

SERMON SERIES

“Mental Illness: The Journey In, The Journey Out”

August 7 – September 4, 2016

From the Pulpit

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A communion meditation delivered by The Rev. Dr. Timothy C. Ahrens, Sr. Minister, The First Congregational Church, United Church of Christ, Columbus, Ohio, August 7, 2016, 19th Sunday in Ordinary Time, Proper 15, dedicated to John and Sammy and to all the children and teens, all the women and men who battle mental illness-brain diseases, and to their families who cope or don't cope; wade into the battle, freeze or run away, none knowing exactly what to do but all knowing that love matters and always dedicated to the glory of God!

“When Mental Illness Hits: Out of the Depths I Cry to You!”

Psalm 130

(First of Five in the Series,

“Mental Illness: The Journey In, The Journey Out”)

Isaiah 1:1, 10-20; Hebrews 11:1-3, 8-16; Luke 12:32-40



Tim Ahrens and Sammy Bloom, 1981

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Let us pray: May the words of my mouth and the meditations of each one of our hearts be acceptable in your sight, O Lord, our rock and our salvation. Amen.

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On Monday night December 13, 1982, most of the students, staff and faculty of Yale Divinity School were gathered in the Commons Room for our annual Christmas Party. There we gathered around our beloved 90-year-old Dr. Roland Bainton as he presented from memory one of Martin Luther's Christmas sermons. The famed author of "Here I Stand" and Yoda-like sage for the ages was giving, was to be, his last Luther Christmas sermon. It was as though we listening to the actual Wittenberg Reformer as Dr. Bainton mesmerized us all with his accent and charm weaving a masterful tale of the birth of our Savior on a cold Palestinian night under stars that danced around the star of Bethlehem.

Half way through the sermon, one of my friends not in attendance (because he suffered from severe anxiety in crowds – and yet had the courage to study for ministry) came into the packed room, found me and told me I had an emergency phone call from my mom. I immediately headed back to our dorm and took the call. "Tim, I have some really tragic news to report. Sammy Bloom has taken his life." "What?!" I replied. "He drove his car off a cliff into the Pacific Ocean one mile from their home in Palos Verdes Estates."

Sammy Bloom was my best friend from early childhood. Now he was gone. I knew he had been suffering from paranoid schizophrenia and confusion. A few years before he had hooked up with "The Jesus People," a frightening religious Cult that had taken him out into an Arizona desert. He had escaped to find his way home, but, he was the never the same. He had lost his laugh, his ease with people and his joyful disposition. Now he was gone.

Sammy Bloom was only 23 years old when he took his life. As kids we loved to play together. We were inseparable and those around us – insufferable. Whether at church, at our corner lot in town or on his farm, we would play for hours on end. He was bright, ambitious, caring, funny and active in his church. He was thoughtful and faithful follower of Jesus.

He was dreaming of a life as a businessman and a golfer. He would have been successful no matter what direction his life went. Now, he was gone.

Mental illness hit Sammy with a vengeance and even though he had a loving family, great treatment at UCLA, and was seemingly on the way out of mental illness, he took his life. He was completely side-swiped by the ravages of mental illness on his road of life and ended up driving off a cliff.

That was my first encounter with losing a close friend. It was my first full throttle meeting with mental illness. Through the years, the names have changed, the stories have changed, the diagnoses have changed. But, mental illness has appeared again and again in my personal life and my life as a pastor. Too often the stories have been your children, your spouses, your siblings, your parents, your family members and yes sometimes it has been you - trapped, side-swiped, knocked off the road of life by mental illness. In recent weeks, emails have told me more, calls have come, conversations over coffee, meals and in the greeting lines have pointed to the stories of your lives deeply impacted by mental illness.

It is because of Sammy, and all of us and our families and friends that I have felt called to open this conversation. For too long, too many have lived too hard of lives with the stigma, the shame, the consequences of suffering from a brain disease. And the church has been one place where the wrath of this has come home hardest for some. To be silent any longer is to be unfaithful.

One of the moments when I shifted from silence to speech came following a prayer group with friends in which 15 of 17 people shared stories one Saturday morning of parents, spouses, children and siblings who had suffered from mental illness. Some shared their own personal struggles, too. Although we had been there for each other for five years, we had NEVER dug this deep into the pain of our lives and the effects of mental illness on our spiritual journey. I was looking around the room at some of the most companionate people I know realizing that mental illness had

deepened them in ways he never sought. Suffering with others who suffer will do that to you.

Then I heard Sammy Bloom calling to me and asking me to be faithful to my calling to preach. Silent no more I stand in front of you and I walk beside you with a broken heart and hope still being born. We are not alone. We have God with us. We have Jesus beside us. We have the Holy Spirit touching us with faith, hope and love. We have each other.

Here we go on a stigma-busting, silence-breaking journey that begins **NOW....**

Let me begin by saying – if you or someone you love has been hurt by the church because of the ways I have spoken, or we have spoken or acted which have caused you pain – in this community or others – I am truly sorry and I ask your forgiveness. For colleagues of mine across any religious community who have caused you pain or injury through mistreatment in words or action, I am sorry as well. It breaks my heart when I hear the Bible and our faith used as a battering ram against anyone. I am so sorry when that has happened to you.

“Mental Illness can be overwhelming. Mental illnesses themselves can overwhelm the one in five persons struggling with an illness. But, the issues surrounding the illnesses can also overwhelm the families dealing with the effects of illness. There are issues of treatment, medications, resources, places and people to work with the ones struggling with illnesses. There are issues which also affect the family and support networks. Then there are issues of spirituality and faith – which every person and family member I have known in the battle against mental illness talks with me about. Then there is the whole understanding of what constitutes a mental illness, even the issue of language itself and how we might talk about it. Should we speak about Mental Health, Mental Illness, Brain Illness, Brain Disorder, or just talk about different ways our brains function?” (I have

drawn from Rev. Dr. Marti McMane, in her Sermon on Mental Illness, 2009).

Then, we are drawn closer as we seek to define brain illnesses. To do this effectively, I have sought out those who know so much more than I. I have turned to NAMI, the National Alliance on Mental Illness. NAMI is the largest grassroots mental health organization dedicated to improving the lives of individuals and families affected by mental illness.

NAMI teaches us that *“Mental illnesses are medical conditions that disrupt a person’s thinking, feeling, mood, ability to relate to others, and daily functioning. Just as diabetes is a disorder of the pancreas, mental illnesses are medical conditions that often result in a diminished capacity for coping with the ordinary demands of life.”* (<http://www.nami.org>).

According to NAMI, serious mental illnesses include, but are not limited to, major depression, psychotic illnesses such as psychosis, schizophrenia, bipolar disorder. There is obsessive compulsive disorder (OCD), panic disorder, post-traumatic stress disorder (PTSD), mood disorders, borderline personality disorder and various anxiety disorders. Coupled with these illnesses, it is not uncommon to find someone who is also struggling with dual diagnosis which matches one or more of the above mentioned illnesses with drug and/or alcohol abuse and addiction. (<http://www.nami.org>).

Do you see what I mean about being overwhelming?

The good news about mental illness is that recovery is possible; help is available. There are those around us that wake up each day and care for those of us with Brain Illnesses and diagnosed or undiagnosed suffering. **TO all in this room who give themselves to others who suffer, “thank you”** from the bottom of my heart. I would have you stand, except this is your Sabbath and I hope you are resting just a little today from your journey of compassion and hope. Thank you!

One of the best programs to help families dealing with loved ones with a mental illness is NAMI's Family-to-Family program, a twelve session program with trained facilitators who offer tremendous amounts of information and support. One begins on August 24th and there is still room for you to learn and grow through the Family-to-Family program. You can find all the contact you need for the class in our "Depart to Serve" insert today.

