READY FOR A THEOLOGY OF THE MIND?
FAITH RESPONSE TO THE MENTAL HEALTH CRISIS

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Introduction

Let us consider some emblematic scenarios encountered by clergy, pastoral workers, and ordinary parishioners in various settings in the Philippines. In a rural parish, before the Consecration at Mass, a barefoot, scantily clothed man approached the altar with hands holding aloft a sharp bolo. The worshippers readied themselves to scamper out of the building. The priest stopped his ritual, met the man calmly at the foot of the altar, and, speaking kindly, convinced him to drop his weapon there. Then he led him courteously to an empty pew to join the community. The priest later learned that the man was a poor farmer from the barrio who had been through a distressing experience he could not handle.

In an affluent city parish, as soon as the priest took his seat at the presider's chair for the start of the Liturgy of the Word, an old lady in her formal dress and wide-brimmed hat ascended the altar and sat beside the priest. She gazed at the people with a smile, nodded approvingly at the readings, and started a small talk with the priest. She took her seat in a pew only after the priest convinced her to do so. The parishioners treated her with respect, aware that this widow had suffered immense loss in the death of loved ones, her husband through sickness, and her daughter through suicide.

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It is a running joke among priests that for every parish in the country, expect a mentally troubled person to hang out, if not to beg, then perhaps to create a scene to be noticed. Mentally troubled persons seem to find the ambience at a church a safe and welcoming place where they will not be ostracized, feared, or disdained. While this may not always be the case, depending on the attitude of the priest or the security personnel, many ordinary parishioners express concern and show compassion to such persons.

People with obvious neurotic or psychotic tendencies are easily identifiable when they enter our churches. What goes unnoticed are the many people who go to Mass or to pray in silence with invisible internal emotional or psychological battles. In fact, it is not a "we" and "they" situation when it comes to the present and pervasive plague of mental health issues.[1] No one is considered immune to the experience of psychological weakness or vulnerability. Some people may have full-blown mental illness, but all human beings, theologically speaking, are psychologically wounded by the effects of original sin and by the imperfection attendant to being fragile creatures in need of Christ's redemptive grace.[2]

In tackling the issue of mental health in the church, it is therefore important to include real experiences of struggles and not mere theoretical discussions, creating a distance and promoting a stance of superiority or condescension by

1. Daniel Horan, "Australian Bishops Get It Right on Mental Health," *National Catholic Reporter*, October 28, 2020, https://www.ncronline.org/opinion/faith-seeking-understanding/australian-bishops-get-it-right-mental-health (accessed on May 12, 2023).

2. Bishops of California, "A Pastoral Letter from the Bishops of California on Caring for those who Suffer from Mental Illness," *California Catholic Conference website* May 1, 2018, https://cacatholic.org/resources/mental-health/hope-and-healing/ (accessed on May 29, 2024). Hereafter "A Pastoral Letter."

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those who do not suffer the same. The mentally afflicted are full members of the Body of Christ. People dealing with such issues are to be found within our faith communities, religious organizations, rectories, monasteries and convents, parochial schools, parish ministries, and among Catholic families, church servers, and leaders and superiors, including priests and bishops.[3] Even the pastors who primarily attend to the needs of their flock know that they are "wounded healers."[4]

This paper intends to explore the exigency and the viability of the church's deeper awareness and involvement in the mental health issues affecting many Filipinos today. The church has well-developed theoretical and pastoral strategies regarding the theology of the body, human dignity, or human solidarity, and we are comfortable in discussing and presenting such themes, as well as formulating programs based on the thoughts and reflections derived from them. But what about a "theology of the mind,"[5] an attempt at finding a balance between the spiritual and practical, between the religious and psychological, between faith and science, at the service of those who suffer invisible torments that affect their relationship with God and with other people, those who hope that through their faith community they can find an answer, and even those whose wounds can be traced back to the church or to their challenging experience of religion? How should the church respond to this challenge?

3. See Mary Farrow, "'I couldn't Fix Myself': Bishop Conley opens up about mental health recovery," *Catholic News Agency* November 14, 2020, https://www.catholicnewsagency.com/news/46589/i-couldnt-fix-myself-bishop-conley-opens-up-about-mental-health-recovery (accessed on June 1, 2024).

4. Bishops of California, "A Pastoral Letter."

5. Mary Rezac, "Lessons Learned About Catholics with Mental Health Struggles," *Catholic News Agency* July 11, 2016, https://cruxnow.com/church-in-the-usa/2016/07/lessons-learned-catholics-mental-health-struggles (accessed on May 13, 2024).

Mental Health Situation in the Philippines

In these past few years, one of the most effective disseminators of the plight of the mentally ill and the general situation of mental health in the country is a television program that features the existential dilemma of those grappling with mental illness and the families that improvise drastic and unconventional remedies in their desire to alleviate the pain of their loved ones. Since the program is followed by many people nationwide on television, and worldwide on an online video platform, its videos reveal the extent of ignorance and poverty and the culture of shame, fear, and taboo that characterize the normal Filipino responses to the escalating incidence of mental health cases and that militate against a proper way of addressing this problem. The following examples recount two stories broadcast in the program.

In its June 26, 2022 episode, *Kapuso Mo, Jessica Soho* (*KMJS*) recounted the story of "Miguel," from Quezon province.[6] At the age of twenty-three, the man has been living alone in his grandmother's abandoned and dilapidated house. He was not only confined to this place since the age of fifteen, but also shackled by heavy metal chains on his ankle. It all began when the youth exhibited violent behavior, endangering the safety of his family and neighbors and harming himself during violent mood swings. His mother, the only one able to care for him, quickly moves out of harm's way when, after having been fed or bathed, Miguel reciprocates with curses, blows, and kicks.

Returning home from a labor contract in a cornfield, Miguel showed excessive fear of being killed by imaginary assailants. From this paranoia, Miguel's condition led to more

6. Jessica Soho, "Lalaking Walong Taon Nang Nakakadena, May Pag-asa Pa Kayang Makalaya?," *Kapuso Mo, Jessica Soho*, *GMA Public Affairs*, (June 26, 2022), https://www.youtube.com/watch?v=5_dvciqF5Jg (accessed on May 13, 2024). Henceforth KMJS Video 1.

