

How Faith-based Communities Build Bridges to Treatment

Federal agencies of the Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC) are working to support a mental health system that successfully addresses the needs of individuals living with serious mental illness (SMI), serious emotional disturbance (SED), their families, and caregivers. The ISMICC seeks to support such Americans in their progress to achieve healthy lives characterized by autonomy, pride, self-worth, hope, dignity and meaning. Improving access to care is one of the five areas that ISMICC recommended for action. Read recommendations from ISMICC's non-federal members, visit <http://bit.ly/2OqTVOd>.

Improving Access through Faith-based Communities

Faith-based communities should be an essential and effective component of the continuum of care, one that can aid in community-based prevention, stigma reduction, psychosocial support, and recovery promotion. Faith-based communities can be effective partners in this work because they provide comfort, strength, and safe places for individuals who have SMI, as well as for families and caregivers. Stronger linkages between faith-based communities and service providers will help people obtain appropriate treatment, services and support.

There is a growing recognition that building partnerships between faith-based organizations and the behavioral health system can benefit people who have mental health conditions.

One practical reason for forging partnerships: Faith-based organizations have a long-standing history of supporting those in need in the community. When an individual or a family member is experiencing challenges in life, people often turn first to local religious institutions. One [study](#) has found that nearly one-quarter of individuals who are looking for help with their mental health conditions will go to their clergy members first. In fact, seeking help from clergy is as common as seeking care from mental health professionals. HHS offers guidance on creating community connections for mental health <https://www.mentalhealth.gov/talk/faith-community-leaders>.

Meeting attendees agreed with producer Bryan Stevenson's notion that faith-based communities can be "stone catchers" rather than "stone throwers" by dispelling myths about mental illness and by removing stigmas that inhibit people from seeking treatment. As stone catchers, faith-based communities act as bridges between people who are in need and those who can help them live in long-term recovery.

- **Learn the symptoms of mental illness.** Leaders who often provide guidance to those seeking help should learn the basic signs of mental illnesses.
- **Convey hope.** Communicate the reality that people can live full lives with a mental disorder as a chronic health condition. Treatment options are available and effective.

- **Make referrals.** Know the range of resources available in your community, and connect people and families to mental health treatments and supports that fit their needs.
- **Create a safe environment.** Foster a supportive environment in your organization where people can talk openly and can learn more about mental health issues, treatments and supports.
- **Raise awareness.** Educate your organization’s members about mental health disorder prevention and treatment resources. Invite local mental health experts, people who have experienced mental illnesses or members to present information about mental illnesses. Work deliberately to reduce stigma of mental illnesses among members.
- **Facilitate peer-to-peer support.** Host support groups or provide information about internal ministries that promote recovery, as well as groups that convene elsewhere in the community.
- **Provide faith-based, informed professional behavioral health care services.** Often individuals are more willing to seek help if they are in a familiar setting. For religious institutions that sponsor annual health fairs, these can provide opportunities to destigmatize certain topics, to demonstrate a commitment to helping people who have certain mental health disorders and to help them identify opportunities for fellowship, treatment and support.

Being Bridge Builders

To continue exploring how partnerships with faith-based communities can be developed and nurtured, SAMHSA, in cooperation with the Center for Faith and Opportunity Initiatives within the U.S. Department of Health and Human Services, convened faith leaders from across the country on September 12, 2018, for an expert panel meeting. The meeting, *“The Role of the Faith-Based Community as Bridge Builders to the Treatment Community for People with SMI,”* illuminated many of the actions faith leaders can take to support people who are in crisis, as well as their families.



Meeting participants concluded that:

- For many, their faith-based community represents the safest place to seek help.
- People who have SMI can find assistance in faith-based communities to address their needs.
- Faith communities can be places of support for recovery and transformation.
- Peers play a critical role in faith-based and community treatment systems, whether it is person-to-person or caregiver-to-caregiver.
- Data on research and treatment can positively impact the behaviors of both providers and faith communities and should be shared in ways that are accessible and meaningful to both. This information can be provided through institutions and organizations to communicate to each respective community: seminaries, theological organizations, as well as other educational and training facilities for faith leaders – and medical associations and clinical treatment systems for providers.
- Faith-based communities should consider building relationships with philanthropic organizations. Increased funding is needed to expand infrastructure to provide behavioral health services and/or to serve as the bridge to community treatment while providing individualized, ongoing support.

“Everyone deserves a casserole when they are ill,” said one participant to nods around the room. Her meaning: People returning from other medical treatments often receive meals prepared by those from their faith communities as a form of support. People with mental illness and their families deserve to receive that same level of concern and support.
