The Reality of Mental Illness

1 in 4 are affected by mental illness
8.6 million adults have suicidal thoughts
3rd leading cause of death
Children with anxiety disorders least likely to receive treatment
People of color have less access to care
The Reality of Mental Illness
Starting with Medical Diagnoses . . .
Starting with Medical Diagnoses is Fruitful.

In Guiding Helpful Treatments

Best Practices for Providers
SAMHSA Toolkits

Cognitive–Behavioral Treatment of Borderline Personality Disorder
Marsha M. Linehan
Starting with Medical Diagnoses Is Fruitful. . .

... In Suggesting How Not to Respond

With Bible study and prayer ALONE, people with serious mental illness like depression, bipolar disorder, and schizophrenia can overcome mental illness.

AGREE
- Among all Americans: 35%
- Among self-identified born-again, evangelical, or fundamentalist Christians: 48%

DISAGREE
- Among all Americans: 59%
- Among self-identified born-again, evangelical, or fundamentalist Christians: 47%

DON'T KNOW/NOT SURE
- Among all Americans: 6%
- Among self-identified born-again, evangelical, or fundamentalist Christians: 5%

Telephone survey of 1001 Americans, Sept 6-10, 2013
Starting with Medical Diagnoses is Fruitful... 

... In Guiding Christian Commitment to Advocacy, Destigmatization, Inclusion
When Diagnoses Are Inadequate or Misleading

When all “Mental Illness” is Treated Alike

When Illness Becomes Identity
diagnosis (n.)

1680s, medical Latin application of Greek *diagnosis* "a discerning, distinguishing," from stem of *diagignoskein* "discern, distinguish," literally "to know thoroughly," from *dia-* "apart" (see *dia*) + *gignoskein* "to learn" (see *gnostic*).
Nine Resources for Christian Discernment (Diagnosis) of Mental Health and Mental Illness
1. Stories Matter

Once upon a time . . .
And every day . . .
Until one day . . .
And because of this . . .
And because of this . . .
Until finally . . .
And ever since that day . . .

. . . with credit to Margery Williams and Ray Barfield, MD, PhD
2. We are deeply and fully loved by God.
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God saw everything that he had made, and indeed, it was very good.

--Genesis 1:31

What is the “nature” of love? . . . My tentative answer to this question runs as follows: In every conceivable case love signifies much the same as approval. This is first of all to be taken in the literal sense of the word’s root: loving someone or something means finding him or it *probus*, the Latin word for “good.” It is a way of turning to him or it and saying, “It’s good that you exist; it’s good that you are in this world!”

3. We are deeply and fully known by God.

“You hem me in, behind and before . . .” – Ps. 139:5
4. We are wayfarers.
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How long, O Lord? Will you forget me forever?
How long will you hide your face from me?
How long must I bear pain in my soul,
and have sorrow in my heart all day long?
How long shall my enemy be exalted over me?

But I trusted in your steadfast love;
my heart shall rejoice in your salvation
I will sing to the Lord
because he has dealt bountifully with me.

--Psalm 13:1-2, 5-6 (NRSV)
What is needed, right now, for the journey?
5. We are integrated, whole-person creatures.

Soul/Mind (Mental, Spiritual, Cognitive)

Body (space, extension, physical, emotional)

Rene Descartes
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Rene Descartes (1596-1650)
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Humans Are Bodies (Ensouled Bodies, Embodied Souls) on a Journey to God

Living Body

God

desire

Redemption, election, graced participation
6. ‘Christ . . . Is Our Life’

“You died, and your life is now hidden with Christ in God.

--Colossians 3:3-4

They went out to restrain him, for people were saying, “He has gone out of his mind.”

--Mark 3:21

“No one who believes in him shall be put to shame . . .”

--Romans 10:11
7. Brokenness is Communal (and Not Just Individual)
8. **Healing is Communal (and Not Just Individual)**
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http://www.heraldnet.com/article/20140824/NEWS/140829557
9. ‘They Recognized Him in the Breaking of the Bread’
Discerning the Body (1 Cor 11:29)
Discerning the Body (1 Cor 11:29)
Two Ways of Seeing Mental Health Problems
Seeing the Individual (Alone)

You can’t set her free. But you can help her feel less anxious.

You know this woman. She’s anxious, tense, irritable. She’s felt this way for months.

Beset by the seemingly insurmountable problems of raising a young family, and
confirmed to the home mold of the time, her symptoms reflect a sense of inadequacy
and isolation. Your reassurance and guidance may have helped some, but not enough.

Serax (oxazepam) cannot change her environment, of course. But it can help
relieve anxiety, tension, agitation and irritability, thus strengthening her ability to
cope with day-to-day problems. Eventually—as she regains confidence and com-
posure—your counsel may be all the support she needs.