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hallucinations and aggression. Being a threat to others, his family decided to restrain and chain him like an animal. Due to their poverty and ignorance, Miguel was never clinically diagnosed, although it was widely believed that his situation stemmed from drug abuse. When, finally, through exposure on the television show, Miguel was released from his rusty metal chains and examined, the doctors discovered that Miguel was suffering from malnutrition, schizophrenia, hallucinations, delusions, and disorganized behavior.

On October 27, 2023, the show featured the experiences of a 71-year-old father and his 22-year-old daughter, "Angela," from Lupon, Davao Oriental.[7] Angela is the only child of the poor farmer Rosalino and his now deceased wife. At the age of two, Angela began to show unusual hyperactivity that endangered her safety, a lack of comprehension, and an inability to learn. The parents decided to tie her foot with a cloth and imprison her in a tiny room to prevent her from wandering away. Like "Miguel," she was only seen by doctors after she was rescued from her confinement following the airing of her story, twenty years after she was initially bound and hidden. Doctors found that she has intellectual disability, malnutrition, and seizure disorders.

Both "Miguel" and "Angela" could not, by now, be sufficiently treated in the local hospitals, as their advanced psychiatric conditions needed referral to higher mental institutions. However, these institutions, too costly and too far from home, are not within the reach of many ordinary Filipinos who struggle economically and socially.

7. Jessica Soho, "Babae, Mahigit 2 Dekada Nang Iginapos Ng Sarili Niyang Ama," *Kapuso Mo, Jessica Soho*, *GMA Public Affairs* (October 17, 2023), https://www.youtube.com/watch?v=AWgLd5lzyQE (accessed on May 13, 2024).

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These media exposés on "Miguel" and "Angela" vividly convey the situation of the majority of those with mental maladies, especially from the remote areas. And while these examples typify the acute cases, there are untold stories of the less noticeable ordeals of those with "depression, schizophrenia, bipolar disorder, obsessive compulsive disorder, panic disorder, post-traumatic stress disorder, or borderline personality disorder,"[8] the ailments that form part of a long list of mental health aberrations.[9]

The Department of Health (DOH) estimates that about 3.6 million people are afflicted with mental, neurological, and substance use disorders, for whom services in the Philippines are limited and unequal due to cultural or sociological factors and a lack of available resources and facilities.[10] There is very little accurate and updated epidemiological data on mental health disorders in the country.[11] However, some important data have been sourced through the support of the World Health Organization (WHO). A consistent increase in suicide rates, higher in males than in females, has been noted in the past years' surveys by both private researchers and government agencies.[12] It is not the goal of this paper to delve into the

8. Anna Weaver, "How Catholics Struggle with Mental Illness," *US Catholic website,* January 11, 2010, https://uscatholic.org/articles/201001/through-a-glass-darkly-how-catholics-struggle-with-mental-illness/ (accessed on May 12, 2024).

9. "Alphabetical List of Mental Disorders," *National Health Center of America* (no date), https://mentalhealthcenter.com/alphabetical-list-of-mental-disorders/ (accessed on June 13, 2024).

10. "Mental Health Crisis a Rising Epidemic in PH' – Experts," *Philippine News Agency* October 9, 2023, https://www.pna.gov.ph/articles/1211404 (accessed on May 31, 2024).

11. John Lally, John Tully, et al., "Mental Health Services in the Philippines," *BJPsych International*, vol. 16 no.3 (August 2019), https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6646847/ (accessed on May 31, 2024).

12. Ibid.

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alarming statistics of this phenomenon, which can be easily found in veritable medical research.

The executive summary of a recent WHO report will give a global picture of the national situation.[13] The general situation describes the state of the national government's mental health awareness, efforts, and actions. These include the following observations: "Mental health represents an estimated 2.65% of the health budget in the Philippines, but most of the funds are used to sustain long-stay psychiatric hospitals; 60% of primary care clinic patients have at least one mental, neurological and/or substance use condition; for every 200,000 people in the Philippines there is only one psychiatrist and one psychiatric nurse to provide professional mental health care. There is only one psychologist per every one million people; the Philippines supports four large psychiatric hospitals, 46 psychiatric inpatient units, and 29 outpatient mental health facilities; 69% of Local Government Units (LGUs) have trained health providers in WHO mhGAP; and 14% of the LGUs have trained sta on mental health and psychosocial support (MHPSS) disaster preparedness."[14]

While the report acknowledged strong points in the government's program for mental health, like having a national legislation, strong political will for implementation, the training of workforce, and the existence of a public information system coupled with data collection and analysis, even greater challenges were also noted. The challenges were identified as: "low help-seeking behavior by people experiencing mental health conditions given high stigma and misunderstanding; lack of

13. "Philippines: WHO Special Initiative for Mental Health," *World Health Organization* 2022, https://www.who.int/initiatives/who-special-initiative-for-mental-health/philippines (accessed on May 31, 2024).

14. Ibid.

insurance coverage for mental health outpatient services; lack of mental health specialists in provinces to supervise mental health being managed through in primary health care services; and 20,000+ primary health care facilities managed through 2,590 district health bureaus in the Philippines (which) makes the assurance of quality of services and equitable resources particularly challenging."[15]

Dr. Joan Mae Rifareal, a fellow at the Philippine Psychiatric Association, said there are only about 500-600 board-certified psychiatrists in the country. At the same time, the World Health Organization recommends ten professionals for every 100,000 people. Furthermore, there is a lack of mental health facilities, and hospitals are very costly. While low-risk conditions can be treated in hospitals, there are not enough institutions for the medium or high-risk cases.[16]

A life coach and mental health advocate, Dulce Marie Saret, shared another crucial factor in mental health deficiencies in the Philippines, compounding the economic and institutional difficulties already mentioned. It has to do with the stigma around mental health, which, though universally prevalent, is exacerbated by Filipino cultural mores.[17] Sufferers are ridiculed and bullied by jokes and mean comments. Others are chided for excessive emotionality and encouraged to put up a strong façade, pray hard, and solve their problems alone. And families of those who go through mental issues consider it a shame to publicly acknowledge a relative's illness, fearing the loss of honor in the community. All these contribute to the ongoing

15. Ibid.

16. KMJS Video 1.

17. Dulce Marie Saret, "Mental Health and Toxic Filipino Culture," *Rappler*, October 30, 2023, https://www.rappler.com/voices/ispeak/opinion-mental-health-toxic-filipino-culture/ (accessed on May 31, 2024).

