



The General Conference
Sabbath School &
Personal Ministries



TO

SPECIAL NEEDS MINISTRIES

EMOTIONAL AND
PSYCHIATRIC DISABILITY



SEVENTH-DAY
ADVENTIST[®] CHURCH

Special Needs Ministries: Emotional and Psychiatric Disability
is created by the General Conference Sabbath School & Personal
Ministries Department.

Author: Fran Chaffee Grossenbacher
Editor: Gary B. Swanson
Design: AdventSource

Available from:

AdventSource
5120 Prescott Avenue
Lincoln, NE 68506
402.486.8800
www.adventsource.org

Copyright © 2015 by the General Conference of Seventh-day Adventists

All rights reserved. These materials may be copied for local church use. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise for sale or distribution in any way outside of the local church leadership without the prior written permission of the copyright holder.

Printed in the United States of America.

ISBN: 978-1-57756-162-0

SPECIAL NEEDS MINISTRIES

Creating Inclusive Opportunities in Ministry

Ministry is a privilege given by God for the modern-day Christian based on biblical principles, the life of Christ, and the love God shows to, for, and with all people. Ministering to, for, and with people with special needs is the extension of the love that Christ demonstrated while on earth. It allows Christians to replicate the Heavenly Father's supreme sacrifice of service by giving His only begotten Son to an undeserving world.

This publication provides information that will assist congregations in developing Special Needs Ministries, specifically a ministry that focuses on children and adults who have emotional and psychiatric disabilities. Specific suggestions and strategies will be given so that the church can make the gospel accessible to all people, including those with an emotional or psychiatric impairment.

Certain conditions may hamper efforts to embrace all men, women, and children into inclusive worship. People with special needs may not wish to self-identify as having a special need, or their family members may share the same reluctance to openly identify a special need. This resistance may be the result of personal issues, preference, and/or the cultural stigma related to disabilities. In addition, parishoners may not feel adequately prepared to participate in inclusion ministries, or may not be comfortable with children and adults with unique needs. Concern over the adequacy of church resources to meet identified needs may also be an issue. However, if the church can work around and eventually overcome these potential obstacles, it can create powerful ministries that address the needs of the one billion people in the world with a disability.

The Mission

The mission of the Seventh-day Adventist Church is to proclaim to all people the everlasting gospel in the context of the Three Angels' Messages of Revelation 14:6-12.

Special Needs Ministries, which coordinates its outreach under the Sabbath School and Personal Ministries Department, exists to teach and proclaim the gospel of Jesus Christ to people with special needs. As the Sabbath School and Personal Ministries Department communicates the good news of Jesus Christ to men, women, and youth throughout the world, the Special Needs Ministries focuses on those with disabilities. Training and promotion materials are provided through *AdventSource* and the Adventist Book Center to support the mission of including people with special needs in all areas of church life.

A major goal of the ministry is to encourage church leaders worldwide to intentionally meet the needs of individuals with special needs and include them in all aspects of church life. Leaders are advised to develop programs for witnessing to people with special needs and to make facilities—and the gospel—accessible to all.

The mission of Special Needs Ministries is to encourage the inclusion of all members in the church. Unfortunately, this goal has not been fully met for many individuals with disabilities. To educate the church about the ways that people with special needs can contribute to the mission of the church, a worldwide Special Needs Ministries Awareness Sabbath can be a useful event. This program can take place at camp meetings, leadership training events, or any gathering in which these four goals can be emphasized: accessibility, education, encouragement, and accommodation.

In planning events and activities for the Special Needs Awareness Sabbath, set a goal for the day. One day is not enough to cover all the issues related to special needs, but positive contributions of individuals with special needs can be highlighted for the church or community.

As much as possible, be sure to invite individuals with special needs to plan and participate in the Special Needs Ministries Awareness Sabbath activities. If individuals with disabilities are to become fully included in the church, the congregation must see those with disabilities involved in all areas of church life. Special Needs Ministries Awareness Sabbath gives the opportunity for people with disabilities to use their gifts for God and at the same time increase the congregation's awareness of individuals with special needs, their talents, and their needs.

