Key: Oklahoma City Comments-Black

Tulsa Comments-Blue

Beginning Discussion:

- Prevention Campaign idea- to reduce the shame of admitting it to the pastor, spouse, families. Even in churches, we don't want to discuss. Needs to come from the churches not from the state. Commissioner White wants to partner with churches to accomplish this.
- We might be identifying peoples' needs in the church, but they are having a hard time getting treatment from that point.
- Pastors get referrals from depression, anxiety but by the time they get to the pastors, it is severe. Community activities at his church where he sees many men and women struggling with Marijuana use.
- Churches have seen huge impact with the 111 Project with foster care. And we need a campaign for mental health/sub abuse to reduce the shame.
- Stigma attached to the mental health issues
- We want to catch peoples' ear with these problems so they are moved to help.

What do you perceive to be the top substance abuse issue or issues in your faith congregation?

- Alcohol
- Prescription drugs
- Cocaine, Ice, all forms of it
- Meth
- Pot.
- People don't see drug problems as their own problem. Isolated ourselves/denial. We need to own it and take ownership.
- We used to say in 15 years every family will be affected by alcohol... we are there now.
- Overly medicating children- as seen in the news lately with over drugged foster children. Children with mental issues have been overmedicated.
- Shooting at Thunder game- shooter did not shoot the person he was fighting with, but started shooting randomly to the crowd- mad at the world.

- Parents want kids to be overly medicated to help with their mental health issues. Need parenting classes and for parents to participate. Parents work long hours and shifts so the classes need to be flexible.
- We call people lazy instead of realizing that the parents are working multiple jobs.
- Adults are given meds but are not offered counseling.
- Alcohol dependence or abuse
- Prescription drug abuse and misuse
- Get in their mind these are legal so okay to use. They also think it is okay to share prescriptions with people
- Do you think that these people started with other abuses such as cocaine or meth prior to becoming addicted to alcohol or prescription drugs?
- Faith community and congregations see greater percentages of people that go to church with the biggest problem being alcohol and prescription drug abuse but people outside the faith community are addicted to more things like meth and crack-drugs where you can't appear to be living a normal life. People are unaware of problems within congregations because individuals can function well as an alcoholic.
- Lots of communities have people that go to church because of their drug abuse past and history and if it is a person who has a past of drug abuse (maybe even been in prison or rehab) usually won't hide that so are open to seeking help from a church but even with the churches' help have the tendency to relapse or take on other abuse areas.
- Marijuana is becoming more common because people don't see it as a big deal or excuse for the use for medicinal purposes.

What does your faith tradition/theology believe regarding substance abuse?

- Don't judge unless you want to be judged.
- God is greater and can help you overcome anything.
- Seen as a sinful fallen world and we are human. We need to see how our bodies were created perfect but tainted by sin.
- This is the new version of orphan and poor- poor in spirit.
- It is not your fault or something wrong with you versus it is a sin what you are doing.
- Some might say- you need to help yourself before we can help you

- We say differently about what we believe and what we do.
- Substance abuse (your choice) is very different from mental illness (not your fault).
- Same chemical imbalance that makes you ill is the same as what makes you an addict.
- Used to see it as a spiritual problem only, need to pray more, go to church more... but we have a spirit, mind and body. You have to renew your mind. You cannot only look at the spiritual side... look at the whole body. We need resources to help people do that.

How does your faith community currently address substance abuse issues?

- Starts from the pulpit. Need to talk about anxiety/depression so people understand it and then can go to scripture for healing. Awareness of how you are hurting yourself and your family. Generational changes happen with awareness of our problems.
- Government run from spiritual things just as the church runs from secular educational things.
- The pressure of the economy is creating more anxiety.
- We need to communicate that there are multiple starting points for the faith community. Foster care had a Sunday that the church talked about it and educated the community.
- Churches do not have trained counselors on their staff or have the structure to help them. Consider individual orgs or churches needing respected professional help to communicate truth about these issues.
- Pastors need to be able to trust who they are sending their members to.
- We have wonderful resource but people don't take advantage of them... all celebrate recovery should be full, but people are ashamed to ask for help.
- Pastors don't have to be an expert in it, but need to know what resources are available for them.
- Pastors need to get together to discuss what they are doing to help their members.
- There is a free mental help course-Mental Health First Aid
- Ways to handle crisis (suicide,)- Critical curriculum is available
- Churches cannot access or find info/help they need to help others.
- 211 Directory- you can put your church name there and how you help others.

- Mentors are needed to help navigate the path to recovery. Very difficult with paperwork, waiting list, training, etc.
- We need to help pastors become awareness, training, and resources to help their congregations.
- Larger churches that have developed programs to help those who cannot have those programs themselves.

What do you need in order to better deal with substance abuse issues in your faith community?

