

Fearfully and Wonderfully Made



Winter 2013
Issue 1

Welcome to the first edition of "Fearfully and Wonderfully Made"

a newsletter sponsored by the Mental Wellness and
Recovery Task Force of the Southern Ohio Synod.

For questions or
comments and
additional resources

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Fearfully and Wonderfully Made will provide articles by specialist in psychiatry, psychology and theology. We will also report on developing mental wellness and recovery ministries in our synod, community events and workshops. Topics covered will have a three-fold approach—general mental wellness, information on mental illness, including ministry, and resources.

Mental Illness

Lately in the news there has been much discussion about mental illness and how we as a society have neglected this underserved portion of our population—60 million people. What is exciting, the term "recovery-support" is being used for the first time in mental illness. This shift in attitude is due in large part to: 1) acceptance of psychological sciences, 2) de-institutionalization is putting pressure on government funded agencies to think long-term rehabilitation, inspire and empower, and 3) advances in pharmacology (has made it possible for more people to manage their disease, find meaning, purpose and function in the world.

Ministry

In regards to ministry, effective pastoral and lay-leadership recognizes the strong links between physical, mental and spiritual wellness. Ministry can be both demanding and at times stressful, finding ways to de-stress, manage conflict and recognize the warning signs of possible depression can help to reduce burnout and make ministry more enjoyable.

Mental Wellness

As a faith community, it is our greatest hope that through this newsletter we can begin to de-stigmatize and de-mystify mental illness through educating clergy and congregations and highlighting the vital role faith plays in the healing and recovery process. As a church, it is important that we become a voice that helps to deconstruct the myths that still exist, reduce denial and secret keeping, reduce fear, and increase our compassion towards mental wellness. Most importantly, to embody Christ's mandate to love our neighbor by welcoming the stranger and caring for the sick.

*"I praise you,
for I am fearfully
and wonderfully
made".*

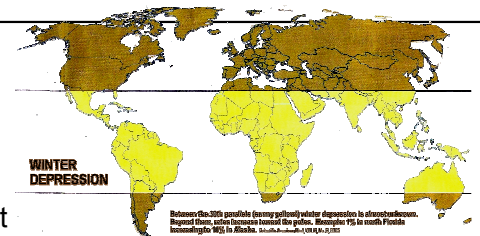
Psalm 139:14

Seasonal Affective Disorder (SAD)

By Mayo Clinic staff

Definition

Seasonal Affective Disorder (also called SAD) is a type of depression that occurs at the same time every year. If you're like most people with seasonal affective disorder, your symptoms start in the fall and may continue into the winter months, sapping your energy and making you feel moody. Treatment for seasonal affective disorder includes light therapy (phototherapy), psychotherapy and medications. Don't brush off that yearly feeling as simply a case of the "winter blues" or a seasonal funk that you have to tough out on your own. Take steps to keep your mood and motivation steady throughout the year.



WINTER
DEPRESSION

Between 10-20% worldwide (seasonally) winter depression is diagnosed. Highest rates, up to 100%, occur in the Arctic. About 10% in north Florida. Intermediate 10% to 20% in the U.S. and Europe.



**SAD disorder
can sap your
energy and
make you feel
moody among
other things**

Continued on page 2

'Coping With Office Politics'

Unless everyone agrees all the time where you work, you probably have to deal with office politics now and then. These strategies can help maintain your composure and keep your reputation intact when the politicking heats up.



Stay neutral. Don't get involved in a conflict when there is nothing at stake for you. When you take sides, you'll likely alienate someone.



Listen more than you talk. Sometimes people just want to be heard, and they don't need a response. Be a good listener and show genuine interest in what's being said.



Choose your gossip carefully and honestly. Be fully aware of the facts before you talk. Speak sincerely and honestly. Do not gossip or complain about your colleagues.

Show respect. This is possible even if you don't like someone. Some of the world's greatest adversaries are able to do this well, and you can too!



