Mental Health Sunday
Chapel in the Park United Church
May 5, 2024
by Rev. Dr. Paul Shepherd

Based on Psalm 88 and Matthew 8:1-4

This week, the theme of our worship is "Mental Health Sunday". Of course, "mental health" is not really a theme. It is a vast universe that includes our own mental health. That universe also includes our perception of others. Our stigmas. Our biases. Our level of comfort (or discomfort) being, or being with people who do not process reality the way we like to assume that people do. Mental Health impacts us all.

One small window into the vast universe of mental health can be seen in Psalm 88. Most psalms are comforting. But Psalm 88 is one long cry of pain, isolation and desperation. Like almost all psalms, we do not know the context it was written out of. We know the name of the person who wrote it: Heman the Ezrahite. But that does not tell us very much. Why was he so desperate? We do not know. Some scholars suggest that Heman lived with leprosy and was therefore cut off and isolated from his community. Other scholars argue that Heman's isolation was punishment from God for his sins. And yet other scholars hypothesize that Heman was living with a mental health issue. Which is why I selected the text for today.

To me, Heman's words definitely remind me of many of the people I have met who struggle with mental health. The isolation from others because nobody understands you. The desperation because you just do not know if things will ever get better. The pain because … well, because there is pain.

My own reading of the Bible is that the Bible does not address mental health in any way that is helpful today. And we should not really expect it to. Some biblical texts declare that a person who suffers from mental health is possessed by single or multiple demons. Some texts declare that people who suffer from mental health are intentionally being punished by God for something. And I refuse to worship any God who would do that. Is there any hope at all in the Bible for people who suffer from mental health? Yes. We can find hope - and a positive role for churches - in our gospel reading. And we will

come to that later.

There was an interesting article in CBC awhile back. It was titled, "Some Canadians fear mental health groups are reinforcing stigma by erasing 'schizophrenia' from their names". It turns out that some mental health organizations in Canada are removing the word schizophrenia from their names.

Take for example the Toronto-based "Schizophrenia Society of Ontario". In 2020 they changed their name to the "Institute for Advancements in Mental Health". According to their CEO Mary Llberti, the change was in part because their clients wanted the change. Even people who had received a great deal of support from the society were uncomfortable because of increasing stigma. Some clients said things like,

"Please do not mail us anything that has a return address [with the words] Schizophrenia Society on it because we feel very uncomfortable with that"

Schizophrenia affects about 1% of Canadians. 320,000 people. And "despite how common the illness is, some organizations say they find it difficult to raise funds and support for schizophrenia research due to the stigma surrounding the illness."

To be fair, these organizations are also changing their names because they now deal with a wide variety of mental health issues, not just schizophrenia. But people who live with schizophrenia say that removing the word "schizophrenia" from the names of these organizations will only further stigmatize the very people who need their help.

I do not blame the agencies for this change. I blame all of us. Because some illnesses are spoken of freely and some illnesses are always unnamed or spoken in hushed tones. Even in the church.

I would love to hear your own observations at coffee time. But my own observations are pretty clear. Many people I speak with talk quite freely about physical illnesses, like cancer or diabetes. But most people shy away from speaking about mental illnesses. The unspoken assumption is that with a physical condition like cancer, the illness is not the person's fault. The person is just unlucky. But with mental illnesses, there is often an underlying assumption that the illness is the person's fault. At some level anyway. That is the attitude that the Bible projects. But mental illnesses are rarely the fault of the person - even in the small number of cases where talking about fault makes

any sense at all.

As a society, we have often blamed people who suffer with mental health for their own conditions. And we have until recently not taken mental health very seriously. The first official attempt to get a handle on mental health in the US was in 1840. As part of the census, there was a single question that essentially asked, "are you insane?". By 1880 this had expanded into questions about 7 specific identifiable mental health conditions. By the year 2000 there were 365 diagnostic categories in use - not in a census, but for research purposes. It has taken many years for mental health issues to even get close to the granularity we expect and demand when we discuss physical health issues.

And when people I visit do find ways to talk about mental health, even there, some mental illnesses are seen as "socially acceptable" and some are not. People I visit with who are willing to speak about mental health issues will very quickly name conditions like anxiety, depression, and dementia. But people really shy away from telling stories about themselves or loved ones who suffer from less socially-acceptable illnesses. Like schizophrenia. Like borderline personality disorder. Like bipolar disorder. Like post-traumatic stress disorder. Like any eating disorder.

I am reminded of a person who used to come to worship at one of my former congregations. I will call him Kyle. Kyle enjoyed the whole worship experience. He loved my preaching. We often shared lunch together. Kyle was a in the age group that we claim we want to attract into the church. Kyle had a number of mental health issues, including Aspergers, that made it hard for him to engage socially with members of the congregation. It was actually hard for him to be in a crowd. So on Sunday mornings Kyle would often spend the entire service pacing back and forth at the back of the sanctuary. But he was paying attention. He was quiet. He was respectful. He just could not sit still. After the service you could ask him about the service and he had completely following everything. And yet I'm sure you will not be surprised when I tell you that some of my flock did not want to put up with Kyle. And they found their own discreet ways to make sure that he did not feel welcome at that church.