Romans 12:3 states, "For I say, through the grace given to me, to everyone who is among you, not to think of himself more highly than he ought to think, but to think soberly, as God has dealt to each one a measure of faith." As Ellen G. White explained, "The only way to grow in grace is to be disinterestedly doing the very work which Christ has enjoined upon us—to engage, to the extent of our ability, in helping and blessing those who need the help we can give them."¹ This statement should guide both those serving in Special Needs Ministries and those being served. The Special Needs Ministries team encourages adults and children with disabilities to participate fully in the church and to grow in Christ; and, in turn, people with disabilities are able to help and be a blessing to others.

The mission of Special Needs Ministries is to bring all members into the work of Christ. To promote full inclusion of members with disabilities, it is important to focus on each person's abilities, talents, and relationship with God. What can the church family do to encourage and support a member with a disability?

For an adult or child with a disability to be truly included in the church family, she or he needs access to the gospel message through the Bible, sermons, the worship service, Sabbath School programs and materials, Bible study guides, music, Pathfinders, education, and fellowship. Community-based activities such as Vacation Bible School, evangelistic meetings, and vegetarian cooking schools are a few other ways to provide meaningful support to those with special needs. Individuals with disabilities may not be aware of alternative resources that are available; therefore, a goal of Special Needs Ministries is to help people with disabilities access those resources and the support they require to feel fully included in the church.

The Ministry

Special Needs Ministries promotes the importance of specialized ministries to foster the spiritual wellbeing of persons with special needs.

The ministry:

- educates leaders, directing them to appropriate resources for ministering to persons who have a special need;
- fosters the inclusion of qualified persons with special needs in church committees, forums, volunteer service opportunities, and other ministries.
- ensures the development of resources for reaching and accommodating individuals with special needs; and
- encourages the training and employment of individuals with special needs throughout the church.

Therefore, Special Needs Ministries blends the services of those with a disability with those who do not have a disability. They unite in a bond of ministry, each returning to God the talents and gifts He has bestowed.

As a community of believers who share the gospel with all, Christ is our example. Of Jesus' 35 recorded miracles, 27 touched people with special needs. He healed the boy who was "unable to speak" (Mark 9:17, NRSV), a man who was paralyzed (Luke 5:18-26), and a deaf man (Mark 7:32-35). Jesus gives clear evidence that the worldwide church is to be involved in Special Needs Ministries.

In *Steps to Christ*, Ellen White wrote, "This was [Jesus'] work. He went about doing good and healing all. . . . There were whole villages where there was not a moan of sickness in any house, for He had passed through them and healed all their sick. His work gave evidence of His divine anointing."²

One particularly powerful statement comes from White's *Testimonies for the Church*: "I saw that it is in the providence of God that widows and orphans, the blind, the deaf, the lame, and persons afflicted in a variety of ways, have been placed in close Christian relationship to His church; it is to prove His people and develop their true character. Angels of God are watching to see how we treat these persons who need our sympathy, love, and disinterested benevolence. *This is God's test of our character.* If we have the true religion of the Bible we shall feel that a debt of love, kindness, and interest is due to Christ in behalf of His brethren; and we can do no less than to show our gratitude for His immeasurable love to us while we were sinners unworthy of His grace, by having a deep interest and unselfish love for those who are our brethren and who are less fortunate than ourselves."³

Describing His earthly mission, Jesus said, "The Spirit of the Lord . . . has anointed Me to preach the gospel to the poor; He has sent Me to heal the brokenhearted, to proclaim

liberty to the captives and recovery of sight to the blind, to set at liberty those who are oppressed” (Luke 4:18).

Often Jesus would ask the person He had healed not to tell anyone. Confidentiality is extremely important in this ministry; no information about a person with a special need should be shared with anyone else without written permission.

It is important that each congregation develop an awareness of the range of disability needs their ministry must address. As successful strategies for inclusion are identified, it may be helpful to share those strategies as members move into other roles or divisions in the church. However, it is important that any information about individuals and their needs be considered highly confidential, and that personal information should not be shared without specific permission from the individuals and/or their families.

