

## **Mental Illness, a Jewish Concern?**

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By Barbara V. Paper

*“Gunman spent 4 years in treatment centers, home”, “Agencies send mentally ill to unlicensed homes”, (Hershel) “Walker claims he has personality disorder.”* These are newspaper headlines I have seen in recent months. We see and hear about celebrities, such as Britney Spears, who have mental illness issues. What does this have to do with you, me and our Jewish communities?

Jewish tradition through Jewish Law has considered the shoteh (mentally defective) to be incompetent in legal and religious matters, unable to perform mitzvot and, therefore, excluded from full participation in the community. There were occasions when the shoteh was grouped with criminals, drunks, slaves and non-Jews and considered untrustworthy. (Reference: 2003 Thesis: Crazy Like You: Toward an Understanding of the Halakhic Category of the Shoteh by Rabbi Joshua B. Lief - Mizpah Congregation Chattanooga, TN, USA)

Rael Strous, MD, Senior Psychiatrist, Be'er Ya'akov Mental Health Center, Tel Aviv University, wrote in an article, “Assai, Vol IV, No. 1, February 2001, “...it is clearly evident that the shoteh is one who is expected to struggle to meet societal expectations of functioning and who would demonstrate impaired ability to cope with the usual frustrations and routine challenges of life.” Dr. Strous later concludes, “Halakha demonstrates exceptional sensitivity to the phenomenon of psychosis.” He explains, “The assumption as expressed in the Talmud, ‘shoteh lo samei be-yadan’ (essentially, ‘once insane, always insane’, since we have no cure) may no longer necessarily apply in light of current clinical practice. From the example of the spirit of halakha, it behooves us at all times to maintain sensitivity to the shoteh.”

I believe most people identify the disabled as the person in a wheel chair, the elderly individual struggling with arthritis or Alzheimer’s Disease or, perhaps, the child with physical and educational special needs. We build ramps to make access easier into our buildings. We develop programs to help handicapped students become a Bar or Bat Mitzvah. Our religious institutions have special camping programs for autistic Jewish youth. I wonder just how many Jewish communities actually schedule programs focusing on mental illness e.g. bipolar disorder, schizophrenia or are even aware of these issues. What about Jewish alcoholics, Jews with treatable addictions, etc.?

In an article reprinted from the New Jersey Jewish News, “JFCS Spearheads Series for Families of Children with Mental Illness” by Marilyn Silverstein, MJJN PMB

### **Mental Illness, a Jewish Concern?**

Correspondent, I read:

*It happened about five years ago, said the Jewish woman who was speaking anonymously at the other end of the telephone line. It was summer, and she was sitting at a Princeton Township swimming pool with her violent and difficult nine-year-old son, who had been struggling since*

*birth with bipolar disorder, a mental illness. "I was sitting at the pool, and I saw a mom wheel in a child who was seriously physically disabled and unable to take care of herself. All of a sudden, three or four of the other moms started to hover around her", the woman said, describing the scene of sympathy and support. "And I started to cry. My friends had all abandoned me. They didn't want to be around my bipolar child. What was flooding through me at that moment was the wish that people could understand that it's just as hard for a family with a child with emotional disabilities as for a family with a child with physical disabilities - even if you can't see it", she said.*

In the USCJ Review - Spring 2001 article "Creating Caring Communities" Lois Goldrich discusses an Anti-Stigma Kit developed by The Center for Mental Health Services in Washington, DC. From the kit we glean these pertinent questions: Do you know that stigma is about disrespect, and that stigma is about the use of negative labels to identify a person living with mental illness? Do you know that many people would rather tell employers they have committed a petty crime and were in jail than admit to having been in a psychiatric hospital?

The National Alliance on Mental Illness Fact Sheet, October 2007, states that one in four adults, approximately 57.7 million Americans - experience a mental health disorder in a given year. Imagine the worldwide statistics were we to do the math. It further states that one in seventeen lives with a serious mental illness ... and one in ten children has a serious mental or emotional disorder. People who are mentally ill are not personally weak, do not have a poor character, lack of will power or poor upbringing. They cannot "snap out of it". Jews are NOT immune. The fallacy that Jews are not alcoholics, never have a mental illness or physically abuse their spouses has long been our "little secret". NO MORE!

