

Session Six – Helping

Read Chapters 9-10 – pp. 118-151

Chapter Nine: Applying Luther’s Advice

Therefore, my beloved brothers, be steadfast, immovable, always abounding in the work of the Lord, knowing that in the Lord your labor is not in vain.

- 1 Corinthians 15:58

Strategies for helping someone in emotional distress change his or her thinking or behavior were reviewed in chapters 7 and 8. These strategies can be implemented within the context of “helpful conversations.” (118)

How Helpful Conversations Start

A person distressed by a mental health problem will most likely come directly to you, seeking assistance and consolation. The only preparation necessary for these conversations is not being surprised that the person coming to you is experiencing mental health problems...

There will be times when you will be obliged to approach someone about a mental health concern. (119)

Goals of a Helpful Conversation

A helpful conversation does not solve someone’s problems. That would be a wonderful thing to do, obviously, but it is very unlikely to be possible... A helpful conversation is helpful when it addresses with compassion and kindness what the person is experiencing. Some things are fairly safe to assume the person is experiencing. First, the person is distraught... Second, the person is confused... Third, the person is anxious about talking to you. (119-120)

The goals of a helpful conversation follow from this. When you listen with kindness and express understanding of her distress, you can alleviate her confusion and her shame... By expressing understanding, you signal that her distress is okay. By expressing understanding, you communicate that she is understandable, not confusing...

This sounds like a large task, but it is not. The task is mostly, if not completely, accomplished by the simple kindness of meeting, listening, and offering comfort and consolation. (120)

Emulate Luther’s Manner

Emulating Luther is not always a great idea, but his manner of dealing with persons in emotional distress is worth copying.

Kindness... Steadfastness... Hesitant Boldness (120-122)

Practical Considerations

A helpful conversation should happen in private...

A helpful conversation needs sufficient time...

Pay careful attention to physical space...

Finally, consider the issue of confidentiality. (123)

Nonverbal Communication

If we become aware of nonverbal communication, we can be intentional about what we communicate to others and use it to our advantage in a helpful conversation... (124)

Active Listening

Active listening entails verbal behaviors by the listener that encourage the other person to continue talking, expand on topics, and explore deeper...

Reflective listening/Verbal mirroring

Closed questions

Open-ended questions with gentle commands

Paraphrasing

Summarizing (125-126)

Empathy

Empathy means understanding and accepting how a person thinks and feels with no judgment or evaluation of his or her thoughts and feelings. It is not feeling what the speaker is feeling; that is sympathy. It is not agreeing with what the speaker is thinking, which might be impossible and unwise... Empathy encourages people to realize their emotions or thoughts, while unpleasant, distressing, and confusing are understandable. (127)

Behaviors That Derail a Helpful Conversation

Interrupting

“Why” Questions

Quick Reassurance

Quick Advice

Insistence on Disclosure (128-129)

Address Stigma Immediately and Directly

Helping Families

Family members of persons with mental illness also face burdens related to stigma and related to the struggle with the illness.

Burdens... Emotions and Thoughts... Courtesy Stigma... Self-Care Behaviors (131-134)

Churchwide Strategies

Persons and families said they wished their church talked more openly about mental illness, but most said that their church did not. This experience made them feel ignored, invisible, and unseen. In other words, they experienced stigma at their church. (134)

Chapter Ten: Helping vs. Referring

Beloved, I pray that all may go well with you and that you may be in good health, as it goes well with your soul.

- 3 John 2

Determining the Severity of Mental Health Problems: Who Needs Referral?

Mental health lies on a continuum, and serious problems require referral. (139)

Indicators of severity:

1. Sudden and substantial changes
2. Emotional distress related to a recent and severe trauma
3. The intensity of distress
4. The duration of the problem
5. The impact of the problem on roles and relationships (140)

Suicidal Ideation and Intent

Most persons think about their own deaths at times... Thinking about suicide is much more serious, especially if it is the result of emotional distress... Anyone expressing suicide intent should be taken for immediate care. (141)

Domestic abuse must be referred

Domestic abuse is intentional acts of violence, threats, and control done by one person to another to intimidate and control the other person. Situations of domestic abuse are fraught with danger and risk, and the overarching concern is safety. (146-147)

Practice Discernment When Seeking a Mental Health Provider

Seek only licensed mental health professionals...

Seek someone with relevant competence...

Seek someone who explicitly recognizes the importance of religious beliefs.

If someone insists on seeing a Christian counselor, be sure that she is willing to state that she asks about her client's faith, is respectful of that faith, and will refer back to her client's pastor in issues of faith. (148-151)