Emotional and Psychiatric Disability

Significant emotional or psychiatric illness includes many conditions of the brain that can impact a person’s thinking, feeling, moods, behaviors, and ability to interact with other people. For individuals with psychiatric impairment or significant mental illness, the ability to cope with everyday life can be a significant challenge. It is not uncommon for the family and caregivers to be under great stress as they care for a loved one with a psychiatric illness. Further, stigmas about this type of special need can lead to feelings of alienation, embarrassment, and isolation.

“We need to remove the stigma that some people have attached to emotional and mental health issues and recognize the vulnerability we all have to these issues,”⁴ said Dr. Allan Handysides, former director of the Adventist Church’s Health Ministries Department.

Some types of psychiatric or mental impairments are described below.

Depression is more than feeling sad, and it is not caused by a person's lack of desire to be happy. This condition results from many variables, including genetics, brain chemistry, traumatic events, medication side-effects, or the presence of other medical diagnoses. Major depressive illnesses can affect much more than just mood, as behaviors, thought patterns, and physical wellness are often also impacted.

Bipolar disorder is an illness characterized by acute changes in mood. Individuals often suffer significant variations in mood, referred to as manic and depressive episodes at their most extreme. This disorder is treatable.

Schizophrenia is a serious mental illness in which a person cannot think or behave normally and often experiences delusions. Essentially, it is a breakdown in the relationship of thought, emotion, and behavior. This leads to faulty perception, inappropriate actions and feelings, withdrawal from reality and personal relationships into fantasy and delusion, and a sense of mental fragmentation.

Anxiety Disorders:

- *Obsessive-compulsive disorder*, in which obsessive fears or anxiety may lead to compulsions to perform rituals perceived to control the anxieties.
- *Panic disorders*, which can include sudden attacks of fear with physiological symptoms such as sweating, increased heart rate, faintness, and more. Sensations can be similar to heart attack symptoms.
- *Social anxiety disorder*, which can lead to excessive or unreasonable fears in everyday social situations, often interfering with ordinary activities.
- *Post traumatic stress disorder (PTSD)*, which can occur following the experience of an extreme emotional trauma involving the threat of injury or death.

Phobias are overwhelming, seemingly irrational fears that can cause a panic or anxiety attack.

Addiction is the continued repetition of a behavior despite adverse consequences. It is the state of being enslaved to a habit or practice or to something that is psychologically or physically habit-forming. Like other chronic illnesses, addiction often includes repeated cycles of relapse and remission. At times a person desperate to manage mental illness may turn to behaviors to mediate their illness, which may become sources of addiction.

This is a only partial list of the types of mental or psychiatric illnesses and disorders. Although multiple factors impact how these impairments manifest, they can each affect an individual's mood, thinking, or behavior in such a manner as to encroach on their ability to participate fully as part of the church community.

The degree of impact of a mental illness can vary from day to day, thus the person's needs for support or assistance can change over time, even daily. Because of the stigma associated with mental and psychiatric illness, many sufferers will not openly admit their needs, which inhibits access to medical and psychological therapies and resources that are available.

It is important to remember a few important issues relative to mental or psychiatric impairments:

- The World Health Organization (WHO) reports that one in four families has at least one family member with a mental illness.
- Mental and psychiatric illness impacts people of all ages, cultures, ethnicities, and genders.
- Current research indicates that a biological or biochemical factor is likely present in many cases of mental illness. Thus, perceptions that this type of impairment is self-selected are typically not accurate.

Furthermore, traumatic or extremely stressful life events can intensify an existing mood disorder.

- Individuals with mental illness are more likely to contact a member of their church clergy than they are to seek out medical care and attention.

The New Testament records Christ's healing of people with emotional disabilities. As we reach out and minister to this population, we are certainly following Christ's example. We will be wise not to yield to the stigma related to those with mental or psychiatric illness, and instead reflect on this guidance:

“To take people right where they are, whatever their position, whatever their condition, and help them in every way possible—this is gospel ministry.”⁵

“Our Saviour's words, ‘Come unto Me, . . . and I will give you rest’ (Matthew 11:28), are a prescription for the healing of physical, mental, and spiritual ills. . . . In Him they may find help.”⁶

Thus, whatever the reason for emotional or psychiatric illness, we can certainly help fulfill the gospel commission when we make our churches places of welcome, hope, and Christian love for those living with every type of disability.

