating, Eating Disorders
- Attention-Deficit/Hyperactivity Disorder
- Parent-Child Relationship problems
- Low Self-Worth
- Child Behavior Problems
- Emotional, Sexual and/or Physical Abuse

Issues People Seek Counseling To Address

- Depression
- Anxiety and Worry
- Stress & Burnout
- Marital & Family Conflict
- Dealing with unresolved/out of control anger
- Posttraumatic Stress Disorder (PTSD)
- Drug & Alcohol Abuse
- Pornography & Sexual Addiction
- Panic Disorder

Stages Of Change

Matching Interventions to Personal Readiness
From Prochaska & DiClemente

Characteristics of this Stage
1. Pre-Contemplation
   - No consideration to change.
   - Lack of motivation to change.
   - Low self-efficacy (i.e., the person may not believe that they can actually change).
   - Lack of information
   - Contentment with the "status quo."

Helpers can...
1. Establish rapport and build trust.
2. Offer factual information about the problem.
3. Explore pros/cons of continuing on the road they are on.
4. Discuss the effect of the negative consequences they are experiencing.
5. Express concern and keep the door open.

Characteristics of this Stage
2. Contemplation
   - Active consideration to change.
   - Ambivalence.
   - Self re-evaluation.
   - External motivation.
   - Person starts considering the pros/cons or risks/benefits of changing.

Helpers can...
1. Encourage the person that feeling ambivalent is normal.
2. Emphasize the person's free choice, responsibility, and ability to change.
3. Help the person to see change as having internal as well as external benefits.
4. Help the person "tip the scale" toward change by helping the client focus on his/her own true values and goals.

Characteristics of this Stage
3. Preparation
   - There is a commitment to act.
   - The person is seeking a window of opportunity to do it and how.
   - Cognitive reframing.
   - Internal motivation.
   - Person is willing to take a risk and try something.

Helpers can...
1. Help the person clarify their own goals and strategies for change.
2. Offer a menu of options of ways to begin.
3. Help person enlist social support.
4. Consider the barriers to change and help the person lower them (finances, child care, transportation, work, etc.).
5. Discuss a change plan.

Characteristics of this Stage
4. Action
   - Active change is occurring, but the person hasn’t reached a stable state yet.
   - Behavior is goal directed.
   - Active response to challenges.
   - Willingness to experiment and learn new skills.

Helpers can...
1. Assist the person by focusing on reinforcing positive change.
2. Support a realistic view of change through small steps.
3. Acknowledge the difficulties of beginning a change.
4. Help person identify high-risk situations and plan for them.
5. Assist the person in finding coping strategies.

Characteristics of this Stage
5. Maintenance
   - The person is working to prevent relapse.
   - As time goes on, person becomes less tempted.
   - Re-evaluation
   - Setting long-term goals
   - Continued development of new skills
   - Open to feedback

Helpers can...
1. Help the person identify new and healthy sources of pleasure (i.e., “don’t take something away without adding something”).
2. Help the person practice new coping strategies.
3. Develop a "fire escape" plan in event of relapse.
4. Maintain supportive contact.
5. The person needs to think about how s/he becomes part of the solution.
So, what does this mean for helpers?

Change is not a simple yes or no decision. The people you are trying to help are at various points (stages) along a continuum of readiness to change. Typically, an individual doesn’t skip stages; although the time spent in each stage by different people can vary widely. Ways to help an individual are different depending on what stage he or she is in.

- If someone is in Pre-Contemplation, it does no good to ask them to start an Action program tomorrow!

From: Pathways to Promise
Jennifer Shifrin

“The religious community generally is very good at responding with compassion to people facing catastrophic illness [such as cancer]. Take a moment to consider ways you and your congregation might offer care to people who suffer from mental illness.”

Responding With Love Instead Of Fear

<table>
<thead>
<tr>
<th>How you can help:</th>
<th>If they have cancer:</th>
<th>If they have mental illness:</th>
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</thead>
<tbody>
<tr>
<td>Visit them in the hospital or at home</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Offer prayers for them at services</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Send cards, emails, or texts to keep in touch</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Listen and give moral support</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Encourage sharing</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Make periodic phone calls</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Help with special housing or job needs</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Offer to shop with or for them</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Engage the Struggling Person

- Support the struggling person in his or her treatment.
- Give the person encouragement and accountability to stick with it!
- Don’t give the person clichéd advice or simplistic answers.
  - Proverbs 25:20 “As he that taketh away a garment in cold weather, and as vinegar upon nitre, so is he that singeth songs to an heavy heart.”
- If there are other family, educational, financial issues, etc. that need to be addressed, help the person find someone who can assist.
Ask yourself: Is this a tension to be managed or a problem to be solved?

Talking about the Issues

- Realize people differ widely in how much they want to talk about their issues.
- You need to adjust yourself to their style.
- Sometimes people want to talk about their issues and other times they want to be able to focus on other things not related to their issues.
- The best plan is to talk to the person privately and see if they want to talk. If not, that’s fine. At least they know you care.
- Be discreet about talking about their personal issues at church. While sometimes it is OK, often times it is not.

“Crisis-Mode” Versus “Long-Distance Running”

- Churches are good about helping right after a crisis.
- When the crisis is past, we tend to forget that a struggling person’s issues may continue.
- Many times Satan relies on wearing people down as a tactic to get advantage.
- Remember Satan doesn’t give a struggling person ANY breaks. He is going to try to kick them when they are down.

God Redeems Our Hurts

2 Corinthians 1:3-6

“Blessed be God, even the Father of our Lord Jesus Christ, the Father of mercies, and the God of all comfort; Who comforteth us in all our tribulation, that we may be able to comfort them which are in any trouble, by the comfort wherewith we ourselves are comforted of God. For as the sufferings of Christ abound in us, so our consolation also aboundeth by Christ. And whether we be afflicted, it is for your consolation and salvation, which is effectual in the enduring of the same sufferings which we also suffer: or whether we be comforted, it is for your consolation and salvation.”