At the center of our calling as a church is to follow Jesus. We are called to seek the way of Jesus – who healed and mended the broken of body, mind, and soul. He was the greatest stigma-busting spiritual leader of history. If we call ourselves his followers, then we have to do the same as he did. "Love one another," he commanded. When he told us to "love our neighbor as ourselves," he was saying – "love yourself, take care of yourself so you can love your neighbor." There were no "Clauses" in Jesus' speech. He never said, "love only some, love the loveable, love only yourself or love the ones who are sane and not the ones suffering from brain illnesses." Jesus knew what we struggle to name. There is something in all of us that is unlovable, perhaps a little quirky, a little off-line in body, mind or soul. In spite of these qualities – all which make us immensely human – Jesus loved us and COMMANDED US to love one another. Seems so simple.

Statistically speaking, we know that one in five people has some form of mental illness. That means, if you greeted five people today, you or one of them has or will struggle with mental illness. Guess what? That is where our blessing begins. We have exchanged "the peace of Christ" with someone that struggles with a lack of peace of mind. Isn't God good!? Since we don't talk much (or at all) about this stuff, we assume that the houses we live in, the neighborhoods we live in, the places we work, the places we worship and on and on are packed with people who have no problems. Right? Wrong! One of my mentors, Dr. William Sloane Coffin (in playing off Thomas Harris' 1969 best-selling book, "I'm Okay, You're Okay,") – ***"I'm not okay and you're not okay, but that's okay!"*** Amen!

Having said all of this, we are still scared and certainly reluctant to talk about our own struggles with mental health issues or those of our loved ones, primarily because our culture still stigmatizes those who live with mental illness. This makes it difficult to reach out and give support that **might be beneficial in the healing process. It's not the kind of illness that** the neighbors respond to with a casserole, so often people are isolated and alone. I know this is hard. But, I also know we have the power of God, the power of love, and the power of community to work together to make it easier.

As we come to a close, we are only beginning today. Digging deeper will define the weeks ahead. Through it all, I pray that light will break forth and healing will come a little bit for you and others in your lives. Through it all, my hope and prayer is that we, as a church, will become a safer place where we can talk about mental illness and mental health the same way we **talk about other health challenges. But, I want to leave you with this....**

“Mental illnesses, or brain disorders, a terminology some prefer, can affect persons of any age, race, religion, or income. Mental illnesses are not the result of personal weakness, lack of character, or poor upbringing. They are not the result of too little faith or lack of prayer. Most mental illnesses are biologically based, and most are treatable. Most people diagnosed with a serious mental illness can experience relief from their symptoms by actively participating in an individual treatment plan, and they can live productive lives sharing their unique gifts with the world” (quoted from Rev. Dr. Marti McMane, sermon on Mental Illness, 2009).

Many of you know that the Apostle Paul had some kind of chronic illness that he refers to in his letters in Scripture. Some people have **surmised it was epilepsy, which is a brain disorder, but we don't know** because he never really talks about the symptoms, just that it is recurring and something he has had to learn to live with. Some have speculated it was **recurring depression. We don't know. But in his letter to the early church**

in Galatia, he writes something which is a model for us in faith communities when he says: *“Even though my illness was a trial to you, you did not treat me with contempt or scorn. Instead, you welcomed me as if I were an angel of God, as if I were Christ Jesus himself”* -Galatians 4:14 (*Ibid*).

There are such angels of God everywhere around us in our lives. May we welcome them. For too long they have been treated with contempt or scorn. It is time to welcome them home. Next week, I continue with the sermon series, *“Depression: From the Pit of Despair We Can Rise to New Life.”* Please return and bring a friend – one of the angels of your life. Amen.

A Baptismal Meditation delivered by The Rev. Dr. Timothy C. Ahrens, Sr. Minister, The First Congregational Church, United Church of Christ, Columbus, Ohio, 20th Sunday of Ordinary Time, Proper 15, August 14, 2016, dedicated to all our members, family, co-workers and friends who struggle with depression, to Paloma Lolia Nadine Braide-Schoenlaub on her baptismal day and always to the glory of God!

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“Depression: From the Pit of Despair

We Can Rise in New Life”

Isaiah 5:1-7; Hebrews 11:29-12:2; Luke 12:49-56

Sermon Text: Psalm 40:1-3

Second of Five in the Series

“Mental Illness: The Journey In, The Journey Out”

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Psalm 40:1-3

*I waited patiently for the LORD;
he inclined to me and heard my cry.
² He drew me up from the desolate pit,
out of the miry bog,
and set my feet upon a rock,
making my steps secure.
³ He put a new song in my mouth,
a song of praise to our God.
Many will see and fear,
and put their trust in the LORD.*

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Let us pray: May the words of my mouth and the meditations of each one of our hearts be acceptable in your sight, O Lord, our rock and our salvation. Amen.

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On a visit with a dear friend many years ago, I entered his home, and stepped into a well-lit room where one of my beloved friends was sitting over a cup of tea. It was a beautiful sunny day and the natural light from southeast was filling the room with brilliance and warmth. I had sat at this table in the kitchen many times before sharing memories, reflections on politics, everyday life, theology and stories of faith and family.

But today was different. My friend was still, barely able to acknowledge that I had come to see him. As I reached to greet him, he extended no hand and shared none of the warmth that we usually exchanged. No smile. No eye contact. Something was wrong. He was really struggling to be present. I asked how he was feeling. After a long pause, he

said, *“I am depressed. I am seriously depressed.”* Then he was silent. We sat in silence for a long time. No words expressed. No memories. No stories of faith and family.

Then I asked, *“what does your depression look like? What does it feel like?”* He looked right in my eyes, only 18 inches from his and he answered, *“It feels like I am in a deep, dark pit. The walls are dark and steep. I see no light. I cannot climb out. The pit surrounds me and swallows me.”* Here we were, in a room filled with light and he was being swallowed in a pit of utter darkness. I held his hand and after a while, with tears flowed down my face I said, *“I am so sorry.”* Looking at his wife, I said, *“Together we will help you find a way out.”* Our eyes locked and our hands held on. The long ascent from the pit had begun.

It was “Love, Medicine and Miracles” to quote Dr. Bernie Siegel that pulled my friend out of the pit of despair. Through the power of a loving wife and family, of loving friends who believed in him, his own prayer and spirituality, and a great combination of the right medicine and a great therapist he was able to find a way out of his pit. And that, was the miracle! That was God in all of this. Like David in Psalm 40, *“God drew him from the desolate pit and set his feet upon a rock and secured his steps. God put a new song in his mouth, a song of praise.”*

My friend was a man living with depression. That was so important. Rather than accept his words that he WAS depressed, I wish I said what was in my heart that day... but it would have been too much. I was thinking, **“You are a loving, capable, beautiful, gentle, spiritual man living with depression.”** In dealing with mental illnesses or brain diseases, it is always important that we speak of the person before us (whether in the mirror or in the chair before us) as a person who may have a mental

challenge. He or she is not “crazy,” although their behavior may be erratic. Just as I don’t say about a person with MS or cancer that they ARE “MS” or call them “that cancer person,” so I should not label someone as schizophrenic or depressed. Always a person first. Always!

Prayer was central to lifting my friend “out of the miry bog and God who set his feet on a sure rock.” I love what author Anne Lamont says of prayer. She says there are three elements of prayer:

HELP...THANKS...WOW. HELP is the cry we deliver often into the darkness of our depression and despair. In the pit, we are finally able to put one word together. That word is HELP. We cry out when we don’t know what else to do. It is the point when we become open to the Divine. We are broken so much that we open up to the Holy One, the Sacred power of the Universe. THANKS is our prayer of gratitude. We whisper “thanks” when we have reached the rim of the pit and we are climbing out into the warmth of the sunshine. Covered in the mud of our struggle, we smile – maybe for the first time in a long time and say, THANKS. It is a prayer we should offer as soon as it is possible and as often as it is possible in our daily lives. THANKS God! THANKS Jesus. THANKS Spirit. Thanks friends, family, doctors and more. THANKS. Then there is WOW! WOW is the word of wonder I uttered the first time I opened my eyes and saw my firstborn son, Luke, and Dan, and Thalia, and Sarah. WOW is the prayer that bounces across the Grand Canyon 24/7. It is the prayer we feel when we finally come home, hear we are cancer free, find out that we will not die depressed, find water for the journey and discover that God is still speaking. HELP! THANKS! WOW! They are your prayers. Embrace them. Use them.

