

The Business Committee of the Thirty-Second General Synod has recommended this proposed resolution be sent to a Committee of the General Synod.

Designating the Mental Health Network of the United Church of Christ as a Historically Underrepresented Group

A Prudential Resolution

Submitted by: UCC Disabilities Ministries

Summary

As a Historically Underrepresented Group (HUG), the UCC Mental Health Network (MHN) can better help the UCC be a denomination that loves all, welcomes all, and seeks justice for all. As a HUG, the UCC MHN can empower persons living with mental health challenges and ensure that those impacted by them are not only heard, but also given a seat at the table and empowered with not only a voice, but with a vote. The UCC Mental Health Network welcomes the possibility of bringing their voice and vote to the General Synod.

Biblical, Theological and Historical Grounding

In Romans 15:7 we read, “Welcome one another as Christ has welcomed you. “ This welcome includes everyone. However, as in the parable of the Great Banquet, those who were invited with compassion to come in and sit at the table were those who were on the margins of society. They are the ones who are the good news people Jesus embraces as he hosts the meal.

UCC congregations are called to be witnesses and embodiments of the Kindom of God, which Jesus came to proclaim, to live, and into which we are invited to participate. This Kindom points to the hope and vision that all people, including those affected by mental illnesses, will live fully, will live peaceably with justice, and will love and be loved. Jesus came proclaiming that the “Kindom of God has come near.” (Matthew 3:2) His life was the embodiment of that Kindom into which everyone is invited.

In 1995, the General Synod passed the resolution: “Calling the People of God to Justice for Persons with Serious Mental Illnesses (Brain Disorders).” Over twenty years later, we are still seeing and experiencing the fallout of the deinstitutionalization that took place decades ago of persons who were in state-run mental institutions and asylums. The promised funding for better community mental health care following the closures of state hospitals has not materialized.

As stigma diminishes, more people with mental illnesses will seek and accept treatment, and as they do so, the population in our jails, which have become our nation’s de facto mental hospitals, will decrease. Our homeless population, with its high proportion of people living from untreated mental illnesses, should also diminish. People with mental illnesses will feel less isolated and shunned and will live longer, healthier, and more fulfilling lives.

The potential for social change is vast. There are 5,000 UCC congregations, each filled with

44 caring individuals. If we raise awareness among these UCC members and help them expand their
45 compassion for people with mental illnesses and their families, we will be sowing the seeds for a
46 more just and loving world, as Jesus himself demonstrated for us. Our members will become a
47 vanguard, an example for their neighbors and coworkers to follow. As more awareness shines on
48 the brokenness of the mental health system, proposals for appropriate funding and better policies
49 will be brought to the legislative process.

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51 As a HUG, the UCC MHN can amplify the voices of those living with mental illnesses, brain
52 disorders, and substance use disorders, helping the denomination and its congregations break the
53 silence on mental illness, becoming Welcoming, Inclusive, Supportive, and Engaged
54 communities that shine as beacons for those who have become marginalized and stigmatized.

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56 The United Church of Christ Mental Illness Network originally arose within the United Church
57 Board for Homeland Ministries (UCMHM) in 1993 with the goal of increasing support to
58 individuals and families living with mental health challenges and reducing the stigma
59 surrounding mental illnesses, brain disorders, and substance use disorders. The Network was re-
60 formed in 2009 as the United Church of Christ Mental Health Network (UCC MHN) and
61 collaborated with the United Church of Christ Disabilities Ministries (UCCDM) to promote the
62 inclusion of individuals with physical disabilities and mental health challenges into all
63 expressions of the Church through five national “Widening the Welcome, Inclusion of All”
64 conferences.

