

## **“New, True, and Trustworthy”**

Revelation 21:1-6; Acts 16:16-24; John 13:34-35 – Rev. Rebecca Littlejohn  
Vista La Mesa Christian Church (Disciples of Christ), La Mesa, California – May 15, 2022

*Holy God, bless the speaking and the hearing of these words, that we might invite your love into the life of our minds, in all its complexity. In Jesus' name, Amen.*

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My friends, we are half-way through May, which is Mental Health Awareness Month, and it seemed well past time to talk about that. We're all “aware” of mental health, right? It's part of everyone's life and family, whether because of everyday struggles or crisis moments that have shaped us. So why is it that something we are all touched by is so rarely discussed in church? We'll bring up all manner of physical ailments during prayer concerns, from broken bones to cancer to constipation, but if someone's brain chemistry is out of whack, we tend to use euphemisms like “having a hard time,” if we ask for prayers out loud at all.

So today, let's “break the silence,” as UCC pastor and mental health author Sarah Griffith Lund puts it. Let's talk about it. The first thing I need to say is that I am not an expert. I am not a mental health professional, though I am sometimes a first-stop for counseling someone who is struggling. I am not offering professional advice today; I simply want to reflect with you on how we've dealt with, or perhaps more accurately, avoided mental health issues within the church and how we might do better.

As we get started, let's put some context around our scripture readings. The truth is that putting mental health into conversation with scripture is a bit problematic, because our knowledge and wisdom about mental illness is so much more sophisticated than the biblical understanding. In particular, you will hear me draw parallels between the enslaved girl possessed by a "spirit of divination" and certain kinds of mental illnesses. Is this a fair connection to make? It's hard to say: we really don't know what was going on in the various stories of spirits inhabiting people in scripture, but they often seem like particular manifestations of certain mental illness that involve voices or multiple personalities. So let us tread carefully, aware that we don't entirely have a handle on the subject at hand.

The other thing we need to be careful is avoiding the assumption the scripture speaks with one voice on these questions. Blessedly, the Bible is full of people going through and responding to the whole wide spectrum of emotional realities, just as we do. But the responses to those realities are not always healthy, which is also what happens with us. The reason I included those two verses from John is because whatever we're reading, in scripture or elsewhere, about mental health or pretty much any other topic, needs to be assessed by the standards of gospel love. Whatever the challenge is, our faith invites us to address first and foremost the question of what it would look like to love one another in that particular situation. So this is the "new" – let's be a church where talking about mental health – the good, the bad, and the terrifying – is normalized and safe, rather than taboo and shamed.

Next, let's talk about the true. Let's name some of what we know to be true about the challenges of living life as human beings, with brain full of chemicals and hearts full of emotions and souls trying to hold it all together.

First of all, right there in those few short verses from Revelation, let's notice two different reactions to our feelings. First, we hear that God is with God's people, wiping the tears from our eyes. To me, this is the most appropriate image for God when it comes to the things that bring us sorrow and pain. God is with us, wiping the tears from our eyes. To wipe a tear away is not to deny its existence, but to help the one crying avoid being overwhelmed by their grief. It is an intimate act of love, a gesture of solidarity that says, "I will sit with you in this yuck as long as it takes."

But just a verse later the writer has done what we're often tempted to do in the face of uncomfortable emotions: move on. "Death ... and mourning and crying and pain will be no more." We really don't like being sad; sometimes we will do just about anything to avoid it. And sometimes that includes the disrespect of telling someone caught up in sorrow to focus on heaven instead, because there isn't any sadness in heaven. We might as well tell them they're not going to fit in in heaven.

So as we name things that are true, we need to admit to ourselves that sadness, grief, fear and depression are parts of human life, and we need to confess our unhealthy, unloving temptation to pretend otherwise. This doesn't mean we need to allow our feelings to overwhelm us and keep us from living, rather it means that we're

more likely to be able to live abundantly if we acknowledge the full breadth of our emotions instead of suppressing them.

We see a few more true things reflected in the story we read from Acts. The first response we see to this girl who “has a spirit of divination” is her exploitation. She is already clearly exploited simply because she has been enslaved. This points us to recognize the intersectionality of mental health. So often, those struggling with mental illnesses are also living with other forms of oppression based on race, gender identity, disability, and other factors beyond their control. We know that access to mental health care is extremely limited in our country, which means that folks with limited income are unlikely to get the help they need.