While the journey out of depression is often a slow and arduous process, the journey into depression may creep up on you like nightfall in a forest where the path is disappearing under your feet. The ten most common symptoms with depression are: fatigue, sleep problems, general irritability, an inability to concentrate, anxiety, taking drugs and alcohol, loss of intimacy and interest in others, suicidal thoughts, trouble making decisions, and general stress. Depression can hit anyone of us during certain seasons of the year, situations of our lives and in places we have not dealt with the pain and trauma of our existence.

In the midst of lifting, kissing, smiling, and singing with four gold medals and a silver this week, we have been hearing the back story about depression from Michael Phelps. The man who has won more gold medals (and medals in general) than any Olympic athlete in history in any sport hit bottom in November 2014. He was severely depressed. He was drinking, insulating himself, driving while drunk and seriously entertaining thoughts of suicide. He was in the pit. He found help from friends and **family and then through Rick Warren's book, The Purpose Driven Life**. He began the journey with help in a rehab center for 45 days during which time he became reconciled with his father (who left home when he was 9 years old), found out who he really was as a person, and eventually found his way into the arms of the woman who loved him and became his fiancée. He got his relationship with the Divine and his family and friends on the right path and then he started to swim again. Now he is living one day at time. **In the coming days, America's flag bearer at the 2016 Olympics will pull himself out of the water and walk away from swimming into a marriage that is right with a son who is adorable. That is truly Golden!**

Needless to say, Michael Phelps is not the first famous person to struggle with a Brain disease. On the Mental Health Ministries website **there's a whole section on famous people who have contributed enormously** to society who suffered the symptoms of mental illness, some before there was a name for what chronically caused them distress. People like Isaac Newton, Ludwig von Beethoven, Abraham Lincoln, Winston Churchill, Leo Tolstoy, Charles Dickens, Michelangelo, Vincent Van Gogh, Virginia Woolf, Jane Pauley, Bet Midler (to name a few) and as Rev. Corzine pointed out in the Pastoral Epistle this week, Harry Potter author J.K. Rowling wrote of her depression, *"...And so rock-bottom became the solid foundation on which I re-built my life."*

In the week before I was preparing to deliver the first sermon in this series, I met with my friend and neighbor Nannette Macijunes, Executive Director of the Columbus Museum of Art. She shared with me that they are breaking all their records for membership and attendance this year. I was so excited. And the Picasso Exhibition which I encourage everyone to see has put them over the top. Pablo Picasso suffered from depression. Out of depression he was able to create colors and designs in art that have drawn people for generations to see the world differently – as he saw it differently.

Thanks be to God for the courageous leaders, the artists, the writers, the singers, the swimmers and our family and friends who battle through depression. Like J.K Rowling and our Psalmist King David, so many of them begin to rebuild their lives on the solid foundation of rock bottom. From the pit they begin and they are lifted to the rock of deliverance.

The truth is that while 1 in 5 people face some sort of mental illness or brain disease in their lifetime, 1 in 14 live with major depression and 1 in 6 live with anxiety disorder. These are significant numbers in our

families, in our church and in our society. We cannot ignore the symptoms in ourselves or our loved ones and colleagues. Being sensitive to those who are missing among us, those who are mired in the bog of deep sadness and those who are isolating in the darkness of rooms in which they rarely ventured before is a calling each one of us can respond to. **If they can't pick up the phone to call, call them. If they can't find their way out of the forest on the edge of darkness, go in to the forest and sit with them through their nights of despair.**

Depression is a biological disease. It is not caused by a lack of will **power or desire to be well. You can't simply run out of depression,** smile your way out or wish your way out. You need help to get out the pit. Here is my hand. Take it. Take the hand of your friends and family. Seek help. Seek treatment. Seek God. But, I beg you to seek. With every ounce of power still left in you, look up, look out, step up, step out, reach up, reach out, come up, come out. Find a way out. God knows, there is sunshine sometime and somewhere ahead of you. Amen.

A sermon delivered by The Rev. Dr. Timothy C. Ahrens, Sr. Minister, The First Congregational Church, United Church of Christ, Columbus, Ohio, 21st Sunday in Ordinary Time, Proper 16, August 21, 2016, dedicated to the memory of Katie Marie Shoener and her loving family, to The Rev. Doctors Sarah Griffith Lund, Alan Johnson, Jeff Oak and Carol Pinkham Oak all who are brave and courageous in their daily witness for their families and the families of those who face difficult days with mental illness and always to the glory of God!

*“Family Struggles with Mental Illness:
Finding our Way Home”*

*Part 3 of 5 in the series, “Mental Illness: The Journey In,
The Journey Out”*

Jeremiah 1:4-10; Hebrews 12:18-29; Luke 15:11-32

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Let us pray: May the words of my mouth and the meditations of each one of our hearts be acceptable in your sight, O Lord, our rock and our salvation. Amen.

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The Story of the Prodigal Son. We know this story – right? At least we assume we know it. Just we assume we know the family living next door to us or our own family for that matter. But, stories we believe we know and love are often left unprodded, unchallenged and uninteresting. The Same could be true for our families, too. Let’s take another look . . .

On the surface, Jesus tells this story about a father and his two sons.

The older son knows how the world works. He is a classic oldest child – begins life with rookie parents who make rookie mistakes. As an oldest son, he has to push against the limits. He has to learn how to work and grow up much faster. He is dutiful, hardworking and loyal to his father. We think we know him.

The younger son knows how to work the world. He, like other younger children, inherits parents who are veterans (actually we hear nothing of the mother here). But, certainly, his father is a veteran parent. Like a veteran, dad is somewhat tired by the work of parenting. This old-timer has relaxed quite a bit. The youngest child is inheriting a dad who is going through the parenting process for the last time. This is the last child

calls him “daddy.” This is the last child who will learn to walk, talk, read and of course, push parental buttons. Younger children learn to play their parents like a fiddle. And they are good at it. In this story, the younger son is a master fiddler (Richard Swanson in *Provoking the Gospel of Luke*, Pilgrim Press, Cleveland, Ohio, 2006, pp. 128-130).

The master fiddler is hard at work in this story as he goes to his father and convinces him that it is a good idea that they pretend together that the father was dead so that the son could fictively inherit his share of the property. Face it! That was the only way this story could work. With a percentage of the farm sold off, the younger son takes off to spend his father’s hard-earned inheritance. It isn’t long before the younger son has blown all his inheritance on wild adventures in a far-away land. It says, “*he came to himself*” or many translations say, “*he came to his senses.*”

This is where we need to do a freeze frame on this story. Stop right here. Let’s look more closely. On the surface, I have always thought I understood this story perfectly well. But, when I came to this passage, considering the family dynamics of mental illness, these words jumped off the page of the Bible. So I raise the question for you – is it possible that the younger son has some sort of Brain disease? We can all admit that his behaviors are compulsive – right? A person doesn’t beg for, cajole and force the hand of a parent for half their value while they are still living, then get it, and go and blow it immediately without something being wrong in their mind? Right? That is NOT NORMAL BEHAVIOR. We can at least agree on that.

One of the problems in dealing firsthand with mental illness is that – for both the person with an illness and the people in the family around them - there is often a continued ramping-up of behaviors. The adult son who pushes his father to give up the farm has (in this interpretation) pushed his father throughout his lifetime about lots of things – including

family rules, household chores, going to church (or synagogue), going to school, and of course - money. He pushes and pushes and pushes until his father gives in from a lifetime of pressure. Through it all, it isn't that he is "bad" (which his brother keeps saying). Rather, he is sick.

