

Breaking the silence about suicide

“When the church couldn’t talk about suicide or mental illness, it felt like God couldn’t either.”

[Celeste Kennel-Shank](#) interviews [Talitha Arnold](#)

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Talitha Arnold. Photo by Clay Ellis.

Talitha Arnold, senior minister of the United Church of Santa Fe, New Mexico, co-leads the Faith Communities Task Force for the National Action Alliance for Suicide Prevention. The alliance is launching a national campaign for mental health and suicide prevention, starting with a [National Day of Prayer for Faith, Hope, & Life](#) the weekend of September 8-10.

What is the National Action Alliance for Suicide Prevention?

It is a public-private partnership started in 2010 by the U.S. Departments of Health and Human Services, Defense, and Veterans Affairs, along with various national mental health and business organizations.

What is the role of congregations in suicide prevention and mental health?

Studies show that persons seeking help for mental health issues will more often talk with faith leaders than therapists or psychologists. Research also shows that being connected to a community and knowing stories of hope are important factors in preventing suicide and fostering mental health. Faith communities offer such connection and hope.

Yet the discrimination people with mental illness often face can keep them from connecting with a faith leader or faith community. The historical belief that suicide was a sin is another obstacle. On the Weekend of Prayer, we can pray for our congregations to be places of understanding and welcome for those living with mental health issues.

We can also help break the deafening silence in many faith communities around mental illness and suicide. I know the impact of that silence first-hand.

In the aftermath of my father's suicide when I was a child, due to post traumatic stress disorder as a World War II veteran, my family never heard the words *mental illness* or *suicide* in church. When I was a first-year seminary student at the funeral of a professor's wife who died by suicide, the word was never mentioned in the service. The first sermon I heard on mental illness or suicide was the one I preached as a young associate minister 35 years ago.

When the church couldn't talk about suicide or mental illness, it felt like God couldn't either.

Can you give some examples about how congregations are focusing on caring for people with mental illness and seeing some good outcomes?

People approach this in a lot of different kinds of ways. It doesn't have to be a full-blown mental health ministry; it can be lifting up people in prayer who are living with depression or schizophrenia, and those who care for them. It doesn't have to include naming them.

At my congregation during Advent, we often invite in therapists and counselors from a mental health center to talk about getting through the holidays. We try to reach out and make partnerships with mental health professionals in the community.

Another way is to think about the transitions and life changes that can sometimes be very difficult for people. We can think about pastoral care from the standpoint of education and group work rather than only one-on-one. For example, we have a group for recently retired people. We don't specifically label it a mental health group. These kinds of gatherings allow people to share with one another what they are going through.

We also include mental health in our youth initiation program, including recognizing warning signals for suicide and identifying people the youth can trust. It involves making connections between generations, with the older adults in the congregation. The community of faith offers narratives of hope from our biblical tradition, and it also offers narratives of hope from the congregation itself.

The intention is not to add one more thing for clergy and congregations. It's possible to build on the strengths the church already has and to find the gaps.

What resources is the campaign offering to equip clergy and congregations?

This initiative brings together progressive and conservative Christians, Jews, Muslims, and other faith communities, including faith leaders from many settings—military chaplains, congregational clergy, lay leaders, pastoral counselors, women religious, and professors. We collaborated to [offer multi-faith resources](#), including prayers to say at services.

The sermon starters that are on the website can be useful in suicide prevention, from the standpoint of being stories that show how people overcome adversity and how God is still present in their lives.

One of the things that we run into, not only across traditions but within denominations, is the notion that mental illness results from a lack of faith. We pray for people with cancer and sometimes they still die. We usually don't say that they didn't have enough faith. It should be the same kind of approach to mental health issues. To try to overcome that idea in whatever way possible is a worthwhile goal.