Then, of course, there is the exploitation this young woman is experiencing that is directly related to her condition. Her enslavers are making money off her suffering. I don’t know that there is an obvious parallel in our modern context, but given how expensive some mental health medications are, someone somewhere is making some bank off the suffering of others. Is it simply true that mentally ill people are much more likely to be struggling with poverty, because we have not built structures in our society that promote their flourishing.

The second response we see in this story is Paul’s. The writer tells us that Paul was “very much annoyed,” which is what finally motivated him to exorcise the spirit from the enslaved girl. It wasn’t compassion; it wasn’t a desire to end her exploitation – he was just exasperated. Those of us with less exposure to the ways folks with

some mental health issues communicate are often no more patient than Paul.

Whether it's a non-verbal child with autism having a meltdown in a store or a person struggling with severe OCD in ways that interrupt the flow of our lives, we tend to judge and blame, and walk away irritated rather than responding with empathy. We need to confess this truth as well and find new and better ways to engage.

What's particularly egregious in Paul's story is that at one very obvious level, the spirit possessing this young woman was aiding his mission. "These men are slaves of the Most High God, who proclaim to you a way of salvation," she was shouting. Why would Paul not want people to hear that? I'm guessing it's because he preferred to control his message himself and also that he didn't want to be associated with a "crazy person." What I notice about this is what we miss out on when we dismiss those who communicate in non-traditional ways. There is a whole wealth of wisdom out there, trapped in the minds of neuro-divergent people the world has dismissed, which we could benefit from if we could just learn to listen with open hearts and minds. This is a truth we've only just begun to see.

Another true thing we need to say out loud about the mental health challenges we're all struggling with is that context matters. Situational depression is what we call it when it's not necessarily a brain chemistry imbalance that's causing problems, but simply the circumstances of life which have become, well, depressing. You only have to look around and see that depression is one of a host of logical responses to the current state of the world. We're facing climate catastrophe, the rise of violent

fascism, economic disparities like we haven't experienced for generations, and more. If you combine that with difficulties in our own personal lives, like illness or chronic pain or the death of loved ones or job loss, it can all just be too much. Part of the power of truth in the quest for better mental health is to open and honest about the ways that life is hard. Too often, we force cheerfulness and positivity on one another; we put on a mask to avoid being a "downer." But the hard things in life don't go away when we ignore them; they simply eat silently away at our insides until we're hollowed out. By talking about these hard things, we can help one another hold them, and we discover that our burdens are lighter when shared.

Once we've broached the reality of life being difficult, we also need to speak to the question of mental illness and violence. So often, when mass shootings erupt, we jump to the idea that the perpetrator must have been mentally ill. But hear this clearly: those struggling with mental illness are much more likely, statistically, to be victims of violence than perpetrators. Indoctrination is not the same thing as depression, though they may share similar risk factors. We desperately need to improve mental health care in this country. But we also need to address the increasing levels of radicalization and violence, we're seeing especially in young, White men, which are frequently accompanied by racist, antisemitic, and misogynistic hatred. We must avoid trivializing or dismissing these dangers as just some "crazy" lone wolf threats, when there are structures within our society that have been systematically promoting them for decades now.

That's a lot of truth. We have feelings; we don't always handle them well. We have tendencies to marginalize, exploit, and dismiss people struggling with mental illness. Our global and national context is not designed for flourishing, but rather deepens our struggles. Violence and extremist indoctrination are serious threats that we can't afford to scapegoat mental illness to avoid.

It will certainly be a new era for us to address all of this, authentically and honestly. So what does it look like to trust God in the midst of that? What would it look like to love one another as Jesus loves us, in the face of mental illness and mental health struggles? I'm not sure I know the answers to these questions. I do know that we need to keep close that image of God wiping our tears, for as long as we need to cry. We need to hold onto Jesus the Gentle Savior who holds us close, even as we weep and rage. We need to be courageous enough to speak the truth, even when the truth is that we're struggling to hold it together. We need to be brave enough to seek help, whether talk therapy or medication, and share those experiences with one another, so that, together, we can reduce the stigma that still clings to mental health issues. God is trustworthy; we can rely on God to hold us through all these challenges. God is big enough to hold our sorrow and our rage and our numbness, and whatever else might be burdening us. Let us pray that the church can grow in trustworthiness, as we venture into new truths and learn how to love one another even more faithfully. Hallelujah and Amen.