Put yourself in other's shoes. Always try to look at a situation from the point of view of others who are involved. Try to assume that almost everyone you work with means well.

When things aren't going the way you want, don't automatically blame others. Take responsibility for your role in the situation and do what you can to change it. Each of us is responsible for our reactions.

Article from Mayo Clinic "Embody Health" Feb 2013 pg.6

Resources:

www.elca.org
 www.southernhiosynod.org
 NAMI – National Alliance on Mental Illness-- www.nami.org
 NAMI - National Alliance on Mental Illness, Ohio – www.namiohio.org
 Pathways to Promise –
 www.pathways2promise.org
 Mental Health Ministries –
 www.mentalhealthministries.net

Seasonal Affective Disorder (SAD)

Continued from front page

DID

YOU

KNOW?



In rare cases, SAD has an opposite seasonal pattern, with depression occurring only in the summer months.

In some people with bipolar disorder, spring and summer can bring on symptoms of mania or a less intense form of mania (hypomania). This is known as reverse seasonal affective disorder.

Symptoms

In most cases, seasonal affective disorder symptoms appear during late fall or early winter and go away during the sunnier days of spring and summer. However, some people with the opposite pattern have symptoms that begin in spring or summer. In either case, symptoms may start out mild and become more severe as the season progresses.

When to see a doctor

It's normal to have some days when you feel down. But if you feel down for days at a time and you can't seem to get motivated to do activities you normally enjoy, see your doctor. This is particularly important if you notice that your sleep patterns and appetite have changed or if you feel hopeless, think about suicide, or find yourself turning to alcohol for comfort or relaxation.

Complications

Take signs and symptoms of seasonal affective disorder seriously. As with other types of depression, seasonal affective disorder can get worse and lead to problems if it's not treated. These can include:

- Suicidal thoughts or behavior
- Social withdrawal
- School or work problems
- Substance abuse

Treatment can help prevent complications, especially if seasonal affective disorder is diagnosed and treated before symptoms get

bad.

Prevention

There's no known way to prevent the development of seasonal affective disorder. However, if you take steps early on to manage symptoms, you may be able to prevent them from getting worse over time. Some people find it helpful to begin treatment before symptoms would normally start in the fall or winter, and then continue treatment past the time symptoms would normally go away. If you can get control of your symptoms before they get worse, you may be able to head off serious changes in mood, appetite and energy levels.

For more information please go to **Original Article:** <http://www.mayoclinic.com/health/seasonal-affective-disorder/DS00195>

This article is re-printed with permission from the Mayo Clinic.

The truest greatness lies in being kind, the truest wisdom lies in a happy mind.

From Dwelling to Well-ing

Bob Skipper
Mental Wellness and Recovery Task Force
Southern Ohio Synod ELCA
January 2013

From the blessing of being a pastor serving in the parish while also being a pastoral counselor in private practice, I wondrously continue to be awed by the healing and by the paining of parishioners and clients alike. Within both scenes the recovery of soul is discovered and so deeply longed for in a spectrum of life and death, joy and torment, awareness and despair, hope and depression, clarity and misery, light and darkness—where the risen Christ is present and the power of the resurrection yet prevails. Thank God.

I recall a certain man's breakout from his own tomb. He had faithfully, dutifully and rightfully postured himself as a servant of all in his life. But in his mind his service was never quite good enough or complete. He was more than anxious about loving himself even as God loved him. Some months later he was faced with a needed surgery which at first was an invitation in his mind to *dwelling* even deeper. His illness in some way confirmed not being "good enough". The care of his body, mind and soul as a child of God was wondrously nudging within him. The surgery was successful. He was virtually a different person when I next saw him. He was gleeful of the blessing of his discovery anew of self. Within this unfolding experience he rather boldly announced that his way of *dwelling* had moved to a place of "*well-ing*"—he had discovered a spring of healing, comfort and contentment. His self brooding was no longer serving him. He could now see himself still serving others, but that he had also now been served in full and complete grace as God's child.

