

# Information for Faith-Based and Community Leaders

## Introduction

On June 3, 2013, President Obama convened a National Conference on Mental Health at the White House. Dozens of commitments by organizations representing media, educators, health care providers, faith communities, and foundations to increase understanding and awareness of mental health were announced at the conference.

Increasing awareness of mental health issues and making it easier for people to seek help will take partners working together. Faith and community leaders can play a significant role in helping to educate individuals and families about mental health.

## What is mental health?

Mental health is an essential part of overall health and well-being of individuals, families, and communities. A person's mental health includes how they handle stress, manage emotions, relate to other people, make decisions, and perceive the world and their sense of purpose in life.<sup>i</sup>

Mental health problems affect virtually all communities in our country. Approximately one in five Americans over age 18 will experience a mental health problem this year.<sup>ii</sup> There are 45 million adults with any mental illness over the age of 18 in the United States<sup>iii</sup> and currently suicide is the third leading cause of death among 15-24 year-olds.<sup>iv</sup> However, we know that people can and do recover from mental health problems.

## Important Information for Faith and Community Leaders

By taking part in this important discussion about mental health, faith and community leaders can help individuals and families in need by lifting up messages of support and providing information on how to access services if necessary.

- When individuals and families face mental health problems, many turn to trusted friends and communities. As leaders and members of congregations, and faith-based and other community organizations, your voices add great value to efforts to reduce negative attitudes about mental health conditions and those who experience them.
- Faith and other neighborhood leaders are often first responders when an individual or family faces a mental health challenge or when a community experiences a traumatic event. Knowing how to respond to these events can make a huge difference in how the individual and community copes and heals.

- Negative attitudes and discrimination of people with mental illnesses can impede recovery.<sup>v</sup> Religious and civic leaders can help lessen negative attitudes, fear, and discrimination against people with mental illnesses by creating a safe and supportive environment where people can openly talk about mental health issues. Empathy and active listening can help build relationships and support recovery for people living with mental illnesses.
- Community connectedness and support, like that found in faith-based and other neighborhood organizations, are important to the long-term recovery of people living with mental illnesses.<sup>vi</sup>
- Your understanding of behavioral health and the many pathways to recovery can help people achieve their full potential.

## What Can Faith and Community Leaders Do To Become Part of Community Conversations About Mental Health?

If they chose to do so, faith and other community leaders can have a significant role in increasing understanding and awareness of mental health, encouraging individuals experiencing mental health problems to seek help, and helping to build resilience and well-being in individuals and communities.

These leaders can help by taking steps such as:

- Identifying opportunities to discuss the importance of mental health, facts about mental illness, and the role that the religious and other community organizations can play in supporting individuals living with mental illnesses and encouraging them to seek help.
- Organizing additional meetings, dinners, or other gatherings for members of your congregation or community to have conversations about mental health.
- Creating a welcoming, supportive, safe and non-judgmental environment to address mental health issues within the congregation and in community settings.
  - Let people know it is okay to talk about mental health.
  - Talk about mental health with an approach that supports prevention, treatment and recovery.
  - Encourage people experiencing mental health problems – and their families – to seek help and assist them in finding help when needed.
  - Promote positive mental health through fellowship.
  - Foster opportunities to build connections with individuals and families dealing with mental health challenges through a spirit of trust and acceptance.

- Recognize and support individuals with mental illnesses regardless of whether they are doing well or needing additional assistance.
- Consider offering your organization’s meeting spaces for community conversations and support groups focused on addressing mental health issues.
- Planning and facilitating a community conversation using SAMHSA’s *Toolkit for Community Conversations About Mental Health*. The toolkit provides information about how to plan a community conversation, how to guide these discussions, and includes information about mental health issues to use during the discussion.
- Sharing the *Toolkit for Community Conversations About Mental Health* with your colleagues and leaders in other organizations.
- Developing relationships with local mental health service providers and helping to direct individuals and families in need to available services and supports in the community.
- Inviting local experts on mental health issues to speak at community gatherings and educational hours.
- Committing to ongoing involvement and outreach.

If you or someone in your community is looking for experts to serve as speakers or to link to other local services, please visit [MentalHealth.gov](http://MentalHealth.gov) for a list of partner organizations that can serve as a resource.

*Together* we can help improve America’s health and the health of our families and communities.

For more resources visit [www.MentalHealth.gov](http://www.MentalHealth.gov) and [www.SAMHSA.gov](http://www.SAMHSA.gov).

### **Where can I find help for myself, a congregation member, a family member, or a friend?**

If the situation is potentially life-threatening, get immediate emergency assistance by calling **911**, available 24 hours a day.

- If you or someone you know are suicidal or in emotional distress, contact the **National Suicide Prevention Lifeline at 1 (800) 273-TALK (8255)**. Trained crisis workers are available to talk 24 hours a day, 7 days a week.
- To find help in your community, contact the Substance Abuse and Mental Health Services Administration’s (SAMHSA’s) **Treatment Referral Line at 1-800-662-HELP (4357)** available Monday through Friday from 8 a.m. to 8 p.m. EST.
- You can also access the **Treatment Locator** online by visiting [www.SAMHSA.gov](http://www.SAMHSA.gov) or [www.MentalHealth.gov](http://www.MentalHealth.gov).

---

<sup>i</sup> U.S. Department of Health and Human Services. (1999). *Mental Health: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services; Substance Abuse and Mental Health Services Administration, Center for Mental Health Services; National Institutes of Health, National Institute of Mental Health.

<sup>ii</sup> U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2012). *Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings* (NSDUH Series, H-45, HHS Publication No. (SMA) 12-4725). Rockville, MD. Retrieved from [http://www.samhsa.gov/data/NSDUH/2k10MH\\_Findings/2k10MHResults.htm](http://www.samhsa.gov/data/NSDUH/2k10MH_Findings/2k10MHResults.htm)

<sup>iii</sup> U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2012). *Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings* (NSDUH Series, H-45, HHS Publication No. (SMA) 12-4725). Rockville, MD. Retrieved from [http://www.samhsa.gov/data/NSDUH/2k10MH\\_Findings/2k10MHResults.htm](http://www.samhsa.gov/data/NSDUH/2k10MH_Findings/2k10MHResults.htm)

<sup>iv</sup> U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. (2010). *National Vital Statistics System, National Center for Health Statistics. Web-based Injury Statistics Query and Reporting System (WISQARS)* [online]. Retrieved from [http://www.cdc.gov/injury/wisqars/pdf/10LCID\\_All\\_Deaths\\_By\\_Age\\_Group\\_2010-a.pdf](http://www.cdc.gov/injury/wisqars/pdf/10LCID_All_Deaths_By_Age_Group_2010-a.pdf)

<sup>v</sup> Centers for Disease Control and Prevention, Substance Abuse and Mental Health Services Administration, National Association of County Behavioral Health & Developmental Disability Directors, National Institute of Mental Health, & The Carter Center Mental Health Program. (2012). *Attitudes Toward Mental Illness: Results from the Behavioral Risk Factor Surveillance System*. Atlanta, GA: Centers for Disease Control and Prevention.

<sup>vi</sup> U.S. Department of Health and Human Services, Office of the Surgeon General. (2011). *National Prevention Strategy*. Washington, DC: National Prevention Council. Retrieved from <https://www.surgeongeneral.gov/priorities/prevention/strategy/report.pdf>.