Ultimately, identifying a label to categorize a person's emotional or psychiatric difficulty is much less important than reaching out to that person, sharing what the gospel message and a loving and nurturing church community can offer them.

Four Goals in Ministering to Populations With Psychiatric and Emotional Impairment or Illness

The first booklet in this series, *Special Needs Ministries: Creating Inclusive Opportunities in Ministry*, produced by the General Conference Sabbath School and Personal Ministries Department, identified four goals of Special Needs

Ministries. Now, in this booklet, specific strategies related to these goals will be explored, with worshipers who have emotional and psychiatric disabilities as the focus.

1. Accessibility. Special Needs Ministries assists church leaders in learning how to make all structures, buildings, and programs available to all. The point of this goal is to provide an environment in which everyone feels welcome and has access to all areas of church life, regardless of her or his physical or mental condition. Although in many cases the individual with this type of disability will have full physical access to church and church activities, there may be cases in which individuals impacted more severely by their illness may not be able to drive and may need transportation assistance to attend church services.

Additionally, many individuals with intensive mental or psychiatric illness are hospitalized, imprisoned, or institutionalized. Therefore, some of the church's ministry outreach for this population may occur in alternative settings. To provide physical access to our gospel message, the church family should consider taking the gospel message to these worshipers, as they may be unable to worship with the church body. Church members participating in prison ministry outreach, for example, will most likely find themselves ministering to individuals with psychiatric or emotional issues as part of that ministry.

Further, this type of disability can affect individuals in vastly different ways at different points in time, so people dealing with this disability may demonstrate inconsistent attendance at church, and thus may benefit from outreach activities by church members. The Special Needs Ministry team may develop a program to reach out to absent members in some way to let them know that they were missed. Care should be taken so that these individuals do not feel added pressure about their attendance, as that

pressure may intensify existing emotional issues. Rather, sharing that they are missed and cared about is very appropriate.

During church and Sabbath School services and other activities, a quiet room should be available for use by worshipers. At times, being amidst a crowd can become overwhelming for a person with psychiatric or mental health issues, leading to upsetting or disruptive behavior. Providing a quiet room to allow for a calming and quiet environment for a break is recommended.

When a member of the Special Needs Ministry team is willing to be a companion for worshipers with these issues, they can assist in finding the quiet room or aid in a break away from the service.

Next, attitudinal barriers that may prevent a person with a special need from feeling welcome must be eliminated. The stigma and stereotypes associated with mental illness are widespread. Even in biblical times, people commonly accepted the theory that this type of illness was caused by sin. Luke 8:28–34 presents the case of the demoniac healed by Christ, and this passage shows the social and cultural context of how individuals with psychiatric issues were viewed and treated. It is no wonder that many individuals with these issues may be hesitant to be forthright if they are diagnosed with a mental illness. Today, however, much more is known about mental and psychiatric illness, and an attitude of openness and encouragement, paired with a welcoming spirit, will reflect Christ's love for all His children. Education, training, and modeling appropriate attitudes toward those who are disabled will help increase sensitivity throughout the congregation. The warmth and caring that each church member bestows on one another will demonstrate a willingness to worship together inclusively.

It is important that greeters and ushers convey a sense of welcome and inclusion from the first moment of contact. Because of the stigma associated with psychiatric, mental, and emotional illness, these individuals may not be accustomed to warm inclusion in group settings such as church. Bear in mind that some members of your current congregation may suffer from issues such as depression or addiction issues. They may be very private about these issues, and may feel quite isolated because of their illness. As we model a spirit of openness based upon Christ's example, we have the opportunity to minister to these individuals from our own congregation and other, new believers.

We are in a unique position, as a church community, to meet the needs of individuals with psychiatric impairment. We can offer fellowship not only with our church community, but in small groups as well, which can be very inviting to people with psychiatric or mental illness. As a model in our community of Christ's message of love and hope, we can offer individuals with emotional challenges a sense of hope greater than any other—the hope of Jesus as their Lord, Savior, and Comforter.