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misperception and insensitivity that plague our society's attitudes and approaches to the phenomenon of mental health today. A lingering and imposing stigma overruns the open and urgent search for mental health treatment and healing.

In today's Filipino society, through conventional and social media, frank and honest conversations on mental health are happening, thanks to the initiative of institutions, advocacy groups, and enlightened individuals. However, the crucial task is to continue pursuing optimistic views and vigorous programs that address the insufficiency of facilities and personnel, the high cost of treatment, and the negative impact of cultural pressures.

Church Teachings on Mental Health

The Catholic Church has an outstanding historical reputation for compassion, concern, and care for the sick at every time and place. It stems from the Lord Jesus Christ's ministry and mission to his disciples (Mt 4:23 and Mt 10:1),[18] which blossomed into an expression of concrete spirituality and pastoral ministry through the centuries. In our time, the Compendium of the Social Doctrine of the Church situates the solicitude for health care as part of the demand for the promotion of respect, integrity, and fundamental rights of all people.

The Compendium states: "These demands concern above all the commitment to peace, the organization of the State's powers, a sound juridical system, the protection of the environment, and the provision of essential services to all, some of which are at the same time human rights: food, housing, work, education and access to culture, transportation, basic health

18. See also Bishops of California, "A Pastoral Letter," no. 1.

care, the freedom of communication and expression, and the protection of religious freedom."[19]

Upholding the plight of the poor and the marginalized, the Church proposes the principle of the universal destination of goods, affirming within this context the primacy of the preferential option for the poor. This exercise of Christian charity and the assumption of social responsibility, "cannot but embrace the immense multitudes of the hungry, the needy, the homeless, those without health care, and, above all, those without hope of a better future."[20]

Scriptures and Mental Health

Focusing on the theme of mental health, a return to the Biblical font promises to be a great resource in identifying human feelings, emotional turmoil, pronounced anxiety, and even depressive and suicidal tendencies of major personages who encountered God in their troubled state and to whom God, in turn, manifested prodigious patience, sympathy, love, and healing.[21] It all started with Jacob, who wrestled with an angel of the Lord (Gen 32:22-32). After struggling with this mysterious creature through the night, the angel christened him Israel, which means, "he struggled with God." He thus became the patriarch, the father of a people who would continue the

19. Pontifical Council for Justice and Peace," Compendium of the Social Doctrine of the Church," *Vatican Archives*, 2004, no. 166, https://www.vatican.va/roman_curia/pontifical_councils/justpeace/documents/rc_pc_justpeace_doc_20060526_compendio-dott-soc_en.html (accessed on May 1, 2024). Henceforth "Compendium of Social Doctrine."

20. Ibid., no. 182.

21. Marcia Webb, "Toward a Theology of Mental Illness," *Journal of Religion, Disability, and Health*, Vol. 16 (2012): 21ff., file:///Users/fr.ramilmarcos/Downloads/2009.04.16_Weter_Lecture_Webb.pdf (accessed on May 13, 2024). This paper consulted the downloadable pdf version for the Biblical personages and mental health.

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struggle with God, with humanity, and with self, and like their patriarch, would overcome.[22]

The prophet Elijah, threatened by the evil queen Jezebel, ran for his life, experiencing not only fear but also despair. In deep sorrow, he asked God that he might die (1 Kgs 19:4). But the Lord instead provided him with food and encouraged him greatly. The prophet Jonah, who was reluctant to preach to the rebellious Ninevites and was resentful and uncomprehending of God's relinquishment of his wrath against this sinful nation, asked God to end his life (Jon. 4:4).

Naomi, a widowed Israelite left in a foreign land, labels herself "Mara," which means bitter, as she could not fathom the emptiness and calamities the Lord God allowed her to experience (Ruth 1:19-21). On top of all these is the image of Job, whose distressful experiences of loss, sickness, and verbal abuse by his friends, experienced psychological turmoil and had likewise wished for death (Job 10:18-19). It was in crying out to the Lord, however, that Job experienced God in a transcendent way and became far more blessed in the end.[23] These examples from the Old Testament do not provide a diagnostic case manual of mental health issues. Still, they show that God is aware of the interior suffering of his people and that he does not abandon them in their misery.

In the New Testament, as Paul enunciates, evidence of psychological despondency and struggle continue with the disciples. Feeling afflicted and crushed by his own and his companions' experiences during their voyage in Asia, the great apostle wrote about "despairing of life itself" (2 Cor 1:8-9) and was rescued only from this pit of hopelessness when they

22. Ibid.

23. Mark Thibodeaux, *God's Voice Within: The Ignatian Way to Discover God's Will* (Chicago, Loyola Press, 2010), p. 100.

surrendered to God and asked the help of the prayers of fellow Christians.

All the onus of psychological strain, stress, and distress encountered by God's people find its zenith in the life of the God Incarnate, Jesus Christ, prophesied to be "a man of sorrows" (Is 53:3). Not only did the Lord Jesus assume our humanity and all its vulnerabilities which he shared in – temptations, sorrows, grief, loss, fear, and anger. He also endured doubts about his mental soundness, as when his relatives suspected him of being crazy (Mk 3:21), and the Jews declared him mad or possessed (Mk 3:22; Jn 10:19-20). He experienced intense anguish in Gethsemane (Lk 22:44) and he felt despondency and abandonment on the cross (Mt 27:46). We can say that "Jesus is God, then, sympathizing with the human condition from the inside."[24]

In his moment of emotional pain, the Lord Jesus did not hesitate to turn to his friends for consolation (Mt 26:38). In his most vulnerable and weakest moment physically and mentally on the way to his Crucifixion, the Lord did not refuse the help of another person, as he allowed himself to rely on Simon of Cyrene who assisted him with the heavy cross.[25]

In his ministry, Jesus not only healed the sick's bodies but also calmed the raging interior storms and the unseen turmoil within people's hearts.[26] Thus did he return the dignity of a woman racked with guilt (Jn 8:10-11), consoled a widowed

24. Anthony Fisher, "Religion and Mental Health," *Catholic Archdiocese of Sydney*, December 8, 2019, no. 4, https://www.sydneycatholic.org/addresses-and-statements/2019/religion-and-mental-health-perth2019/ (accessed on May 12, 2024).