I often feel that there are quiet whispers while sitting in the pews or gently holding the pastor's elbow of like stories with different circumstances and details, but, nonetheless, individuals living out their life's journeys. Scattered about are those working out their healing and recovery and who know and experience the unfolding story of being well—of "*well-ing*" into life.

Christ's great encounter and experience with us is that of healing in all of its forms—mind, body and soul—personal, relational and corporate as we are indeed the Body of Christ.. All part of the scandal of being human...and all part of the sacred in being human.
Thanks be to God.

We are all well-come to healing. Alleluia!

Faith
Is not hoping
God can
It is knowing
He Will



Close to home.....

Seasonal Affective Disorder (SAD)

There is a leader/member in our synod who has Seasonal Affective Disorder. This person shares, "I didn't know what was wrong with me. I just didn't want to go anywhere. I wanted to shut out life.

Everything was a chore. It exhausted me to engage...normal daily activities like work, going to the grocery...this would last from before Christmas to mid-March and after March, it feels like God turns on my energy again—I feel alive and ready to go! I was diagnosed with Seasonal Affective Disorder fifteen years ago. And now with treatment—sitting within the glow of a Verilux lamp every day— I feel normal again."





SynodFest Event

Mental Health and Recovery Task Force

Presents...

Equipping the Faith Community to Support Mental Health Recovery—June 7, 2013



Renee Kopache,
MS, CPRP

10:00 am – 11:00 am

Renee Kopache is coordinator of wellness management for the Hamilton County Mental Health and Recovery Services Board in Cincinnati, Ohio. She will discuss mental health recovery, as a process of change through which individuals improve their health and wellness. Phases of recovery include: hope, empowerment, self-responsibility and discovering a meaningful role in life. Renee is both passionate about recovery and an inspiring speaker.

11:00 am – 11:30

Task Force members will take questions and share directives on how to develop recovery support groups in congregations.

Renee Kopache, MS, CPRP is the coordinator of wellness management for the Hamilton County Mental Health and Recovery Services Board in Cincinnati, Ohio. She has assisted with numerous psychiatric rehabilitation and mental health recovery projects in Ohio and has conducted workshops, training, and keynote presentations throughout the United States. As an active member of the US Psychiatric Rehabilitation Association (USPRA), Renee is a member of the Certification Commission, the People in Recovery and Conference committees and the president of the USPRA – Ohio Board. She is the recipient of the USPRA Isaiah Uliss Person in Recovery Advocate Award. Renee is also a member of the American Psychological Association's Recovery Advisory Committee, and serves on various local and statewide committees/boards.

This is a FREE event open to all members of the Southern Ohio Synod.

If you have an article, upcoming community event or educational opportunity that you want to include in upcoming newsletters, please submit them to Pastor Dona Johnson, email ctk.donajohnson@sbcglobal.net.

ELCA Church Council adopts message on mental illness □ 12-71-MRC

CHICAGO (ELCA) -- The Church Council of the Evangelical Lutheran Church in America (ELCA) adopted "The Body of Christ and Mental Illness" as an official social message of the church when it met Nov. 9-11. The message lifts up the ministries of ELCA congregations, social ministry organizations and others and the urgent need for efforts to make a place for and with people who suffer from mental illness in the church and in society. One-half of U.S. citizens in their lifetimes will have a serious mental health condition but fewer than half will receive treatment, and the need for understanding and treatment is a crisis affecting the entire nation, according to the statement. A study in the church found that 16 percent of male clergy and 24 percent of female clergy suffer from depression. Ten years of extended overseas military campaigns have also resulted in a large population of combat veterans who are experiencing mental health issues and are prone to suicide. At the same time, "the veterans' health system is widely deemed inadequate to address the massive mental health needs among our troops," it states. The ELCA social message serves to encourage learning and moral discourse about mental illness and to shape the ELCA as a church that offers hope, prayer and support for people seeking treatment and support for caregivers and mental health professionals. □