2. Education. The goal is to train people without special needs and those with special needs to work collaboratively in building God's kingdom. Resources should be continually developed for and made available to church members. These resources will provide guidance for the inclusion of individuals with special needs throughout the church structure.

Considerable misinformation about psychiatric and mental disorders may be present among church members. It is critical that educational outreach address issues of fear and stigma surrounding worshipers with these illnesses. As accurate information is provided and stereotypes and stigmas are overcome, the congregation can also develop a greater level of understanding. Teaching the congregation

how to avoid judging others and how to be appropriate sources of support will assist the church on the journey to being fully inclusive.

3. Encouragement. The focus of this goal is to promote participation in all aspects of church life. Providing a safe, loving environment within all levels of the church for all people is the privilege of every Christian.

When all worshipers are welcomed, nurtured, and given opportunities to engage meaningfully in all activities of church life, the result is inclusive worship and fellowship that encourages participation. As you welcome everyone, including those with special needs, into your congregation, and involve them *meaningfully* and *intentionally* in all aspects of church life, they will be encouraged. It is important that the church focus on encouraging each person to be an active member of the church community as a whole, and not segregated from the larger church body into “special” classes and activities. As ministry leaders and members continue to find opportunities for meaningful participation, all members will be encouraged and will benefit from truly inclusive worship.

Dr. Peter Landless, director of Health Ministries for the Adventist Church, has spoken about prioritizing mental health and reducing the associated stigmas. According to *Adventist Review* writer Ansel Oliver, “Landless said church members and leaders can support the effort by recognizing depression, setting an example by living a balanced lifestyle, and urging people to refrain from consuming recreational substances, including alcohol, in order to maintain mental health and emotional well-being.”⁷

Finally, the church community can reach out to the families of people affected by psychiatric or mental illness. Because of widespread stigma and misinformation about these illnesses, family members often experience feelings of fear, hopelessness, guilt, and isolation. They

are often caregivers for their family member, which can be a challenging task. The hope of peace in Christ and the fellowship of a church community can be comforting and uplifting to family members.

4. Accommodation. The goal is to help God's family be inclusive in principle and practice. Special Needs Ministries promotes the inclusion of qualified persons with special needs in church committees, forums, volunteer service opportunities, and other ministries. These activities should be planned with accommodations in mind. Because some individuals with a significant emotional or psychiatric challenge may be unable to drive themselves to church activities, transportation assistance is one way to provide much-needed support.

As the church makes small, intentional changes in how activities of church life are conducted, with a plan to include and involve every person in meaningful participation, the church will accommodate the needs of every worshiper.

Attaining the four goals of Special Needs Ministries provides the church with a wonderful opportunity for evangelism, discipleship, and inclusion.

As the church makes and puts into action a plan to include every person in meaningful participation, the needs of every worshiper will be considered and accommodated.

Attaining these four goals gives the church a wonderful opportunity for evangelism, discipleship, and inclusion. Special Needs Ministries should educate the church about emotional and psychiatric disabilities, develop resources for people with these disabilities, enhance their worship experiences, and emphasize their intentional and meaningful inclusion into the larger church body. Finally, although employment is not included as one of the primary goals of this ministry, leaders in this ministry can develop

and maintain a database that includes job skills of members with special needs. Assisting with the tangible need of employment is an invaluable service.

People With Psychiatric and Emotional Needs

Some individuals with a psychiatric disorder may have additional areas of need. For example, a person recovering from a stroke may have not only mobility challenges, but hand-dexterity issues, speech challenges, and depression. Because of the potential for an overlap of issues, it is important for Special Needs Ministries groups to consider and address multiple areas of need. Additional guidance on the following topics is provided in other leaflets in this series:

- deafness/hearing impairment
- hidden disability
- mobility and physical disability
- intellectual disability
- communication disorder
- blindness/visual impairment

As in many areas of church life, sensitivity to the culture(s) of others is critical. Offensive language, even when used unintentionally, can significantly hinder the goals of this ministry. When training individuals to work in Special Needs Ministries, be sure to avoid words that are not appropriate. Although some of these words may be found in the Bible and other spiritual writings, their usage has evolved and they now carry negative connotations. The following table shows examples of words to use and words to avoid.