- People will do better if they know better.
- We need a vehicle in Oklahoma to get out the word and resources in our communities faster and more efficiently.
- We have three ministerial alliances and it is difficult to get the word out to everyone.
- The government has tried, but just not as strategic as they could be.
- We need to do focus groups like this with a narrower focus to give resources and eliminate barriers.
- There is a small window of when people are sick and tired of their addictions, and we need to get them help quickly.
- We need to acknowledge that these problems exist in our congregations and the leaders communicate help for them.
- We cannot look to the government/funding to fix our problem. We need to find solutions and expand our ministries ourselves.
- What is the role of the church? We can prepare people to walk alongside those
 who have mental illness. There is a revolving door of people in and out of the
 system and they need to be hooked up with a church who can minister to them
 long term.
- Using celebrate recovery to link prisoners into church families and they are less likely to repeat. We could do the same with mental health people, mental health centers and the church.
- Churches tend to be fragmented in the resources they offer. For instance, you may have 10 churches that have small alcohol recovery programs but think about if those churches consolidated the kind of program they could have. There needs to be more partnerships in churches so churches could consolidate programs then open the doors to start new programs.

• We cannot look to the government/funding to fix our problem. We need to find solutions and expand our ministries ourselves.

There are state agencies that could collaborate with you to help better understand and address substance abuse issues in your community. What are barriers to collaborating with state agencies?

- Not knowing what is available. Better communication about resources.
- Not enough beds. The govt has to provide more so people can pay for it and have a place to go in crisis situation.
- Capacity and finance.
- Perception of disease and addiction/education
- People think you just need to pull yourself up by your bootstraps.
- People want to help kids but not adults.
- Lack of compassion for those hurting/brokenness
- We treat the symptoms instead of root cause.
- Relationship is the number one issue with people in addiction.
- Lack of understanding of how to approach the problem.
- Mistrust
- Education on those sides- lack of confidence between churches and govt.
- We need govt to know we will not just pray and send them away, but be able to give resources, guidance.
- The faith-based community does not see mental health as important.
- People with substance abuse issues also get into the court system and complicates our relationship with them as a church.
- The private sector thinks we as the church has all the answers. But Christ is the only way to transform lives. Three fold: Information, Prevention, Treatment.
- Our role of the church- visit the sick (mental, physical, spiritual)
- How do we integrate the fact that Christ is the answer and the govt resources/help without them pulling back.
- Don't specify that Christ is the answer due to other religious groups are wanting to participate/help.
- Every faith has compassion- people need someone beside them and help them get through instead of condemning them.
- We need to show true love and respect without judgment. Many have walked away from the church during their trials and we need to show them genuine love.

- Isn't so much about what church it is coming from, but comes from our actions.
- Churches need to show outcomes/numbers/results so we can see change-takes time and follow up to do that.
- We genuinely want to do a better job of telling the govt how well we are doing. Churches need a study to get a measureable outcome.
- A collaboration between the church and state to do what we do best.
- Look at other cities who have a good outcome as a model so we don't loose out momentum.
- One way to overcome barriers with Christ is to not be exclusive with one way of treatment. Same idea as the voucher system where other groups get to choose their path to healing.
- Faith communities are pretty good at the aftercare but not prevention. Is there a prevention intervention program we could produce (like Financial Peace) that teaches and then you can measure the outcomes.
- Sometimes we don't give people the opportunity to ask the question- we need to provide education to get people to even ask the question
- Crossings offers Confident Kids, The Landing, Celebration Station to help all ages. A curriculum that could be used in the church would be very beneficial in prevention.
- Kids need to know what is okay- positive messages from every aspect.
- Churches need to be more explicit about prevention specifically.
- State needs to recognize a faith-based organization as a provider for mental health services especially if it's the sufferer's choice. The state could still create a partnership with faith-based entities without having to fund them and creating the separation of church and state issues.
- NEED CHURCHES TO PRODUCE OR SHOW OUTCOMES:
- If faith community can't show it in concrete outcomes and demonstrate how their programs are helping people then need to figure out how they can- ex: 40 people in our church aren't doing drugs anymore.
- Need a way to demonstrate quality of life fundamental changes like "used to be depressed 100 percent of them time and now only 2 percent". Faith communities need outcomes to compete against other facilities and show the need for their programs.
- We need to create church pilot programs.
- Need to change church view from thinking you only need God to heal that you also may need other help such as medicine or psychiatric.

We are trying to better understand the substance abuse issues faced by members of our faith communities and what we can do to help you address these issues. Do you have any other comments that would be helpful in reaching these goals?

• Difficulties in the faith community when a member is going through a mental health/substance abuse problem is other members have a "holier than though" attitude so people don't want to seek help because of worried about their reputation or how they will be treated so try to hide and cover their issues up.

What do you perceive to be the top mental health issues or issues in your faith congregation?

- Common mental abuse areas with members in church are workaholism, pornography, gambling and depression.
- Gambling is huge problem in the faith community and it is legal.
- Other huge mental health illnesses in churches is emotional, physical and sexual abuse. This is a huge struggle that is also kept secret in churches.
- Don't care if it is just one person that is being physically abusive to their family
 or a family member that one person can impact the atmosphere of the whole
 church.
- Gender orientation is another mental health issue that usually is the result of other abuse and something that is definitely kept secret from the church they person attends.
- Area of abuse we need to lift up is spiritual abuse that is almost condoned by the church. If a woman is being abused then its her fault and her problem and she needs to do the right godly thing and stayed married. Another attitude with the church is if you use drugs or drink, its your fault and you are in the wrong and aren't listening or following God.