A friend of mine experienced her father going through the end stages of cancer and found that the disease changed his behaviors and it changed his brain chemistry. And chemo and radiation and the disease itself made him say things and do things that didn't fit the dad she had known throughout her lifetime. In time, she was able to forgive the behavior because of the disease's effects on her dad. When cancer changes or intensifies a person's behaviors, we are able to forgive and move on. When the brain disorders and diseases do the same to our loved ones, it is much harder to move on – even though the same grace extended to one disease needs to be extended to the other, too.

We tend to focus on the behaviors – because we often don't have words or thorough medical analysis to name the actions and thus forgive them. Erratic behaviors related to mental illness haunt the circle of loved ones who wonder – could we have said something different? Done something different? Responded better? Reacting to things will make you crazy. You find yourself hiding things, saying things, lying about things (for the first time in your life), doing things you never imagined possible – even giving away half your farm to a child who has not demonstrated in any way that he is stable enough to handle the money he is giving him.

All of this is crazy, and "Crazy making" (as I say) and is directly related to crazy in the blood.

In her book, Blessed are the Crazy: Breaking the Silence about Mental Illness, Family and Church, Sarah Griffith Lund opens her book by defining "Crazy" and "Crazy in the Blood." "Crazy" is a slang word that describes a person with brain disease and a description of a situation that is out of our control. "Crazy in the Blood" is a phrase that describes a genetic

predisposition to suffering from a brain disease and is the reason why some families are more dysfunctional than others. She adds this quote from BP Magazine, summer of 2014, *“Bipolar tends to run in families and appears to have a genetic link. Like depression and other serious illnesses, bipolar disorder can also negatively affect spouses, partners, family members, friends and co-workers”* (Blessed Are the Crazy, Sarah G. Lund, Chalice Press, St, Louis, MO, 2014, p. v).

I would like for us to see the younger son as sick and for once in our lives **not simply see him as “bad.”** He is crazy – to quote Sarah Lund. He may be suffering from bi-polar disease. He may be afflicted with psychosis or suffering from some form of schizophrenia. He may have multiple **diagnoses. We don’t know. It was the first century. Nobody had a** diagnosis then. None of these words were in existence. People like the younger son were called names like wasteful, wayward, evil, sinful, a shame on the family name. But when look closely, we see a young man who is not well.

There is he is wallowing with the pigs, eating the food of pigs (from the perspective of a religious Jew – this is lower than low). It is there in a pigsty the youngest son wakes up. **The clouds part in his brain and “he comes to his senses.”** For a moment, he sees his true condition. He has nothing. He has hit rock bottom. For a moment in time, he realizes how low his has fallen. There is the stinking, sinking mud of the pigsty he talks to himself. **He works out the words that he is going to say to his dad.** “I have sinned against heaven and before you, I am not worthy to be called your son.” He rehearses **this all the way home. Like a mantra of madness,** seeking to find home, he talks to himself and he walks by himself.

Like all the parents who have walked through their children’s brain diseases, the father is waiting for his son. His daily prayer is that the boy is still alive. As bad as his behaviors may have become, as often as the father has had thoughts he had to suppress about his son which he hates himself for having, he waits. Every night he goes to the edge of his property and

watches as the sun goes down to catch a glimpse of his son in the darkness at the edge of town. Every morning, he arises – as if he had been sleeping – to watch.

Every parent whose son or daughter has left home in distress or run away from home has the same sick and sinking feeling in their hearts. Is she alive? Is someone out there caring for her? Is she dead in a ditch? Is he in a homeless shelter? Or has he found happiness and a sense of sanity? Has he found a home – somewhere? Anywhere? Did some other woman or man look into his eyes or her eyes and see the hurt child that I see? And the wondering turns into a prayer – with the same depth of anguish and concern. And the prayers are lamenting prayers, painful prayers. And the prayers are all you have. A cry to God for help.

Finally, the son reaches what's left of the family farm. His father sees him first and runs to his side. The son's speech has been muttering under his breath the whole way home. But as the son begins to speak only half of what he wants to say gets out of his mouth before his father declares in a totally unrehearsed way to all those who can hear: *“Quick! Dress him with a robe, a ring for his finger and sandals. Get the fattened calf and kill it and we will have a celebration feast because my lost son who was dead has come back to life! He was lost and is found!”*

Let the party begin! Grace abounds! Love has spoken.

Not so fast. Stop everything. Before we get too excited about the party, let's remember the father has an older son, too. The older son comes home from yet another hard day's work and hears the music playing and smells the unfamiliar, but glorious smell of beef cooking, and he asks one of the servants what is going on. (Which one of us would want to be THAT servant?) *“Your brother has come home, so your dad is throwing a party!”* Big brother shares no delight in the return of little brother. His brain fills with visions, too. All he can see, and smell, and hear is a future of a smaller

estate, harder work, sale of more of his future inheritance for his screwed up brother.

In every family, some are blessed not to be “as crazy” in the blood. **Big brother might have gotten the genes that didn’t make his mind** muddled and his behaviors erratic. It is hard to watch his brother come back and the cycle start again. Compassion is in the big brother – but it is buried really deep. He has witnessed the pain caused to his dad and he has felt the pain, too. He sees his brother now living off his inheritance. And he sees his father being played again.

Big brother has reached the end of his rope. Baby brother has come home, not to penance, but to privilege. **It’s bad enough that he has wasted fathers’ estate, but he isn’t required to change any of his actions for all the pain he has created.**

One has to wonder - Is it possible he left in the first place because he **couldn’t watch his successful brother** get up and be normal every day? But **that is not a question to ask Big Brother....**

When the older son confronts his dad, the father listens to everything he screams. Unlike his younger brother who has rehearsed all his words there is nothing rehearsed in **big brother’s explosion (although he** must have thought these words inside his head a thousand times). He lets it all hang out. The dutiful son, the loyal son, the obedient son finally loses it! He has been good. He has followed orders. He has been faithful. He has done everything right - as opposed to everything wrong.

And dad takes it all in. He has no angry response. He has no lecture about honoring your father. He has lost his younger son to the afflictions of the brain and misbehaviors of waste and recklessness. Now he is watching his older son getting lost to anger and self-righteousness. The father simply loves his oldest son in return. He says, *“son, you are always with me. Everything I have is yours . . . but **your brother** was dead and is alive, he was lost and has been found.”*

Grace abounds for the father of these two sons. He finds a way to speak to each son.

Reading the texts through the lens of brain diseases and family systems helps us see that when one out of five people in a family system is afflicted with a brain disease, the other five family members are affected. These may be our children, but they are also the siblings of our other children.

I have also witnessed that sometimes parents forsake the child with a brain disease and circle the wagons around the other children. I have seen denial of the diseases and disturbing amounts of rejection for the children in need. While that may surprise some of you, I think it speaks deeply to the difficulties of admitting there are brain diseases in our family systems – **“there is crazy in the blood.”** There are other times when the child who appears to be well and healthy runs away and does a shift geographically from the family – **seeking to create a “safe distance” from the crazy in the blood.**

Can you see how complex brain diseases are and the effects of them on the one afflicted and the ones affected are far-reaching.

The effect of brain diseases on our children is significant. A few weeks ago, my longtime friend Dr. Glenn Thomas of Nationwide **Children’s Hospital sent me some sobering statistics about children and mental illness.** These are sobering statistics which should grab our attention as we seek to see and understand the depth of the affect and reach of brain diseases.

- 11% of children (ages 8 to 11) have or have had a mental illness with severe impairment
- 22% of teens (ages 13 to 18) have had a mental illness with severe impairment in their lifetime

- Only 50% of youth with a mental health disorder receive any behavioral health treatment (some stats say fewer than 50%)
- 50% of all lifetime mental illness start by age 14
- 75% of all lifetime mental illness start by age 24

Our children need us to speak for them – because nobody else will. We need to look for them coming home. We need to run to them when they make it home. We need to embrace them and support them as best as we can – while fighting back the pain we feel watching their spiraling behaviors.