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66 In 2015, following the UCC Board of Directors’ recommendation, the UCC MHN established
67 itself as an independent 501(c)3 non-profit organization and became an affiliated ministry in
68 ecclesiastical covenant with the national setting of the UCC. That same year, the UCC MHN
69 brought the WISE (Welcoming, Inclusive, Supportive, and Engaged) Resolution to General
70 Synod. It was adopted, and the UCC MHN created a ten-step process by which UCC
71 congregations, associations, and conferences can become WISE for Mental Health, offering
72 radical belonging and mental health justice advocacy with individuals and families living with
73 mental health challenges. Once a congregation, association, or conference completes this
74 process, the UCC MHN nationally recognizes it as WISE for Mental Health. To help all
75 expressions of the UCC better understand mental health challenges and our call to become WISE
76 communities of faith, the UCC MHN has held five one day conferences on “WISE
77 Congregations for Mental Health” across the country. Videos from these conferences, new
78 resources for congregations, and links are provided on the UCC MHN website [www.mhn-](http://www.mhn-ucc.org)
79 [ucc.org](http://www.mhn-ucc.org). As of October 2018, ten congregations across the country and the UCC Florida
80 Conference have become certified as WISE for Mental Health.

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82 The MHN strongly advocates for persons affected by brain disorders and mental health
83 challenges at any point in their lives, including those that:

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85 ● Live with a diagnosed mental illness, other brain disorder, or substance use disorder with
86 their associated stigma and need for spiritual, social, medical/psychotherapeutic, and
87 economic support
88 ● Are currently living or in a relationship with a family member, friend, or member of their
89 congregation who has a diagnosed or undiagnosed brain disorder which affects their own

- lives and community in myriad, often challenging ways
- Have had a mental health challenge themselves, or in their family in the past, the consequences of which may include developmental, economic, social, and other life challenges
 - Will experience a mental health problem or disorder in the future, which they and those around them will be unprepared for due to their lack of mental health education and knowledge about resources.

MHN's work is essential as pervasive stigma continues to surround people who have brain disorders, such as a mental illness or substance use disorder, rendering them, their families, and their friends silenced and invisible within the Church and the larger society.

According to the World Health Organization, one in four people in the worldⁱ—between 450 and 500 million individualsⁱⁱ—lives with a mental health challenge in a given year, making these brain disorders among the leading causes of ill-health and disability worldwide. Mental illnesses, brain disorders, and substance use disorders cut across all national, racial, ethnic, gender, sexual identity, economic, and religious lines. In the United States, one in twenty five people lives with severe mental illness per the National Institute of Mental Healthⁱⁱⁱ, twenty-five percent of people who are homeless living with mental illness according to the National Coalition for the Homeless^{iv}, and thirty percent of women who are jailed are living with a mental illness.^v Yet, mental illnesses are treatable, and treatment success rates exceed those for illnesses like heart disease and cancer.^{vi}

Tragically, those who do seek mental health services are frequently unable to find affordable and effective help. Our public mental health system, which for years served as a safety net for those with the most serious brain disorders, is frayed to the breaking point. The public mental health system is severely hampered by lack of funding. In almost every state, a dearth of crisis evaluation centers; insufficient psychiatric beds to serve the number of patients needing hospitalization; the absence or inadequacy of mental health services in prisons and jails; inadequate efforts to identify children who are experiencing mental disorders; and laws that prevent involuntary treatment for people who are profoundly ill condemn those with brain disorders and mental illnesses to untold anguish. Unfortunately, repairing our fragmented mental health systems and erasing stigma are not easy tasks. Effective advocacy and affecting attitudinal change takes sustained effort by individuals and by faith communities.

Thus, those the UCC MHN represents have been underrepresented in the UCC because of the societal stigma around mental health challenges. To be the Church means to include all voices. The MHN brings a voice that the reality of stigma often silences. To be affirmed as a Historically Underrepresented Group (HUG) would strengthen the UCC MHN's ability to encourage, support, teach, and advocate for inclusion and mental health justice in our faith context.