25. Daniel Imwalle, "Catholic Response to Mental Health Crisis," *St. Anthony Messenger*, May 2021, https://www.franciscanmedia.org/st-anthony-messenger/may-2021/a-catholic-response-to-the-mental-health-crisis/ (accessed on May 28, 2024).

26. Fisher, "Religion and Mental Health," no. 4.

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mother at the loss of her only son (Lk 7:13), assured an anxious centurion of his servant's healing (Lk 7:2-10), and acquiesced to a worried father's request for his dying son (Jn 4:46-54). Jesus assured lepers of a place in society (Lk 5:14) and transformed a self-harming demoniac into a man "clothed and in his right mind" (Mk 5:1-15). He proclaimed a mission of setting the oppressed free (Lk 4:18-19) and of healing every kind of sickness (see Lk 4 and Mt 8), including emotional and psychological ones.

Most importantly, the Lord Jesus made a countercultural claim in defiance of the common belief of the people (Jn 9:2). He declared that sicknesses were neither always our fault nor were they punishment for personal sins or for the wrongdoings of one's family (Jn 9:3). Jesus introduced the face of the God who does not delight in punishing but rejoices in creating, sustaining and caring for people with unconditional love because they were created in his own image and likeness (Gen 1:26). For Jesus, God was not a law to be obeyed but a gracious presence who invites his children to a loving relationship, to a holy fear and not a blind, legalistic one.[27]

The Magisterium and Mental Health

The Church, through the universal magisterium of recent popes and through the efforts of some bishops or groups of bishops, has issued declarations of support for people battling mental illness, for the attention due to them, and for those who provide them with medical, therapeutic, and personal care. In 1996, St. Pope John Paul II, addressing the participants of an international conference for the pastoral assistance of health care workers answered the question often posed regarding mental health patients. He said: "Thus the response to the

27. Ronald Rolheiser, *Wresting with God: Finding Hope and Meaning in Our Daily Struggles to Be Human* (New York: Image Books), 2018, p. 73.

theme's question is clear: whoever suffers from mental illness 'always' bears God's image and likeness in himself, as does every human being. In addition, he 'always' has the inalienable right not only to be considered as an image of God and therefore as a person, but also to be treated as such."[28]

He asserted that there must be no fear of helping such people but responding actively to their situation should be considered a duty. For they are the poor referred to in the Gospel, to whom the kingdom of heaven belongs (Mt 5:3). Moreover, the Lord Jesus Christ did not only commiserate with and heal the sick, but also identified himself with all of them (Mt 25:36). In taking on himself all human suffering, the Lord Jesus also embraced mental afflictions. Thus, though difficult to imagine, the mentally ill, like all the sick, are configured to Christ and share in his redemptive suffering for humanity.[29]

Pope Benedict XVI dedicated his message for the 14th World Day of the Sick in 2006 specifically to people who experience mental disturbance, acknowledging this as a growing phenomenon that afflicts one-fifth of humanity and is becoming a real worldwide emergency.[30] The Pope identified the situations that exacerbate the plight of the mentally ill, including the prevalent loneliness, the breakdown in traditional sources of social support, and the tendency to marginalize the weak members of society. Even as he encouraged health care workers to ensure

28. Pope John Paul II, 1996, "Mentally Ill Are Also Made in God's Image," *EWTN*, December 11, 1986, no. 8, https://www.ewtn.com/catholicism/library/mentally-ill-are-also-made-in-gods-image-8863 (accessed on May 1, 2024).

29. Ibid. no. 7.

30. Pope Benedict XVI, *Message for the 14th World Day of the Sick*, Vatican Archives, December 8, 2005, https://www.vatican.va/content/benedictxvi/en/messages/sick/documents/hf_benxvi_mes_20051208_world-day-of-the-sick-2006.html (accessed on June 2, 2024).

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continuing care for the mentally ill, he lamented the lack or inadequacy of attention given to these people in many parts of the world, due to financial and manpower constraints and negative social regard for the sick.

It is perhaps the late Pope Francis, who positions awareness and a sense of urgency for the church's involvement in mental health to the level of both a pastoral and personal endorsement. The bishops of California quote him in their joint statement: "I have a dogmatic certainty: God is in every person's life... Even if the life of a person has been a disaster, even if it is destroyed by vices, drugs or anything else—God is in this person's life... Although the life of a person is a land full of thorns and weeds, there is always a space in which the good seed can grow."[31]

Calling attention to young people with mental health struggles, Pope Francis wrote in his 2019 post-synodal apostolic exhortation on the youth: "The desire to live fully and experience new things is also felt by many young people with physical, mental and sensory disabilities. Even though they may not always be able to have the same experiences as others, they possess amazing resources and abilities that are often far above average. The Lord Jesus grants them other gifts, which the community is called to recognize and appreciate, so that they can discover his plan of love for each of them."[32] The youth who grapple with physical or psychological resilience desire to live like the rest, endowed with potential but in need of recognition and support.

But perhaps the most compelling evidence of Pope Francis' support for mental health advocacy was his repeated admission

31. Bishops of California, "A Pastoral Letter," no. 1.

32. Pope Francis, *Post Synodal Apostolic Exhortation Christus Vivit*, *Vatican Archives* March 25, 2019 149, https://www.vatican.va/content/francesco/en/apost_exhortations/documents/papa-francesco_esortazione-ap_20190325_christus-vivit.html (accessed on May 31, 2024).

in various interviews that he, too, needed psychological assistance and that, in fact, he once sought to acquire it with the help of a medical expert.[33] As a Jesuit provincial in Argentina, therapy aided him against serious bouts with anxiety and stress, and in checking his impulsiveness in making decisions.

The Pope stressed the importance of priests gaining knowledge of psychological processes to help them address the concerns of the people they serve. While some priests acquire this familiarity through experience, he still recommends that they exert some effort in trying to study this science.[34] While the Pope encourages church personnel to be familiar with psychological processes for service, he is aware that some need this intervention for the purpose of self-care, as he did in the past.