The greatest gift we can give in the struggle to address brain diseases is to talk about this in church and society. To lift the stigmas surrounding these diseases will help us all. We need to do for our children and the kids living next door to us.

And we also need to remember that some of our children don't make it home. They die on the roads and in the ditches and alone in the pigsties that "crazy" created. That is the case for Katie Shoener who I heard about from friends in Washington DC a few days ago – even though she died 15 miles from here. Katie had come to Central Ohio to be a student at **The Ohio State University's Fisher School of Business.** She successfully completed her MBA and was working well when her depression and bipolar disease overwhelmed her causing her to walk into her boss' office and quit telling them, **"I am not good enough for this job. You need somebody else."**

For her father, Roman Catholic lay leader and Deacon Edward Shoener of Scranton, PA following the suicide of his daughter Katie in Lewis Center, Ohio 18 days ago, Ed's last gift was to write openly about his daughter's life and death.

In her obituary which appeared in the Washington Post on August 6th Ed wrote these words:

Kathleen 'Katie' Marie Shoener, 29, fought bipolar disorder since 2005, but she finally lost the battle on Wednesday to suicide in Lewis Center, Ohio. So often people who have a mental illness are known as their illness. People say that "she is bipolar" or "he is schizophrenic." Over the coming days as you talk to people about this, please do not use that phrase. People who have cancer are not cancer, those with diabetes are not diabetes. Katie was not bipolar — she had an illness called bipolar disorder — Katie herself was a beautiful child of God. The way we talk about people and their illnesses affects the people themselves and how we treat the illness. In the case of mental illness there is so much fear, ignorance and hurtful attitudes that the people who suffer from mental illness needlessly suffer further. Our society does not provide the resources that are needed to adequately understand and treat mental illness. In Katie's case, she had the best medical care available, she always took the cocktail of medicines that she was prescribed and she did her best to be healthy and manage this illness — and yet — that was not enough. Someday a cure will be found, but until then, we need to support and be compassionate to those with mental illness, every bit as much as we support those who suffer from cancer, heart disease or any other illness. Please know that Katie was a sweet, wonderful person that loved life, the people around her — and Jesus Christ.

Here the obituary ends.

In the power and presence of God's amazing grace, we are called to tell our stories, to welcome our loved ones home, to embrace them with grace and to let go and let God step into the breach. It is time to run to those who are reckless and self-righteous and those who are angry and resentful and to throw your arms around them and seek to heal the hurts of their world. It is time. Because after all is said and done, life (and yes, eternal life as well), is all about coming home. Everything! Everything! Everything is about coming home. Amen.

A sermon delivered by The Rev. Dr. Timothy C. Ahrens, Sr. Minister, The First Congregational Church, United Church of Christ, Columbus, Ohio, Proper 17, 22nd Sunday of Ordinary Time, August 28, 2016 dedicated to our Organist/Choir Master Emeritus, G. Dene Barnard for 43 years of life among us through which his music has lifted us up and touched us, to Matthew Thomas and his life lived for others and always to the glory of God!

“The Resurrected Mind”

Part 4 of 5 in the sermon series:

“Mental Illness: The Journey In, the Journey Out”

Jeremiah 2:4-13; Hebrews 13:1-8, 15-16; Luke 14:1,7-14

Sermon text: John 20:1-18

John 20:1-18 New Revised Standard Version (NRSV)

20 Early on the first day of the week, while it was still dark, Mary Magdalene came to the tomb and saw that the stone had been removed from the tomb. ² So she ran and went to Simon Peter and the other disciple, the one whom Jesus loved, and said to them, “They have taken the Lord out of the tomb, and we do not know where they have laid him.” ³ Then Peter and the other disciple set out and went toward the tomb. ⁴ The two were running together, but the other disciple outran Peter and reached the tomb first. ⁵ He bent down to look in and saw the linen wrappings lying there, but he did not go in. ⁶ Then Simon Peter came, following him, and went into the tomb. He saw the linen wrappings lying there, ⁷ and the cloth that had been on Jesus’ head, not lying with the linen wrappings but rolled up in a place by itself. ⁸ Then the other disciple, who reached the tomb first, also went in, and he saw and believed; ⁹ for as yet they did not understand the scripture, that he must rise from the dead. ¹⁰ Then the disciples returned to their homes.

¹¹ But Mary stood weeping outside the tomb. As she wept, she bent over to look^[a] into the tomb; ¹² and she saw two angels in white, sitting where the body of Jesus had been lying, one at the head and the other at the feet.

¹³ They said to her, “Woman, why are you weeping?” She said to them, “They have taken away my Lord, and I do not know where they have laid him.” ¹⁴ When she had said this, she turned around and saw Jesus standing there, but she did not know that it was Jesus.

¹⁵ Jesus said to her, “Woman, why are you weeping? Whom are you looking for?” Supposing him to be the gardener, she said to him, “Sir, if you have carried him away, tell me where you have laid him, and I will take him away.” ¹⁶ Jesus said to her, “Mary!” She turned and said to him in Hebrew,^[b] “Rabbouni!” (which means Teacher).

¹⁷ Jesus said to her, “Do not hold on to me, because I have not yet ascended to the Father. But go to my brothers and say to them, ‘I am ascending to my Father and your Father, to my God and your God.’”

¹⁸ Mary Magdalene went and announced to the disciples, “I have seen the Lord”; and she told them that he had said these things to her.

Let us pray: May the words of my mouth and the meditations of each one of our hearts be acceptable in your sight, O Lord, our rock and our salvation. Amen.

Have you ever found yourself heartbroken and sleepless - having lost a loved one? The person has passed away and there you are alone, in the middle of the night, sitting straight up in bed wondering where you are and what has happened to them? “Is she at peace? Is he with God? Is God comforting them?” you wonder as you squirm and struggle in your own intense discomfort and pain.

Have you found yourself slipping out of bed, standing by the window and looking out on a world in which he is no longer present? From which she is gone? Have you stepped into the morning air thick with grief, not knowing exactly where you are going or what you are doing but knowing

you must move so that you do not slip back into the pain of unknowing, the emptiness of loss, the hole that is now in your soul?

This is the picture I have of Mary Magdalene in the pre-dawn hours of the first Easter. Having been saved by Jesus, having walked with him through his ministry all the way to the cross, having watched him die in excruciating pain, having carried him to the tomb and laid him there, it must have been similar heart-stopping feelings which awakened Mary on the first Easter. These feelings caused her to get out of bed, go out the door and head into the hostile darkness and the dangerous and winding streets of Jerusalem all the way to the garden tomb of Jesus on the first Easter morning.

Through her tears, through her body-aching pain, Mary is traumatized all over again as she finds the tomb of Jesus empty. All alone. In the dark. Heart stopping. Breath stopping. Tears flowing. And then a voice speaks. At first these words shock her. But they become words that will soon reassure and bring hope.

They are the first words of resurrection spoken by Jesus the Christ to anyone. *“Woman, why are you weeping?”* A question. Yet one more question from the lips of Jesus that asked 381 other questions in the scriptures. She knows the questioning voice. It is her rabbi, her teacher, her Lord, her friend. She cannot hold onto him. She must trust and let him go. In that moment, in the pre-dawn hours of the first Easter, her trauma is turned to hope. Her tears are turned to dancing. Her broken heart is mended. Her words and prayers become the stuff of joy - Easter joy! Resurrection Joy!

Healing words and prayers most often find their first voice in the presence of pain. They are hidden from us in the intensity of our pain. But, they are revealed to us when we move from death to resurrection.

“Woman, why are you weeping?” This question is first asked by the angels in the tomb. It is echoed by our Risen Savior. The question seems odd to me. Why is she weeping? Jesus was crucified, dead, buried and now

his body has been taken from the tomb. Isn't it obvious why she is weeping?!?!? She was in pain and now she is inconsolable. Now, just the sound of his voice awakens within her the truth of his presence. The Risen Christ cuts through grief and gets to joy in his rising from the dead and speaking her name, "Mary."

