

# **NAMICon 2020**

A Virtual Event • July 13-14

**Together Toward Tomorrow**



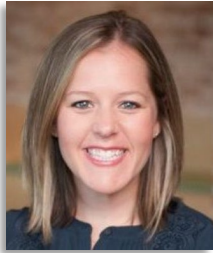
# ENGAGING FAITH LEADERS IN ADDRESSING MENTAL ILLNESS

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# HHS PARTNERSHIP CENTER'S GOAL



We work to build **partnerships** with community and faith-based organizations to serve individuals, families, and communities in need.



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# WHY FAITH AND MENTAL HEALTH

- One in four individuals who seek help for mental illness turn to faith leaders *before* they seek help from a clinical professional.
- When spirituality and religious belief are included in treatment, when desired by the client, clients do better.
- Studies have shown that more than 50% of patients receiving medical or psychological care express a desire to discuss spiritual matters with their health care providers.
- Reflections from panelists.



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# PARTNERS IN MENTAL HEALTH

- **LISTENING SESSION:**
  - Community and Clergy
  - Clinicians
  - Clients
  - Caregivers
- **LEARNING**
- **A STARTING PLACE**



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# NEW! MENTAL HEALTH GUIDE TO AID FAITH COMMUNITIES



**The Partnership Center**  
Center for Faith and Opportunity Initiatives  
U.S. Dept. of Health and Human Services



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# SEVEN PRINCIPLES OF COMPASSION IN ACTION

1. The **Inherent Dignity** Principle
2. The **Illness** Principle
3. The **Caregiver** Principle
4. The **Professional Assistance** Principle
5. The **Treatment + Medication** Principle
6. The **Complexities** Principle
7. The **Hope** Principle



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# CARING: BOTH IN WORD AND DEED



*Compassion*

**PRACTICAL EXERCISES**

*in Action:*



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## THE INHERENT DIGNITY PRINCIPLE:

We Affirm The Inherent Dignity Of Every Person.

Mental illness affects a large number of people and many may be at risk of experiencing mental illness. The **Inherent Dignity Principle** asks that we consider the language we use to talk about and to people with mental illness and that we include the gifts, experiences, and abilities of those experiencing mental illness in the ongoing life of our community.



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# THE INHERENT DIGNITY PRINCIPLE:

We Affirm The Inherent Dignity Of Every Person.



IN A COMMUNITY OF JUST 100 PEOPLE:



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## THE INHERENT DIGNITY PRINCIPLE:

We Affirm The Inherent Dignity Of Every Person.



### ACTION ITEMS

- I. KNOW THE FACTS
- II. LISTEN FIRST
- III. SPEAK RESPECTFULLY
- IV. REDUCE SOCIAL ISOLATION



## THE ILLNESS PRINCIPLE:

We Acknowledge Mental Illness As An Illness.

Mental Illnesses result from a **complex interaction of biological, psychological, and environmental factors**. These conditions are diagnosed by a mental health or medical professional and can be serious, even life-threatening. Mental illness is not a lack of belief in a higher power or the result of sin or wrongdoing. With the **Illness Principle**, we will take advantage of opportunities to learn about different mental health conditions, as well as their signs and symptoms, so we can know how to participate in the lives of people with mental illness, and provide care and support, when needed.



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## THE CAREGIVER PRINCIPLE:



We Understand Mental Illness Impacts Families

While challenges exist for people who experience mental illness, it can also be isolating for family members and loved ones who assist in their care. **The Caregiver Principle** recognizes our need to affirm our responsibility as a faith community to all families, including families experiencing mental illness. Our responsibility to promote the well-being of our communities includes providing care, support and love to caregivers or families impacted by mental illness.



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## THE PROFESSIONAL ASSISTANCE PRINCIPLE:

We Know Mental Illness Requires Professional Assistance.

Faith communities may learn to identify early signs and symptoms of mental illness; however, mental health professionals hold the expertise required to diagnose and treat mental illness. The **Professional Assistance Principle** asks us to encourage someone who exhibits the signs and symptoms of mental illness to connect with a licensed mental health professional and provide assistance in gaining access to care when necessary.



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## THE TREATMENT AND MEDICATION PRINCIPLE:

We Encourage Participating In Recommended Psychiatric Treatment, Including Therapy, And, As Necessary, Medication.

Diagnosis of mental illness is the beginning of a journey similar to the diagnosis and management of other chronic health conditions, such as diabetes or high blood pressure. As with other chronic conditions and disabilities, early treatment and supportive services are key to potentially reducing lifelong challenges. A person-centered care plan developed with a qualified health professional may include hospitalizations, medications, psychotherapy, counseling and other supportive services. The **Treatment and Medication Principle** asks that we commit to support individuals as they work together with their mental health professional.



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## THE COMPLEXITIES PRINCIPLE:



We Understand Mental Illness Can Be A Challenging, Life-Long Journey.

Supporting people with mental illness may not be easy at times. The circumstances and challenges faced by friends, family, and caregivers of people with mental illness are often complex. Through the **Complexities Principle**, we enter into the complexities with people experiencing mental health challenges and their loved ones. We enter these relationships with humility, empathy, and compassion to learn about the challenges they are facing.



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## THE HOPE PRINCIPLE:



We Recognize And Celebrate That People With Mental Illness

With the **Hope Principle**, we affirm that wellness for people with mental illness is characterized by stability, not cure. As their wellness journey begins and moves toward stability, we have the opportunity and privilege to walk with people with mental illness through peer support (people with lived experience) and other volunteers in the faith community.



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# Questions?



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**The Partnership Center**

Center for Faith and Opportunity Initiatives  
U.S. Dept. of Health and Human Services