In fact, many priests today need guidance and help from medical experts when they, too, succumb to the pitfalls of mental health struggles. In some countries, the church has noted an alarming trend of suicides among the clergy.[35] In the Philippines, such occurrences do happen. Still, they are not openly discussed due to cultural sensitivities and the customary practice of ecclesiastical secrecy, even though some news

33. Courtney Mares, "Pope Francis Says seeing a psychiatrist helped him with anxiety when he was younger, *Catholic News Agency,* February 27, 2021, https://www.catholicnewsagency.com/news/246651/pope-francis-says-seeing-a-psychiatrist-helped-him-with-anxiety-when-he-was-younger (accessed on May 1, 2024).

34. Ibid.

35. "The Problem of Suicide Among the Catholic Clergy: Alarm Raised Given the Increase in Some Countries," *Zenit,* July 3, 2023, https://zenit.org/2023/07/03/the-problem-of-suicide-among-the-catholic-clergy-alarm-raised-given-the-increase-in-some-countries/ (accessed on May 1, 2024). Henceforth, "The Problem of Suicide Among the Clergy."

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agencies report on these events with suspicion.[36] In 2024, Pope Francis spoke of his concern for the effective accompaniment to be given to priests themselves, for many are beginning to feel the pangs of loneliness and the loss of a sense of belonging in their personal life and pastoral mission. He called for a network of fraternal relations crucial in the ongoing formation and care of the clergy.[37] Under the burden of loneliness, fatigue, burnout, stress, and psycho-emotional fragilities, priests, too, weep.[38] The same challenge is felt among other church servants, including consecrated women.[39]

Under Pope Francis' watch, the document *Dignitas Infinita*, from the Dicastery of the Doctrine of the Faith, spoke against prevailing trends that transgress the dignity of the human person. Speaking of concrete instances of violations of human

36. See "Bicol Seminary Rector Found Dead," *GMA News Online*, July 30, 2010, https://www.gmanetwork.com/news/topstories/regions/197360/bicol-seminary-rector-found-dead/story/ (accessed on June 4, 2024); see also "Catholic Priest Found Dead in His Room, Due to Gunshots," *Agenzia Fides*, November 9, 2020, https://www.fides.org/en/news/68610ASIA_PHILIPPINES_Catholic_priest_found_dead_in_his_room_due_to_gunshots (accessed on June 4, 2024); see also "Priest Hangs Self in Church," *Pressreader* (August 30, 2020),https://www.pressreader.com/philippines/tempo-9gc1/20200830/281513638541264, (accessed on June 4, 2024).

37. Pope Francis Discusses Ongoing Formation of Priests, Vocation Promotion and Permanent Diaconate, *Zenit*, June 6, 2024, https://zenit.org/2024/06/06/pope-francis-discusses-ongoing-formation-of-priests-vocation-promotion-and-permanent-diaconate/ (accessed on June 13, 2024).

38. "The Problem of Suicide Among the Clergy" ; See also this incisive analysis: Giovanni Cucci, "Solitudine e Disagio Del Prete: Un Problema Strutturale?," *La Civilta Cattolica*, June 7, 2023, https://www.laciviltacattolica.it/articolo/solitudine-e-disagio-del-prete-un-problema-strutturale/ (accessed on June 13, 2024).

39. Ma. Ceres P. Doyo, "Without faith, I Would Have Ended My Life: A Nun's Journey Through Depression," *Inquirer.net*, October 1, 2019, https://lifestyle.inquirer.net/347156/without-faith-i-would-have-ended-my-life-a-nuns-journey-through-depression/ (accessed on June 4, 2024).

dignity, the document included instances of marginalization of those who endure conditions of impairment or disability. Thus, it called for the protection of people with physical or mental limitations from the effects of the "throw-away culture" that considers individuals with disabilities as societal rejects. The document clearly embodies the papal advocacy for the inclusion of all, especially the most vulnerable, in the life of both the society and the church. No human imperfection can erase the dignity willed and loved by God for every human person.[40]

Among the collective body of bishops, the Australian Catholic Bishops Conference (ACBC) undertook a noteworthy and laudable step by publishing in 2021 the document "To Live Life to the Full: Mental Health in Australia Today," in which they encouraged churches, governments, and all people to make mental health a priority.[41] Not only was it opportune at the time of the worldwide pandemic, but the document was also a trailblazer on many fronts.

The eminent theologian Daniel Horan described the fine features of the document.[42] He observed how the bishops adopted a stance of directness, honesty, and humility. They distanced themselves from the common "we" and "they" language used when dealing with the sick.[43] They also included

40. Dicastery for the Doctrine of the Faith, *Declaration Dignitas Infinita on Human Dignity, Vatican Archives*, March 3, 2024, no. 53 https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_ddf_doc_20240402_dignitas-infinita_en.html (accessed on March 19, 2024).

41. Mark Coleridge, "Foreword," in *To Live Life to the Full*, *Australian Catholic Bishops Conference Social Justice Statement*, 2020-2021, https://socialjustice.catholic.org.au/wp-content/uploads/2020/07/Social-Justice-Statement-2020-WEB.pdf (accessed on June 2, 2024), p. 2. Henceforth, the document will be referred to as Australian Bishops Statement.

42. Horan, "Australian Bishops Get It Right on Mental Health."

43. Australian Bishops' Statement, p. 8.

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personal testimonies of the mentally challenged. They engaged with the medical and scientific sectors in trying to find a pastoral solution to the problem. They went to great lengths to assure patients that their situation does not originate from moral failure, lack of faith, or weak resolve. The bishops also listened to young people as they shared the pressures they felt in living with real issues of mental health, drugs, stress in school, alcohol, and body image.[44]

Comparing this initiative with those of the American episcopate, Horan bemoaned the Americans' seeming indifference to this societal menace as a national college of bishops. In America, though, a few steps have been taken by individual bishops in their own locality,[45] and by some groups of bishops in their own regions, such as the joint pastoral statements in California[46] and New York.[47]

The Philippine Church and Mental Health

The Catholic Bishops' Conference of the Philippines (CBCP) has not published a pastoral letter or formal statement detailing the hierarchy's strategy in tackling the mental health challenge, reflective of this topic's minor status among the pressing concerns of the local church, following the argument

44. Australian Bishops Statement, p, 4ff.

45. James Conley, "A Future with Hope," *Diocese of Lincoln* May 2024, https://www.lincolndiocese.org/all-documents/statements/2331-bishop-conley-mental-health-pastoral-letter/file (accessed on June 18, 2024). This is a very personal and moving pastoral letter of Bishop Conley, detailing his own path to mental health wellness after his personal struggle with mental health issues. It was released in May 2024, to celebrate the month dedicated to Mental Health.