As you know, it is often hard to get to resurrection in the battle with brain diseases, brain disorders or brain illnesses.

Sarah Griffith Lund, author of "Blessed are the Crazy: Breaking the Silence about Mental Illness, Family and Church" knows this too. On Eve Easter this year March 25, 2016, Sarah Griffith Lund wrote "The Resurrected Mind" in her blog post. In the piece she tells the story of her brother Scott's chronic and severe Brain Disease. Through a difficult month in which he "*blamed his family for keeping him alive because they loved him so much,*" Scott found a way to live. To live was a true struggle. There was pain for everyone involved, but somehow, some way – through the grace of God – Scott found a way to live. Sarah writes:

There were so many times when my brother almost died that we've grieved in anticipation of his life tragically ending. Despite all the treatment of new drugs, therapy, electroconvulsive shock therapy, and prayer, his bipolar disorder truly disabled him. He could not find anything that worked. We all began to think he would live with chronic mental pain until his last breath.

When Scott had finally communicated so clearly to me why death was the only way for him to find relief, during his stay in Jacksonville, he experienced a breakthrough in his treatment—a new cocktail of medications. It is a new medication combination that in the past month has provided incredible relief to him from his mental pain and suffering. For the first time in over a decade, Scott reports experiencing feelings of wellness.

Today I hardly recognize my brother. Yet, if I stretch back far enough in my memory I start to see the resemblances. The witty sense of humor, the teasing big

brother, the love of adventure. That's who Scott is and he's coming back to us. We thought we had lost him forever.

In every sense of the word, my brother's mind has been resurrected. His mind was once locked in a dark lonely tomb, behind a cold stone blocking any hope of light.

Depression is a tomb. Mental illness is a betrayal and crucifixion.

I am one of the women standing at the empty tomb. His mind has been raised from the dead. The stone is rolled away. He lives. My brother lives.

Where are we in the story of the resurrection of the mind? How are we fighting our way out of the tomb to new day dawning?

Statistics for brain diseases can be overwhelming. One in five Americans experiences a brain disease. As I said last week, when one in five in a family of five experiences mental illness or it also affects the other four members of family in some way. Let me offer a breakdown of the major brain diseases:

- 1 in 100 people live with schizophrenia
- 1 in 40 live with bi-polar disease.
- 1 in 14 live with major depression
- 1 in 6 live with anxiety disorder.

Of all the people in the four categories, only 50% receive treatment.

Depression is the leading cause of disability in the workplace worldwide.

Mental illness effects workplace dynamics significantly. 4% of all the global Gross Domestic Product (GDP) is lost due to brain illnesses. In the US alone, the lost earnings due to Serious Mental Illness (SMI) amount to \$193 billion.

These statistics can overwhelm our hope for a resurrected mind. I know this all too well. So, we need to find small places inside ourselves where our minds or the minds of our loved ones are resurrected. We need to find and claim places of joy. No matter how small that place is, we need to find it and claim it and the joy will burn out the pain that is trying to take over.

In her book *“Fight Back with Joy,”* Margaret Feinberg tells how she found joy in the midst of her two battles with cancer. As you hear Margaret’s words, I want to you replace cancer with brain diseases as you seek to claim a resurrected mind.

Margaret was writing a book when cancer hit the first time. She says now, **“Cancer wrecked my first book.”** But when it hit the second time, she had read over 400 passages of scripture addressing the joy of faith in God.

“Take joy into the battles with you,” writes Margaret recommends, *“Because if we’re honest, all of us are in a fight. Sometimes you pick the fight. Sometimes the fight picks you. Our struggles may differ, but no one escapes life unscathed. I know firsthand what it’s like to be on the battlefield.”* She now sees joy everywhere - wrestling with joy, dancing with joy, sleeping with joy and also crying with joy. She says, *“Joy is the best God-given medicine I ever had.”* Through joy she now chooses to face each day with hope, and faith and love. It is JOY that opened all the other doors of faith.

We need to take joy into the battle with brain diseases. We need to fight for joy. And this not a fight that one person alone fighting in their isolated darkness. This is a fight for all of us to engage. Just this week word got out to the Suicide Hotline that I was doing this sermon series. So, we were asked to invite folks to join them in covering the hours in which they need help on the hotline. There is legislation that is currently moving through the statehouse and is stuck in the Capital in

Washington. Here in Ohio, Senate Bill #162 stops the state from executing someone who is clearly diagnosed with a brain disease at the time they commit their crime. In Washington, Bill #2680 is intended to strengthen care and services for those with Brain Diseases.

Here in Columbus, we must support our sisters and brothers who **fighting for their lives in their battle with brain diseases. If we don't speak for them and with them, who will? If we, the people who claim resurrection at the heart and soul of faith, don't step up and support the resurrecting of the minds of our loved ones, who will?**

Alicia Cohn writing in Christianity Today, penned an article on August 3rd entitled, *“What I Needed from the Church During My Depression.”* She offers three ways our communities can support mental health. I commend her beautiful piece to all of us to read. I will include it as an appendix on my sermon today. Alicia lifts up a few ideas with **which I will end today...**

She calls us to pay attention to those around us. She writes, *The sick brain can't see the sick brain. More often than not, someone in the midst of a depressive episode or panic attack can barely put forth a cry for help.*” Pay Attention – first and foremost. Her three offerings are these for all us in **community. First, “Faith is something better.” Stand strong in the faith that you have and be present in standing with others. Second, “Resilience.”** Alicia is a Millennial – you know people who are now 18-39. She says 40% of unemployed people are millennials. They are marrying later, starting families later, and moving back with parents. As she says, **“no wonder we have the greatest depression rates in American society.”** She says the scriptures are filled with stories of resilience. Teach it, preach it, believe it, share it – Alicia tells the church! Finally, there is **“The Seasonal Perspective.”** Ecclesiastes tells us there is time and purpose for everything under heaven. She says, we in faith communities need to approach brain diseases from a seasonal perspective. Brain

diseases are cyclical. Holding a long view of the illnesses will give hope if we journey through this together.

The first words of our Risen Savior to Mary come in the form of a question. **“Why are you weeping?”** As we seek to build a beloved community to support those afflicted and affected by brain diseases, I believe we should start with these first words of resurrection – **“Why are you weeping?”** Then, **let us sit down and listen.** There the seeds of new life will take root and joy will carve out a niche for hope in the resurrected mind. Amen.

Next Week, my final sermon in this series is entitled, **“Blessed are the Stigma Busters.”** I hope to see you here.

Alicia Cohen’s article:

What I Needed From the Church During My Depression

AUG 3 2016

3 ways our communities can support mental health.

Alicia Cohn

Speaking at the Democratic National Convention last week, the singer Demi Lovato took advantage of the powerful platform to advocate for **mental health care in America.** **“Like millions of Americans, I am living with mental illness,”** she said. **“Too many Americans from all walks of life don't get help, either because they fear the stigma or they cannot afford treatment.”**

“Mental illness” is a scary-sounding category that encompasses a broad array of invisible struggles. Look around you on Sunday. Most likely, there

are Christians next to you suffering silently from anxiety or panic disorder, bipolar disorder (from which Lovato suffers), dysthymia or major depressive disorder (from which I have suffered). Whether through personal experience or through someone we know, those of us whose lives have been touched by mental health struggles know that getting help can be the hardest part.

Women are twice as likely to experience mental health struggles as men, thanks to major hormonal challenges such as pregnancy and menstruation. According to the Centers for Disease Control and Prevention (CDC), 30 percent of women between 18 and 44 years of age are affected by **depression, and many of them don't get the help they need.** (My own disorder went undiagnosed for almost six months before I got help from doctors and therapy, and even then, the recovery process has been hindered by bad advice, mistreatment, and poor choices about whom I can rely on.)

Unfortunately, many of us who have spoken up in church communities have been told to “pray harder” or “have more faith.” These suggestions might be well intentioned, but they often discourage and isolate those of us in desperate need of support. “It’s a knee-jerk reaction to judge people when they’re vulnerable,” wrote actress Kristen Bell of her own story. “But there’s nothing weak about struggling with mental illness. You’re just having a harder time living in your brain than other people.”