Indicated in anxiety, tension, agitation, irritability, and anxiety associated
with depression.

May be used in a broad range of patients, generally with considerable
dosage flexibility.

Contraindications: History of previous hypersensitivity to oxazepam. Oxazepam is not indi-
cated in psychosis.

Precautions: Hypotensive reactions are rare, but use with caution where complications could
result from a fall in blood pressure, especially in the elderly. One patient exhibited drug
dependency by taking a chronic overdose developed upon cessation questionable withdrawal
symptoms. Carefully supervise dose and amounts prescribed, especially for patients prone
to overdose; excessive prolonged use in susceptible patients (alcoholics, ex-addicts, etc.) may
result in dependence or habituation. Reduce dosage gradually after prolonged excessive
dosage to avoid possible opiodiplastic side effects. Caution patients against driving or operating
machinery until absence of drowsiness or dizziness is ascertained. Some patients of possible
reduction in alcohol tolerance. Safety for use in pregnancy has not been established.

Not indicated in children under 6 years; absolute dosage for 4 to 12 year olds not established.

Side Effects: Therapy-interrupting side effects are rare. Transient mild drowsiness is common
initially; if persistent, reduce dosage. Dizziness, vertigo and headache have also occurred
infrequently; syncope, rarely. Mild paradoxical reactions (excitement, stimulation of affect) are
reported in psychiatric patients. Minor diffuse rashes (urticaria, urticarial and maculopapular)
are rare. Anorexia, lethargy, edema, strained speech, tremor and altered libido are rare and
generally controllable by dosage reduction. Although rare, leukopenia and hepatic dysfunction
have occurred. Cases of abnormal liver function tests are advised. Ataxia, reported rarely, does not appear related to dose or age.

These side reactions, noted with related compounds, are not yet reported; paraclinical exac-
tion with severe rage reactions, hallucinations, manic or depressive reactions, change in EEG pattern,
mania, auditory hallucinations, change in heart rate, electrocardiogram, altered vision, dizziness, incoherence, stupor,
disorientation, fever, euphoria and dysnatremia.

Availability: Capsules of 10, 15 and 30 mg. oxazepam.
Seeing Diagnoses

See depression.

"My sadness just won't go away"
"I don't have the energy to go out with friends"
"My constant worry is affecting my job"

See the data.

Proven to achieve remission of symptoms in 32 double-blind comparative trials with over 7,000 patients.

Proven to resolve emotional and physical symptoms.

Proven tolerability with once-daily dosing.

IMPORTANT TREATMENT CONSIDERATIONS
EFFEXOR XR (venlafaxine HCl) extended-release capsules is contraindicated in patients taking monoamine oxidase inhibitors (MAOIs). EFFEXOR XR would not be used in combination with an MAOI or within at least 14 days after discontinuing treatment with an MAOI. At least 7 days should be allowed after stopping EFFEXOR XR before starting an MAOI.

Both adult and pediatric patients with major depressive disorder (MDD) can experience symptoms of their depression and the emergence of suicidal ideation and behavior whether or not they are taking antidepressants. Patients treated with antidepressants should be observed for a clinical worsening and suicidality, especially at the beginning of drug therapy, or at the time of increases or decreases in dose.

Various agitation, panic attacks, insomnia, irritability, hostility, hypomania, and mania have been reported in patients taking antidepressants. Discontinuation or modification of therapy should be considered when symptoms are severe, persist in nature, or not part of presenting symptoms.

Treatment with antidepressants is associated with sustained increases in blood pressure (BP) in some patients. Appropriate BP monitoring is recommended.

Suicidality or depression-related behavior has been observed in both placebo and treated patients of all ages. The most common adverse events reported with EFFEXOR XR, generally depression-related (15%) and/or anxiety (8%), were worsening agitation, affective flattening, hypomania, and/or irritability.

See a difference.

http://www.huffingtonpost.com/katherine-sharpe/antidepressant-advertising_b_1586830.html
Is she just shy?

Or is it Social Anxiety Disorder?

ZOLFOFT
Indicated for Social Anxiety Disorder
Proven efficacy in short- and long-term trials
96% of patients maintained response for up to 44 weeks***

Still fighting
monsters

Paxil
The courage to dream

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Two ways of seeing

Mental health problems are identity-defining problems, limited to the individual, caused by dysfunction in the body (or the mind).
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Mental health problems are identity-defining problems, limited to the individual, caused by dysfunction in the body (or the mind).

Mental health problems are challenges faced by wayfarers—embodied, relational, loved creatures of earth who are on a journey to God.
What is needed, right now, for the journey?