46. Bishops of California, "A Pastoral Letter."

47. "For I am lonely and afflicted," *New York State Catholic Conference*, 2014, https://www.nyscatholic.org/posts/for-i-am-lonely-and-afflicted (accessed on June 2, 2024).

of Daniel Horan above.[48] Statements regarding the subject come from the Episcopal Commission on Health Care (EPHC), given through interviews and press releases. The Commission has made repeated declarations of the bishops' concern for the mental health situation in the country.[49] It called for the establishment of diocesan and parish centers to help sufferers, with the necessary training of volunteers for primary counseling (especially in rural areas), assessment, and referral of individual cases to specialized health practitioners.[50]

The Commission has emphasized the importance of spirituality in response to the crisis,[51] maintaining that the clergy are in touch with the people's reality.[52] It said that the bishops recommend that parents reach out to parish priests in the event of their children's depression.[53]

This rather simplistic approach is countered by the experiences of people immersed in mental health crusades, as a

48. Horan, "Australian Bishops Get It Right on Mental Health."

49. "Church Official Seeks Stronger Action on Looming Mental Health 'Pandemic,'" *CBCP News*, February 11, 2021, https://cbcpnews.net/cbcpnews/church-official-seeks-stronger-action-on-looming-mental-health-pandemic/ (accessed on June 14, 2024); also Joseph Peter Calleja, "Catholic Bishops Tackle Rising Suicides in Philippines," *UCA News*, June 15, 2020, https://www.ucanews.com/news/catholic-bishops-tackle-rising-suicides-in-philippines/97667 (accessed on June 13, 2024).

50. Marielle Lucenio, "Philippine Catholic Church Official Calls for 'Collective Help' to Address Mental Health," *LICAS News*, July 15, 2020, https://philippines.licas.news/2020/07/15/philippine-catholic-church-official-calls-for-collective-help-to-address-mental-health/ (accessed on June 13, 2024).

51. Luis Angelo Sta. Maria, "CBCP Commission on Health Care Focuses on Spirituality in Addressing Mental Health Challenges," *The Roman Catholic Archdiocese of Manila,* September 14, 2023, https://rcam.org/8115-2/ (accessed on June 13, 2024).

52. Calleja, "Catholic Bishops Tackle Rising Suicides in Philippines,".

53. Ibid.

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Filipina actress and mother who lost her daughter to depression and suicide said in a documentary: "It is important that those who experience depression or anxiety to understand this malady. It is not treated simply by watching a funny film or by going to a priest. It cannot be simply cured by prayer because it is a sickness of the mind."[54] While most professionals accept a holistic approach, and faith or spirituality is recognized as a factor in healing, caution must be taken not to give the impression that the problem of mental health can be spiritualized or its treatment attributed primarily to faith.

The Commission's social media presence (Facebook) shows that among its manifold activities, it actively conducts a Mental Health Conference and Mental Health First-Aid Training in the dioceses.[55] However, there is no data available on social media on the frequency of the activity, on how many dioceses have welcomed it, or what projects were implemented on the ground after the conduct of the talks and trainings.

And despite the assurance of the Commission head of the Philippine bishops' collective support for mental health advocacy, only one diocese has an actual existing diocesan program for mental health, a fact that attracted international church media attention.[56] What started as a phone-in counselling

54. Shamaine Buencamino in Video, "Invisible (Full Documentary)," *ABS CBN,* May 27, 2024, https://www.youtube.com/watch?v=jWYQlmqsxZY&list=WL&index=56&t=1928s (accessed on June 13, 2024). The statement is here translated into English from its original Tagalog delivery.

55. CBCP Commission on Health Care, *Facebook Page*, https://www.facebook.com/profile.php?id=100064595473629 (accessed on June 1, 2024).

56. Robin Gomes, "Philippine Diocese Creates Mental Health 'Hopeline,'" *Vatican News*, 4 July 2020, https://www.vaticannews.va/en/church/news/2020-07/philippines-kalookan-diocese-covid-hopeline-mental-health-david.html (accessed on June 2, 2024).

service in the Philippine Diocese of Kalookan to help alleviate the feeling of isolation during the Covid pandemic lockdowns, the "Covid-Hopeline" has grown into the "Task Force *Salubong* (Encounter)," offering among other things, counselling, trauma therapy, and training for basic counseling, not only to mental health sufferers but also to rehabilitated drug users, families of extra-judicial killing victims, and the poor in the community.[57] The diocese's website provides details of the program, the brainchild of its bishop, the Most Rev. Pablo Virgilio David.

From the Catholic academe, a scholarly paper written by the University of Santo Tomas researchers, titled "A Proposed Pastoral Approach to Address the Surge in Suicide Cases in the Philippines During the COVID-19 Pandemic" was published in the Journal of Religion and Health, a Quartile 1 Scopus-indexed journal under Springer.[58] While professors Ivan Efreaim Gozum and Joselito Gutierrez centered on the study of suicide cases and only within the period of the pandemic, their proposals can offer fruitful considerations for church leaders and institutions contemplating a solid program for mental health assistance in general. The paper's conclusions can forge a healthy faith and science alliance in combatting this growing phenomenon by encouraging a collaborative relationship between church personnel and medical professionals.

57. see *Diocese of Kalookan website*: https://dioceseofkalookan.ph/ova_sev/salubong-rehabilitation-program-for-drug-defendents/ (accessed on June 2, 2024).

58. "How Church Responds to Spike in Suicide Cases During the Pandemic Spotlighted in New Scopus Publication," *University of Santo Tomas*, September 6, 2023, https://www.ust.edu.ph/how-church-responds-to-spike-in-suicide-cases-during-the-pandemic-spotlighted-in-new-scopus-publication/ (accessed on June 2, 2024).