She’s right: Struggling with an illness of any kind makes a person vulnerable, and a sick brain puts a person in a particularly vulnerable state because it’s often impossible to discern the problem from the inside. The sick brain can’t see the sick brain. More often than not, someone in the midst of a depressive episode or panic attack can barely put forth a cry for help.

As people living in Christian community, we should be ready to offer practical knowledge and gracious support to people experiencing mental

health crises. With that in mind, here are three ways I believe every church is best positioned to help:

Faith in something better.

“Have faith that on the other side of your pain is something good,” Dwayne “The Rock” Johnson told the Oprah Presents Master Class. He wished someone had relayed this idea to him during a low point in his life when he was “crying constantly.” His message mirrors the “It gets better” campaign, but many people suffering from depression or other mental health issues know that sometimes it gets worse. Everyone needs a reason to keep trying. I’ve been in enough therapy groups and doctors’ offices to know that the only reason people keep looking for answers in the face of crippling despair is because they believe *something* will help: drugs, doctors, relationships, therapy, or sometimes the sheer freedom of living at rock bottom. Nonetheless, I’ve seen the best results when I (and others) put faith not exclusively in doctors or drugs or therapies, which have their limits, but also in God. He is **the reason I still believe in “something good”** on the other side of my pain.

If you know someone in your church like me who is suffering, come **alongside her**. Pray for her. Avoid cheap platitudes like “have faith” and instead offer practical support by checking in on a regular basis to let her **know she’s not alone, or by asking about her treatment, which is a way of acknowledging that the illness is real.**

Resilience.

Millennials are on more antidepressants than any other generation. According to the CDC, more than 6 percent of 18-to 39-year-olds have been prescribed antidepressants. My generation might as well define **ourselves as “behind” in our careers** (40 percent of unemployed people are millennials), salaries, and personal lives (marrying late and moving back in with our parents). **No wonder we’re depressed. On top of that, the hours we spend in psychiatrists’ or counselors’ offices dealing with symptoms of a**

disorder (or the side effects of medication) often feel like “lost” time. While dealing with my mental health problems, I have burned through a lot of time and money as well as emotional and relationship capital—all resources that I feel could have been spent better elsewhere. I find it reassuring to know that Christianity offers a promise of restoration greater than anything lost (Joel 2:25; Job 42:10–17). In the Bible, people often fall down, their lives fall apart, and yet God raises them up again. With that in mind, if you encounter someone in your church who is struggling with suicidal ideation or any form of hopelessness, first affirm their pain, then offer them the grace of optimism.

The "seasonal" perspective.

“For now” is the mantra my therapist gave me to get through depressive episodes and hard days. Ecclesiastes 3 provides a similar mantra: “To everything there is a season.” Mental health, too, is composed of seasons. I am currently in a season for antidepressants, and although it may be cyclical, I hope it will eventually end. For most people, circumstances change, the brain’s reactions change accordingly, and the appropriate therapy also changes in sync with the situation. With mental health challenges, maintaining a long-range perspective is key to survival. The hardest, most important thing to do is simply to persevere.

If someone near you is facing a discrete mental health episode or a lifelong challenge, encourage her to name the season she’s in, remind her that seasons often change, and journey with her as she takes it one day at a time.

“I don't think I'm fixed,” Lovato shared in the MTV documentary about her “recovery” in a residential treatment facility. “People think that you're like a car in a body shop. You go in, they fix you, and you're out. It takes constant fixing.”

Much like spiritual health, mental health is an ongoing need for every human being. Although those of us who struggle are each responsible for ourselves, we also rely on the powerful support of our community to ensure

that we get the care we need. It starts with awareness within each local church. Just as an increasing number of secular figures have spoken up publicly, Christians should step forward to be, as Lovato put it, “proof that you can live a normal and empowered life with mental illness.”

The Bible is filled with exhortations to care for the most vulnerable among us—those who cry out for mercy and feel they have nowhere to turn.

Those of us who face mental health crises are among the most vulnerable. We need your recognition. We need your prayers. We need your presence. And we need to be part of the church community, especially as we struggle to find extra grace.

A Communion Meditation delivered by The Rev. Dr. Timothy C. Ahrens, Sr. Minister, The First Congregational Church, United Church of Christ, Columbus, Ohio, September 4, 2016, Proper 18, 23rd Sunday of Ordinary Time, dedicated to St. Teresa of Calcutta, to the Stigma Busters in church and society and always to the glory of God!

“Blessed Are the Stigma Busters”

5 of 5 in the sermon series

“Mental Illness: The Journey In, The Journey Out”

Jeremiah 1:1-11; Philemon 1-21; Luke 14:25-33

II Corinthians 4:18

“... We look not at what can be seen, but what cannot be seen, for what can be seen is temporary and what cannot be seen is eternal.”

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Let us pray: May the words of my mouth and the meditations of each one of our hearts be acceptable in your sight, O Lord, our rock and our salvation. Amen.

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“For several years, she wrote about her bipolar disorder under a pseudonym. She described how she’d been hospitalized four times, twice since her first child was born. She explained how she went off her medication during both of her pregnancies and how each time — once as the mother of a newborn and then again weeks into her second pregnancy — she was escorted from her home in police handcuffs, defiant.”

“She blogged to connect and reach other mothers grappling with mental illness. Ultimately, however, she decided that hiding her identity was actually perpetuating the shame long associated with mental disorders.”

“Even as her parents urged her not to, Jennifer Marshall in 2013 typed her real name on a blog post, hit publish and waited for the reaction. With those keystrokes, Marshall, who lives in Ashburn, Va., joined a growing community of people with mental illness who have chosen to out themselves. “It felt as though I was walking through life carrying this incredibly heavy secret,” said Jennifer. She felt a surge of strength as she shared her story. “It’s human connection,” she said. “When you find someone who has been able to overcome something that you’re struggling with, it’s really powerful.” (*Unwell and unashamed: The stigma of mental illness is under attack by sufferers, who are coming out publicly and defiantly*, by [Colby Itkowitz](#), The Washington Post, June 1, 2016).

On June 1st, in The Washington Post, Colby Itkowitz featured Jennifer and others like her in her story, *“Unwell and unashamed: The stigma of mental illness is under attack by sufferers, who are coming out publicly and defiantly.”*

They are part of a stigma busting movement. Some have compared this stigma busting movement for those battling brain diseases to the gay rights movement with its beginnings in personal revelation and story-telling. The groundswell to lift the stigma connected with brain diseases has had a multiplying effect accelerated by social media. The more people who

“come out” about their mental illness and are met with acceptance, the more others feel it’s safe to do the same.

Since the beginning of 2016, millions have tweeted about their mental illness, many using established hash tags. For example, the campaigns **#imnotashamed** and **#sicknotweak** were tweeted 75,000 times and 139,000 times, respectively, since Jan. 1, according to an analysis from Twitter. The movement **#BellLetsTalk**, which began in Canada to “start breaking down the barriers associated with mental illness,” received 6.8 million tweets in January from all over the world.

While U.S. mental-health experts said there is not yet scientific data tracking the increase in voluntary disclosures of mental illness, social media has been employed so much to that end that a former Johns Hopkins professor is studying behavioral trends by mining tweets in which people talk explicitly about their mental illnesses. Glen Coppersmith said that he was initially surprised by how many people disclose that information online. Coppersmith’s Twitter analysis shows that since 2014, hundreds of people a day have tweeted that they have received diagnoses of mental illness. *“Some of it is to end the stigma; some is an explanation of past behavior,”* said Coppersmith, who recently started a company, Qntfy, to analyze mental-health data.

He added that he “wholeheartedly” believes such disclosures have risen to the level of a movement.