In general, we are more comfortable with physical illnesses - particularly ones that we can visibly see. But we are uncomfortable with people who have invisible mental

health issues. We might sympathize with a cancer patient. And then turn around and meet a person with depression and we think to ourselves, "why don't they just pull themselves together." We sympathize with people with physical conditions. But we critique people with mental health conditions. I see that behaviour all the time.

This point is made clear in an article in the Huffington Post titled, "Mental Illness Doesn't Define or Label Me, People and Society Do." Here are some quotes from that article. "Mental illness is not difficult to understand and often can be easy to control and even, overcome. In fact sometimes, it's easier to control mental illnesses than the judgement and opinion of people, who don't have the time or compassion to listen, understand and support. That's the real problem and the source of the stigma for people with mental illness."[1] "When we realize mental illness is not the major problem and that, the major problem is those people scared of mental illness due to their lack of understanding and not realizing their judgement or opinion affects those who do suffer from mental illness, then the stigma will start to come to an end."[2]

One point of confusion is that we often think that a person either has a mental health issue, or they do not. It's pass/fail. Yes/no. Right? Well, I do not think so. I mean, think about your own physical health. None of us are 100% healthy. And none of us are 0% healthy. We all create our own balance between being physically healthy and being physically unhealthy. It is not all or nothing. And it's the same thing with mental health. None of us are 100% mentally healthy. And none of us are 0% mentally healthy. We all create our own balance between being mentally healthy and being mentally unhealthy.

Of course with both our physical health and our mental health there are points where we realize that we need a bit of help. And in terms of our mental health. the pandemic has pushed many people across that line in their own lives.

I suspect that is why it took until 2021 before the United Church of Canada declared the first Sunday in May as "Mental Health Sunday". It took the pandemic to force us to realize that we all know someone who struggles with mental health. The driving force was not really the pandemic. It was the isolation and the fear that grew out

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[1] https://www.huffingtonpost.co.uk/kenny-johnston/mental-illness_b_8280840.html

[2] Ibid.

of the pandemic. I doubt that any of us do not know someone - someone we care about - that suffers from mental health at least occasionally.

So now - finally - as advertised - let us talk about our gospel reading. On the surface, it has nothing to do with mental health. The story is obviously about Jesus healing a leper. But before you decide that I suffer from short term memory, consider this. In the Bible, the meaning of the word leprosy is actually unclear. 2000 years ago people's understanding of medicine was very different than today. And so scholars today hotly debate what the word "leprosy" referred to. But one thing is for certain. Leprosy was a condition that meant that you were ejected from your own community. Leprosy meant that you were not welcome in your own community. Remember, in those days, in that culture, menstruating women had to isolate from their own communities too. We should not be surprised that lepers were banished.

And what was the cure for leprosy? The cure was to have the priest declare that you were clean again. And of course to made the appropriate offering to the temple. The cure was not medical. The cure was social. The cure was to be told by the priest, "ok, you can come back now". You are acceptable to us again. We welcome you back to the fold. Perhaps with some suspicion. But you are welcome to return. Presumably the physical condition that caused you to be banished had to clear up too. But the essential cure was social.

And that is perhaps the process we need to use in our own churches regarding mental health. Because of our biases and stigmas, people who suffer with mental health have often felt shunned by the church. Sometimes - like with Kyle's story - we basically push people who struggle with mental health out of the church. At other times, perhaps we just don't make enough space for everyone to find their home with us. And of course some people who struggle with mental health actually believe that God is punishing them and so they just do not want to be in any church.

But I'm pretty sure that here at Chapel in the Park United Church, we do our best to welcome people. All people. And that means that we welcome people who suffer from mental health, right?

As I said earlier, I'm pretty sure that everyone here is touched by a mental health

issue. Perhaps us personally. Perhaps family and friends that we care about. We are all in this together. It is much better for us to acknowledge reality together. And that includes making space to talk about mental health. And also, making space for people who suffer with mental health who do not want to talk about it all the time. Churches must be places where people can come and simply be themselves.

Society has a long long history of expelling people from their own communities. We are very good at othering people. We often other people who make us uncomfortable. Instead of coming to terms with our own hang ups, it seems easier just to get rid of the trouble-maker, right?

Consider this. You know me as a minister. You know that I am also a husband, a father, a cyclist. And I have a few secrets you do not know about. But if tomorrow I was to go to a doctor - no fear of that - and if I was told that I had cancer - some people would say that I became a cancer patient. But hang on a minute. Are you telling me that getting a diagnosis changes my identity? Does getting a diagnosis of cancer mean that I am no longer a minister, a husband, and all that other stuff?

Sometimes a person with a condition that makes US uncomfortable in our minds becomes that condition. A person with diabetes becomes a diabetic. A person with depression becomes a depressive. A person who struggles with alcohol becomes an alcoholic. In short, a person with a condition stops being a person - they become the condition. (In our minds at least) And when we think like that, we essentially kick that person out of our community.

But people with a condition are still people. They are still our family, our friends, our neighbours. They are still us.

And so in the coming week, I encourage all of us to consider our own relationship with mental health. Are we brave enough to name the barriers that we ourselves have put in place to separate us from people who suffer from mental health? Just how welcoming are we to people who suffer from mental health?

I hope that we will begin to answer that question over coffee time after service, and during the coming week.

Amen.