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Conclusion and Recommendations

In view of the preceding focus on the urgency of the mental health crisis globally and locally, the examples from the Scriptures, and the contemporary reflections of key church personalities on this topic, the following concluding reflections hope to modestly provide an impulse for the Catholic Church in the Philippines as it considers its contribution in confronting this important issue. Grappling for a meaningful response to this societal pressing challenge, these last words hope to impart seeds for a continuing attempt to formulate a practical theology of the mind or of mental health.

Show the Compassion of Jesus

A major stumbling block in the treatment of mental health in the Philippines, aside from the socio-economic factors, is the cultural factor that is at the root of stigmatization. Filipinos live under a shame culture,[59] and shame descends on the imbalanced person who seems to be missing a mental ingredient.[60] People with mental health problems have long been bullied and ridiculed. Owing to ignorance, people consider them crazy, nervous wrecks, or just plain dramatic, and this was often indicated with the accompanying gesture of rotating the index finger around the ear or temple, signifying loss of orientation or ability. Families with members who have body-mind disharmony fear ostracism or dread losing their good name. Thus, the mentally disturbed member is not a source of pride, and if possible, should be hidden from sight.

The Church can improve people's perception of mental health by making mental health awareness part of its ministry

59. Leonardo Mercado, *Elements of Filipino Theology* (Tacloban City: Divine Word University Publications, 1975), p. 77.

60. Ibid., pp. 214-215.

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of proclamation, which is a very influential tool for personal and social change. Not only is God's Word replete with examples of compassion and care for the sick, but the Scriptures can be found illustrations of very real emotional and psychological tragedies involving God's chosen ones. The Lord Jesus gravitated towards those tormented in mind and spirit and worked to liberate them. If preachers and teachers of the Word take time to educate themselves with the basics of mental health, they can liberate the uncomprehending and misinformed about the nature of this sickness from their indifference, aversion, and fear.

It is not enough to tolerate the mentally ill person to loiter in the church or in the patio, or to give him or her alms or food. Through the church's ministry of teaching, the summons to consider the sick with respect, tenderness, and concern can become part of the ethos of the community. Instead of ridicule, the church can arouse the attitude of respect; instead of shaming, understanding; instead of avoidance, acceptance; instead of pity, concrete action for the healing and recovery of the mental sufferer. In our beginning stories, the priest who calmly approached the bolo-wielding farmer at Mass and the priest who treated the troubled widow with respect showed great examples for their congregation to follow. The mentally ill deserve to be treated with dignity as children of God.

Church leaders and workers can also start by being comfortable with their own struggles or experiences found in their families or circle of friends. A priest used to speak to his parishioners about his father's suicide, to the consternation of sensitive listeners. But in doing so, he identified with families that bore the stigma of similar tragedy. In Bible or faith sharing, ecclesial movements can encourage a deeper view of holiness and wholeness that encompasses the entire

person, not focusing solely on heavenly, spiritual, and abstract themes, but on the actual daily challenges people confront. Church fellowships can be real occasions when brokenness and vulnerabilities are seen as possibilities rather than as a *cul de sac*.

Even among Filipino clergy and religious, there is a hesitation or embarrassment in admitting their own need for emotional or psychological support. Some even fear being associated with a center that provides renewal and therapeutic programs that, in their view, make them appear hopeless cases or damaged goods.[61] It must be deeply consoling for lay people to hear priests share not only that they go to spiritual direction, but that they also meet with a counselor or therapist for their own well-being.

The Lord Jesus manifested his solidarity with humanity not only when he assumed human flesh, but also when he identified with the frailties of this imperfect nature. While the church cannot directly alter the socio-economic status of people, it can change perspectives and ways of viewing things. If the church can say to those with mental health battles, "It is good that you exist," then Catholics will respond to their afflicted brothers and sisters more compassionately.[62]

Proclaim the Healing Power of Jesus

Filipinos put a high premium on aspirations for and experiences of the power of divine healing. Though with high respect

61. See short description of the center that provides the programs here: Ivan Coelho, "Galilee Center, Tagaytay," *Musing*, November 16, 2016, http://ivocoelho.blogspot.com/2016/11/galilee-center-tagaytay.html (accessed on June 21, 2024).

62. Maggie Scotch Musso, "A Catholic Approach to Supporting Persons with Mental Illness," *McGrath Institute for Church Life*, October 6, 2020, https://mcgrathblog.nd.edu/a-catholic-approach-to-supporting-persons-with-mental-illness (accessed on May 27, 2024).

for doctors, many, especially the poor, consult herbalists, traditional doctors, and faith healers.[63] Not a few Catholics still bring their health concerns to church by doing novenas, making vows, and lighting candles. And these practices may be a good place to start. Advanced psychological insights now incorporate spiritual well-being among the effective pillars of mental health, and an increasing number of therapists are using a combined approach of faith-infused mental health techniques that resonate "with individuals for whom spirituality is interconnected with their mental well-being."[64]

The Catholic faith declares that the Lord Jesus Christ is the Divine Physician whose power continues to work in the world today through the church.[65] Like the first Christians, Filipino Catholics believe in the power of the Spirit to restore wholeness through faith, prayer, sacraments, and sacramentals. This explains the popularity of healing priests, healing Masses and healing services, healing prayer, healing oil, blessed cloths, and saints' relics.

Healing plays a crucial part in the teaching on the Kingdom of God.[66] It is a sign of the reign of God when the sick are healed and the dead are raised up. The Kingdom Jesus preached is a bringer and sustainer of hope that results in the healing of body and soul. Many of those who suffer mentally are on the brink of losing hope, which explains the rising incidence of both attempted and successful suicides. It is an imperative for the church today to disseminate hope in the minds and hearts

63. Mercado, *Elements of Filipino Theology*, p. 218.

64. Imwalle, "Catholic Response to Mental Health Crisis."

65. *Catechism of the Catholic Church* (Manila: Word and Life Publications, 1994), nos. 1503-1505.

66. See Jürgen Moltmann, *Jesus Christ for Today's World* (Minneapolis: Fortress Press, 1994), p. 12ff.

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of people. To do this, the church must enable people to embrace hope and discern between true and false hope.