The trend has been buoyed, experts say, by advancements in neuroscience that have enabled people to cast off stereotypes of mental illness as a personal failing and view it instead as the result of physiological changes in the brain that can be treated much like physical illnesses. “We’ve become a much more sophisticated society about mental health,” said Bernice Pescosolido, a professor at Indiana University and an expert in mental-health stigma. “As people, we are opening up more about issues of

race, issues of gender, issues of health generally. This is intertwined with the fabric of life”.

But prejudice persists, particularly in the workplace, and Pescosolido and other experts say it remains to be seen whether the outpouring that is contained largely to social media will translate into advocacy and less discrimination in daily life. The stigma “is still out there,” Pescosolido said. “I think it’s an opportunity. We’ve had a resurgence in the science; we’ve had a resurgence of people coming forward”.

Names in this social media movement have begun to emerge in wonderful ways. Sarah Fader, who has a panic disorder, has co-founded the blog **Stigma Fighters** with Allie Burke who lives with schizophrenia. Their forum is for those who live with brain diseases. Hundreds of people have written pieces for the blog since its launch in March 2014. The origins of “Stigma Fighters” can be traced to early 2014 when she penned [*Fighting Against the Stigma of Mental Illness*](#) for the Huffington Post to describe her struggles. She described how others had belittled her for her illness, telling her that she was merely being “dramatic” or disparaging her use of antidepressants. Hundreds of people from all over the world sent her messages relating their own experiences with shame.

Amy Bleuel, who was depressed and plagued with suicidal thoughts most of her life, noticed the same phenomenon when she launched [Project Semicolon](#) in 2013. Her father died by suicide when she was 18, and she knew that he, like she, had felt alone in his illness. In April 2013, after a conversation with a friend yielded the idea, Bleuel tweeted a request for people to draw a semicolon on their wrists. Amy says, “People with mental illness often think their lives are over. But the semicolon signifies that there’s more to your story. Used by authors when they’re not ready to end a sentence, the semi-colon is fast rising as a symbol for this stigma busting movement.” She continues, “*People want to know they’re not suffering in*

silence. We want to have that discussion. We're done losing people to suicide; we're done not knowing what to do".

The movement to lift the stigma is also changing how mental illness is portrayed in popular culture and the arts. In the FX Network show “**You’re the Worst,**” the audience came to know one of the main characters as a gregarious party girl with, yes, questionable morals. Then, in the second season, it is revealed that Gretchen Cutler’s lifestyle is a diversion from recurrent depression. When it comes roaring back, she fears telling her boyfriend that **“my brain is broken.”**

That’s what Rachel Griffin, a singer-songwriter in New York, had in mind when she embarked on writing a musical comedy about life in a psychiatric ward. In **“We Have Apples,”** the main character, Jane, is a young woman with severe panic disorder and depression. Throughout the show, another character portrays Depression — always hovering, sometimes controlling the conversation. Jane’s symptoms worsen until she checks herself into a mental hospital. Griffin sees her show as doing for mental illness what “Rent” did for HIV/AIDS by presenting complex characters who are more than just their illnesses. She started writing the show while riding the subway as an outlet for her depression and anxiety. “It’s about empowerment,” she said. Rachel Griffin, who has anxiety and depression, is a graduate student in music education at New York University. She started a twitter campaign, **#imnotashamed**, calling on people to disclose their mental illnesses and declare themselves unashamed.

Remember Jennifer Marshall - one of the key leaders of this stigma-busting movement? In 2013 she started **“This Is My Brave,”** which is now a stage show appearing around the country in which cast members tell their stories of mental illness, some for the first time. Helen Dennis is now in the show. She stands at center stage along with others under a spotlight sharing her stories of mental illness. Dennis isn’t sure what compelled her to audition for Marshall. But on that day, she said, the words poured out.

“I’m a touch terrified because there is still such a strong stigma around it; there’s a lot of misinformation about it,” she said. “But I truly believe as people see co-workers and friends come out of the woodwork and be honest about this, it shows it can happen to anyone. You feel so alone when you’re going through the worst of it; to hear you’re not alone for me is revolutionary.” (All the stigma busting stories and much of the text above has been drawn from “*Unwell and unashamed: The stigma of mental illness is under attack by sufferers, who are coming out publicly and defiantly,*” by [Colby Itkowitz](#), *The Washington Post*, June 1, 2016).

The Stigma busting stories and leadership of **Jennifer, Amy, Sarah, Rachel, Helen, and Allie** are inspiring a new movement of people battling brain diseases. But, here we are in church and not one of these stories has been a traditional faith story. Yet I would contend that all of the stories have been God-stories. Each stigma buster has found their voice, shared their stories and burst forth in new life. Each stigma buster has had the courage to write, to act, to sing, dance, and speak about their brain disease. And as they have, each one has brought along others in this journey.

Ours should be no lament in relation to church and society on questions of stigma busting around brain diseases. After all, we are here today supporting one another in this stigma busting effort in the church! We are talking about this. We are trying to catch-up with those who have stepped ahead of us in this movement of stigma busting. And we are doing so with the founder of our faith as a guide in the process. As Jesus healed and taught, his was a movement which embraced love and saw the best in people. He was all about stigma busting himself. He challenged laws that made no sense and people who made little sense in defending their laws. That is stigma busting.

As Judeo-Christian people, we have to overcome scriptural texts which declare demon-possession when we all know the symptoms are brain diseases of one sort or another. We need to forgive ancient writers who

were doing their best thousands of years ago to define realities for which they had no “diagnosis.” We need to speak out when those with brain diseases are demonized – literally and figuratively. We need to read and reinterpret texts and parables - like the Prodigal Son - for a new day. We need to stay open to the movement of the Holy Spirit in the church and the world where people are beginning to “come out” about their struggles with depression and brain diseases.

Maya Angelou said it so well in *I Know Why the Caged Bird Sings* - “There is no great agony than bearing an untold story inside of you.” We need to share our stories so that we end our agony and step into hope and new life.

I have received hundreds of emails from people over the past five weeks. One came following my first sermon from my friend Dan in Washington DC. He wrote:

Tim, I braced myself, expecting that this would be spiritually and emotionally exhausting to read. But it wasn't at all so. I think and hope that bodes well for how it touched your congregation. Though the part about Paul's likely epilepsy was hard because that disease ruined my now-deceased college roommate. Thank you so much.

On Saturday morning, I went to the office to pick up some papers, a walk that takes me past a park where homeless people rest. A woman wearing a filthy t shirt stepped into my path and said "I'm Denisha, I'm 67 years old and I have no teeth. Can you help me get something to eat?" I said yes, if she would walk up the block with me to Subway.

As we walked, I noticed she had an admission bracelet from DC general, and that she was greeting everyone in our path like a long lost friend, while forgetting who I was and what we were doing. At Subway, she ordered a tuna salad sandwich because it was the only thing she could chew with just her gums. As we walked out, I said goodbye and called her by her name. At this, she lit up, seized me, and gave me a wet toothless kiss on the cheek. After releasing me,

*she said "Remember Jesus" before walking away. I paused for a few moments...
For some reason, that pause helped her words sink in.*

God is always speaking, always giving us opportunities to worship and serve.

Love, Dan

As we come to God's Table of Grace, let us remember Jesus as Denisha and Jesus have called us to do. And let us also remember **Denisha, Jennifer, Amy, Sarah, Rachel, Helen, Allie**, and those who have entered our consciousness over the past five weeks: **Sammy Bloom and Sam and Lois Bloom, Katie Shoener, and Ed and Ruth Shoener, Alan Johnson and Marti McMane, Jeff and Carol, Sarah Griffith Lund, Alicia Cohen, JK Rowling, Michael Phelps and Pablo Picasso**. Let us remember our mothers and fathers, our sisters and brothers, husbands and wives, our children and grandchildren; our classmates, our friends, neighbors and co-workers who are hungering for justice in the stigma busting battle with brain diseases.

Let us always remember them so that we can sit with them, stand with them, be with them, listen to them, walk with them, advocate with them and fight for them. Blessed are the Stigma Busters. May we always remember. Amen.

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