| Use this . . . | Instead of this . . . |
|--|--|
| Person with a disability or person with a special need | Handicapped |
| Has a disability or special need | Afflicted, unfortunate, less fortunate |
| Has an emotional or psychiatric illness or disability | Crazy |
| In the hospital or at home | Sick and shut in |

How to Prepare for Training Others

In the introductory leaflet of this series, *Special Needs Ministries: Creating Inclusive Opportunities in Ministry*⁸, you will find information on training church members to provide a ministry inclusive of all people, including those who have emotional or psychiatric disabilities. The essential training elements of prayer, action, study, and planning are described. Scriptural references are also provided to guide ministry leadership groups in sound, Bible-based planning and interventions.

Resources of special interest to those reaching out to people with emotional or psychiatric needs include:

- Adventist Recovery Ministries
(www.adventistrecovery.org)
- Sharon Platt-Mcdonald, *Mental Wellness Handbook: Supporting Churches in Raising Mental Health and Encouraging Emotional Healing and Wellbeing*, <http://adventist.org.uk/__data/assets/pdf_file/0018/10728/Complete_Mental_Wellness_Handbook.pdf>.

Conclusion

Living with a disability impacting the capacity to fully function emotionally can be very challenging. Multiple factors, including individual temperament, the degree of cultural acceptance of the impairment, and the degree of family and church support, impact an individual's interest in and involvement with the church. Further, these factors can impact how an individual can gain access to an understanding of the gospel. Social stigmas associated with mental or psychiatric illness are powerful and can prevent individuals from fully participating in a church community. The church should be one place where a person with a mental or psychiatric illness knows they will be welcome and intentionally included in all activities. We must reach out to this population and share with them the gospel message and the love and peace only Jesus can offer.

References

Bova, Joan, and Michael Harrell. "Including All, Excluding None." *Southern Tidings*, July 2009.

Burks, Catherine. "Initiating Efforts at Your Church." *Columbia Union Visitor*, Apr. 2009.

Commission for People With Disabilities. *Disabilities Ministries Handbook*. Lincoln, Neb.: AdventSource, 2002.

General Conference of Seventh-day Adventists. "Personal Ministries: Ministry to People With Disabilities." *Seventh-day Adventist Church Manual*. Hagerstown, Md.: Review and Herald, 2010.

Johnson, George. "Disabilities Ministries." *North American Division Resource Guide*, p. 48. 2011.

Oliver, Ansel. "Adventist Health Leader Praises WHO for Tackling Suicide." *Adventist Review*. 21 Sept. 2014. Web. <<http://www.adventistreview.org/church-news/adventist-health-leader-praises-who-for-tackling-suicides>>.

National Alliance on Mental Illness. "Ministry, Mental Illness and Communities of Faith." <www.nami.org>.

Platt-McDonald, Sharon, ed. *Mental Wellness Handbook: Supporting Churches in Raising Mental Health and Encouraging Emotional Healing and Wellbeing*. <http://adventist.org.uk/__data/assets/pdf_file/0018/10728/Complete_Mental_Wellness_Handbook.pdf>. 2009.

Thoms, Charlotte L. V, ed. *A Quick Start Guide: Disabilities Ministries*. Lincoln, Neb.: AdventSource, 2010.

Endnotes

¹ *Steps to Christ*, p. 80.

² *Ibid.*, p. 11.

³ *Testimonies for the Church*, vol. 3, p. 511, emphasis supplied.

⁴ [Http://news.adventist.org/all-news/news/go/2011-10-25/adventist-health-leaders-aim-to-destigmatize-treat-mental-health](http://news.adventist.org/all-news/news/go/2011-10-25/adventist-health-leaders-aim-to-destigmatize-treat-mental-health), accessed October 27, 2014.

⁵ *Medical Ministry*, p. 238.

⁶ *The Ministry of Healing*, p. 115.

⁷ <http://www.adventistreview.org/church-news/adventist-health-leader-praises-who-for-tackling-suicides>, accessed Oct. 20, 2014.

⁸ www.sabbathschoolpersonalministries.org/specialneedsleaflet