What does your faith tradition/theology believe regarding mental health?

• The traditional advice in churches is read the Bible and pray-that is all you need to get over problems but it actually takes a community and process to heal and get involved in the healing process. They need to remember God uses people in the healing process.

- People really don't want to talk about emotional issues in church-its scary to a lot of people and makes them uncomfortable to talk about.
- Most denominations think you should just be centered on Christ and nothing else.
- Faith-based is a process not an arrival-the worst critics of your life are from the church. You can believe it is a process but a process of acceptance, loving and working with people but still never losing your foundation of faith.
- What in the Bible is directed at helping mental health and substance abuse? A: When Jesus got into the boat and ran into the storm, he stilled the storm to make it to island on the other side to help one person who needed help and healing from a mental health issue. That shows us that God can take us through hell to help one person who needs help and healing so as a church we should do the same.
- Churches are like families-don't change until so much pain causes them to. The majority of faith communities don't want to change and could be resistant to that because so much of the church culture that they sometimes want to move away from the direction of helping people because it may slightly disrupt the flow for their church.
- Our church approach is very different-we don't look at it as a disease and sin but as a spiritual attack of Satan and oppression-tools of Satan to destroy the mind and your relationship with Christ. It's a spiritual problem; not a sin or disease.
- We just did an exorcism this week. We need to have spiritual power in us to help these people. Its either the word of God or nothing. What people do people do after they leave the church. We need to create better accountability within the churches. Also need better programs for teens and even children.

How does your faith community address mental health issues currently?

- Numerous churches have programs such as Celebrate Recovery but the clergy won't have anything to do with them.
- Tools like Mental Health First Aid is a great program and wished every church knew about it.
- Dream Center Pilot Program is a program for mental health/ substance abuse screening program. They train staff to read signs and provide resources to lower income people suffering from mental health issues. This program has shown that churches are not sufficiently trained to handle mental health issues and

definitely clergy are not sufficiently trained to address these issues. There are resources available but lack of training for churches.

 Recovery programs are good for those that attend but you have a problem in getting people there because of the guilt they feel and how it is presented to them as a sin not a disease.

What do you need in order to better deal with mental health issues in your faith community?

- Licensed professionals to help walk through medication choices, etc.
- Psychiatrists', who could subscribe, adjust meds for mentally ill.
- Information to churches
- We need to come out of our denial of the problems in our congregation. Her church is not a safe place for people to come out and be honest
- Consistency with the help people see. Medications get confusing when they see different doctors.
- Collaboration between state and faith-based. Let others know that we are open to see and help people.
- Confidentiality in the church is hard when you need to help people with their problems. Churches need a list of licensed professionals to recommend to their members.
- Pastors should be taught to recognize mental issues. Everyone looks great on Sunday morning, but what is really going on?
- Awareness within the pastoral staff in their own arena and give them information/resources (children, youth, adults, missions, etc) The leaders in all areas of the church need to be educated.
- Help leaders identify when professional help is needed. Evaluation tools would be helpful no matter what denomination you come from.
- You have to not care who gets the credit, get over ourselves and start working together. We have so much overlap even with the same people. We have to work together if we plan on letting the 'secular' world in to help us with this problem.
- We need to stop thinking that it is someone else problem. We minister to the least of these and their families and need help doing this.
- Where are the gaps? Who is serving whom? Let's get educated about what is being done in our state.
- Problem for people to confess.

- When a person comes to Christ, perception for that person is all addictions will go away and everything will be okay and fine and that all baggage will work itself out alone without needing to get the church involved.
- Only a small percentage of pastors will really talk about substance abuse and mental health issues with their congregation.
- Pastors need more training to talk about mental health issues-training to recognize symptoms and identify in their members on all issues from drugs, alcohol, domestic violence, child abuse, depression and anxiety.
- If pastors are afraid to step out and address issues, imagine how others are at confessing to a pastor.
- There needs to be a way to move churches to help with counseling these issues and encouraging people to seek help and that it is not a sin. Church leadership needs to be open to that.
- Lots of times in church when mental health issues arise with members and the staff does address it, the people will leave usually because of the way it was presented to them or it's the fear of being found out by the whole church body.
- What could be done differently to help churches address these issues in a wife to make the sufferers comfortable? Our church brought in a life coach to show us as a church body how to deal with baggage.
- Part of the problem is the fear of being found out. Half of the members or more of our churches' AA Program are people who are not members of the church. Although it's a safe place with well-trained leaders and nothing leaves the room, people are still scared of the church body or leaders finding out about their problem.
- Another church mindset: if you haven't experienced it yourself, hard to understand it.
- What else could churches be doing on offering programs that would be more affective?
- Facilities and services
- Detox places-currently, all places have waiting lists
- Funding
- No beds available
- More cooperation among churches and faith-based entities.
- More resources for churches to share with congregation
- Need in house 24/7 a week programs to always be available to help people
- What are the hooks to get clergy interested in these issues?

rst if you engage the people interested in these issues, you have to have a
ace to send them or beds for them to recover in.