The Text of the Resolution

WHEREAS the Twenty-Second General Synod adopted the "Calling the People of God to Justice for Persons with Serious Mental Illnesses (Brain Disorders)" and the Thirtieth General Synod adopted the "Developing Welcoming, Inclusive, Supportive and Engaged (WISE)

Congregations for Mental Health,” and

WHEREAS since 1993 the UCC Mental Health Network (once known as the UCC Mental Illness Network), has faithfully served all expressions of the UCC, promoting mental health and the Welcome, Inclusion, Support, and Engagement (WISE) for the millions of individuals and their families living with mental health challenges, brain disorders, and substance use disorders into the Body of Christ, the Church, and the larger society through education, resources, support, programs, five conferences with the UCC Disabilities Ministries, and through its own WISE Congregation for Mental Health Conferences, and

WHEREAS, the importance of the UCC Mental Health Network’s work has been recognized by the United Church of Christ Justice and Local Church Ministries through a newly created position in the national setting for a Minister for Disabilities and Mental Health Justice that liaises equally with the United Church of Christ Disabilities Ministries and the United Church of Christ Mental Health Network, and

WHEREAS, the UCC Mental Health Network's work furthers inclusion and access to all people within the United Church of Christ and the larger society in ways similar to United Church of Christ Disabilities Ministries, a recognized Historically Underrepresented Group of the United Church of Christ, but the Mental Health Network and those it serves do not have a voice or a vote at the General Synod, and

WHEREAS, the United Church of Christ Disabilities Ministries has voted to support this request.

THEREFORE, BE IT RESOLVED, that the Thirty-Second General Synod of the United Church of Christ recognizes that one in four people across the world experience some variety of a mental health challenge or brain disorder ~~each year~~during their lifetime, and one out of ~~seventeen~~25 people live with a severe mental health illness in the United States^{vii}; ~~but,~~ sStigma within the Church and the larger society has muted their voices and their experiences, rendering them historically underrepresented in the United Church of Christ.

LET IT BE RESOLVED that the Thirty-Second General Synod of the United Church of Christ recognizes the United Church of Christ Mental Health Network as a Historically Underrepresented Group of the United Church of Christ and directs the United Church of Christ Board to take the necessary actions to incorporate the Mental Health Network into the Historically Underrepresented Groups listings and access.

FUNDING

The funding for the implementation of the Resolution will be made in accordance with the overall mandates of the affected agencies and the funds available.

IMPLEMENTATION

The Officers of the Church, in consultation with appropriate ministries or other entities within the United Church of Christ, will determine the implementing body.

ⁱ “The World Health Report 2001 - Mental Health: New Understanding, New Hope,” World Health Organization, July 29, 2013, 19, accessed December 21, 2018, https://www.who.int/whr/2001/en/whr01_en.pdf.

ⁱⁱ Abhinav A. Shah and Richard H. Beinecke. “Global Mental Health Needs, Services, Barriers, and Challenges.” *International Journal of Mental Health* 38, no. 1 (2009): 14-29. doi:10.2753/imh0020-7411380102. The number of individuals around the world impacted by a brain disorder is now stated as between 450 to 500 million individuals as population has increased since WHO's original report in 2001. An additional citation was made to a more recent article, “Global Mental Health Needs, Services, Barriers, and Challenges,” backing up this statistic.

ⁱⁱⁱ “Mental Illness.” National Institute of Mental Health, November 2017, Accessed December 21, 2018. https://www.nimh.nih.gov/health/statistics/mental-illness.shtml#part_154785.

^{iv} “Mental Illness and Homelessness.” National Coalition for the Homeless. 2009. Accessed December 21, 2018. https://www.nationalhomeless.org/factsheets/Mental_Illness.pdf.

^v Lisa Krantz Press/San Antonio Express-News/Zuma. “The Mental Health Crisis Facing Women in Prison.” The Marshall Project. May 25, 2018. Accessed December 21, 2018. <https://www.themarshallproject.org/2017/06/22/the-mental-health-crisis-facing-women-in-prison>.

^{vii} “The World Health Report 2001 - Mental Health: New Understanding, New Hope,” World Health Organization, July 29, 2013, 19, accessed December 21, 2018, https://www.who.int/whr/2001/en/whr01_en.pdf.

May 11, 2019: Correction to statistic in line 106