True hope in the healing power of Jesus is trust in the power of God working through the natural means he provides. Thus, healing need not always be spectacularly supernatural in the biblical sense. A holistic healing perspective admits the importance of the physiological, psychological, and spiritual components that work together towards wellness. The church needs to assure people that it is not wrong to seek professional help for their physical and mental ailments, while continuing to deepen their faith in God, in themselves, and in the goodness of humanity.

Not a few Catholics today have developed a fascination with the growing ministry of exorcism in the church. While it is a valid and necessary ministry, not all problems are ostensibly attributable to evil spirits. Mentally ill people must not be dismissed as cursed, possessed, or enslaved by evil spirits, as untrained, pietistic, and reactionary minds may tend to do. With the popularity of exorcists today, there are reports made through informal interviews in this research that, in a few isolated instances in religious communities or houses of formation, mental disturbances are remedied by deliverance prayers rather than referral for psychological evaluation. Thankfully, competent, well-trained, and authorized Catholic exorcists can easily determine if the cases referred to them are better treated in hospitals.

True hope in the healing power of Jesus also involves faith in the gradual life processes that God instilled in the world. Scriptures speak of "hoping against hope" (Rom 4:18), which implies that this process requires patience and trust. Mental illness requires time and effort on the path to recovery. The church must clarify that faith is not a quick fix, and certainly

not an escape or shortcut from the demands of total healing. Some young Catholics with mental health troubles think that applying to seminaries and religious congregations will solve their problems, only to find out the contrary.

Like developing a life of prayer and spirituality, medical or therapeutic supervision demands patience and surrender. A genuine spiritual life takes a long time to achieve. A holistic wellness follows the same path. Thus, we must believe that God acts indirectly through the instrumentality of professional healers, who must labor through a protracted period before declaring treatment has been achieved. And like spiritual conversion, healing from the emotional or psychological trauma necessitates a lifelong and resolute journey.

In leading people to a true sense of hope in the healing power of God, the church can make positive use of its prayers and rituals, carefully avoiding the pitfalls of superstitions or fatalism. Perhaps special healing Masses, anointing services, and special prayers can be adapted for mental health patients. These powerful spiritual actions can accompany persons while they seek help from trained experts. These blessings and prayers can enable those dealing with mental health issues to derive courage and perseverance in their quest for total healing, enlivening their sense of hope and will to live. Filipinos come to the church for healing; it is the task of the church to educate them in the true meaning and practice of divine healing.

Continue the Healing Presence of Jesus

Without doubt, the church can assist those with mental problems in tandem with other valid approaches. Priests and parishioners do not need to be professional counselors or licensed psychiatrists to support Catholics and other people

who have mental illness. The keyword for the church's contribution is accompaniment, a theological concept that, owing its biblical root in the evangelizing action of the Lord Jesus Christ, is now used as a tool for the pastoral care of families, married couples, and the youth.[67]

Many of those who suffer mentally are also people who have no family, friends, or any other groups to rely on a support system. The church's key role in their recovery will be to provide an anchor of hope as they find solution, receive proper attention, and move through the therapy process.[68]

Deacon Tom Lambert explains why the church must participate in this journey. First, these struggling people are in our own homes, Sunday Masses, communities, and schools, and not much is noticed, talked about, or done about their situation. As a community of faith, these people need good Christians willing to listen to them, learn their actual conditions, and guide them in their needs. That accompanying presence speaks of God's love and concern for the good of those who feel they are solitary in their sorrowful moments. As professional medical care is becoming more open to a holistic approach, "there's a growing realization that faith communities are an important part of caring for people affected by mental illnesses."[69]

The second reason, he says, is that it is a justice issue.[70] The church can help awaken the minds of those in leadership

67. Jose Granados, Stephan Kampowski, and Juan José Pérez-Soba, *Accompanying, Discerning, Integrating* (Steubenville: Emmaus Road Publishing, 2017), p. 2-3.

68. Tom Lambert, "Catholics Must Accompany People with Mental Illness," *US Catholic*, March 4, 2019, https://uscatholic.org/articles/201903/catholics-must-do-more-to-accompany-people-with-mental-illness-says-this-deacon/ (accessed on May 28, 2024).

69. Ibid.

70. Ibid.

positions in government and society to the need for a better mental health system. In the Philippines, the church not only has to listen and abide by the directives of health authorities but also represent the poor and needy in pressing for more attention, seriousness, and services for them. There is a mental health law in the country that, among other things, seeks to reduce discrimination against those with mental difficulties.[71] Through its pastoral presence, the church can strongly endorse and push for its effective implementation. As mentioned earlier, this task is laid out in the church's social teachings. Those immersed in mental turmoil need concrete expressions of support. They are not helped by superficial and half-hearted occasional remembrance on certain days, promises of prayers, and feigned solidarity with their plight. They need the strong support of the community of faith they belong to.

Those who experience very deep emotional pain are often the lonely, rejected, marginalized, and excluded members of society. To them, the Lord Jesus must have a particular identification and a deeper affection. In his own emotional life as a human being, the Lord Jesus learned these unpleasant experiences as he went about his ministry. It is not enough to assure the mentally sick that their sufferings unite them in a profound way to the cross. Like the Lord Jesus, like all people, they are social beings and they need friendship, family, flesh and blood presence in their lives.[72]

It is not enough to lift these people in prayer. They want more and need more than signs of support. They yearn for the warmth of human friendship and the consolation of community

71. Lally, et. al., "Mental Health Services in the Philippines. "

72. Video, "The Agony of Emotional Suffering – The Heart of Hope with Deacon James Keating," *Discerning Hearts*, October 19, 2023, https://www.youtube.com/watch?v=U2Lg6SrSRjA&list=PLqueiEKHoJedZSB72sk8IDD6sRYxIdULN&index=2 (accessed on June 21, 2024).

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fellowship. The church, which is the Body of Christ on earth, is responsible for taking the initiative and finding those who are in silent and hidden pain. In a personal conversation with a visiting Japanese bishop, one of this paper's writers heard the prelate say that though the Japanese are not responding to the church's spiritual and doctrinal teachings because they are surrounded by material wealth and comfort, the Japanese who have mental health problems are drawn to the church because they feel the palpable love and concern of the community. The church's presence among those struggling with mental health here in the Philippines can also be a cogent testimony that God loves those who suffer the most and is the Good Shepherd who leads them toward "refreshing waters" (Ps 23:1-2).