The Center for Mental Health Services under the auspices of the United States Department of Health and Human Services gathered twenty-four mental health consumers and members of the faith community for a dialogue in October, 2002. They identified characteristics and issues related to interactions between mental health consumers and members of faith-based and community organizations and formulated recommendations for achieving better mutual understanding and creating partnerships to promote recovery among persons with mental illnesses. In the document, "Building Bridges", the results of the dialogue are explained. In particular it said that faith-based organizations should address issues of discrimination and stigma and create a welcoming, supportive environment.

The Union for Reform Judaism through the Central Conference of American Rabbis and the General Assembly have issued resolutions in June 1997, June 2001, and December 2001 addressing actions for caring for our Jewish mentally ill.

Rabbi Richard Address, Director of the Department of Jewish Family Concerns, Union for Reform Judaism, challenged congregations to "Go Forth to a New Land: The World of Disabilities." November 2, 2006, by adapting our culture to welcome all Jews with disabilities and their families. In fact, the URJ through the Department of Jewish Family Concerns has developed A Mental Health Resource and Study Guide, "Caring for the Soul, R'fuat HaNefesh" that presents background information, sermons, programs, resource lists and much more that draws on multiple sources within the Jewish community.

In 1999 The United Synagogue of Conservative Judaism issued a resolution: “Action on Behalf of the Jewish Mentally Ill”, that states five specific actions for the synagogue and local social service agencies to address the issue, including “develop program models for matching congregants and the Jewish mentally ill who need to be welcomed back into the community.....”.

Now it is our challenge to acknowledge our tradition while setting forth on a road to treat Jewish mentally ill with understanding and respect as welcomed participants in Jewish communal life. The resources are available if our community center program directors will commit to scheduling at least one program in 2008-09. The first week of October is Mental Illness Awareness Week, an ideal time to begin.

This program guide is just one first step along that road. It is simple to continue by exploring the wealth of information available. I have listed some prominent resources available for anyone willing to take the time to glean the wonderful suggestions via the internet. Materials are available to order for minimal costs or at no costs.

These suggestions are written for high school age and adult participants, with the understanding that the size of the Jewish community is a factor in determining the scope of the program planned. One size does not fit all. It is necessary, however, to enlist the support and participation of Jewish religious and medical professionals within the community.

The primary goals are:

To initiate discussions within the Jewish community regarding mental illness in order to:

- a. lessen the unspoken stigma attached to the condition while encouraging empathy for and acceptance of those who are affected.
- b. empower those who suffer to be open and seek help.

To educate the community regarding the pervasive nature of mental illness in its various manifestations and how it affects families.

To help the community to understand the physical source of mental illness.

To broaden the knowledge of those attending regarding the resources available within the immediate and worldwide communities.

To serve as a catalyst for local Jewish congregations to incorporate mental illness awareness within the liturgy of worship on a regular or annual basis.

To encourage the establishment of support groups within the Jewish community for those patients and their loved ones who seek help.

I know it will be a challenge to encourage community members to attend a program regarding such a serious subject. However, from my experience - “FEED THEM AND THEY WILL COME!” Much advance planning and advanced publicity will be necessary. I also recommend telephone communication. Making telephone calls to key individuals who may in turn call others to encourage attendance is often a very successful tool.

#### **PROGRAM FORMAT EXAMPLES:**

One day seminar at the Community Center or other appropriate location.

- a. morning session 1 ½ to 2 hours; lunch with speaker; 1 ½ to 2 hours afternoon session including evaluation
- b. same as above without afternoon session
- c. lunch followed by afternoon program
- d. evening program lasting no more than 2 hours
- e. dinner followed by program

Series of workshops or discussion groups at the Community Center or other appropriate location, over a period of weeks.

- a. once a week for four weeks or longer
- b. once a month programs for a set period

In-home dialogue groups led by mental health professionals and Jewish clergy. This in-home format may more appropriate for communities without a suitable community location. No more than 20 participants in this setting is recommended.

However, there could be multiple locations of simultaneous dialogues taking place in larger communities. This format can be incorporated into a program plan as a follow-up to a preceding general program. e.g. The program involving the larger audience can focus on basic education of the issues, such as mental illness in the Jewish context or manifestations of mental illness. In-home dialogues can address our Jewish responses to the issues presented or delve into more details of the aspects of the problem.

#### **PROGRAM ENVIRONMENT EXAMPLES:**

- Bulletin board of pertinent news clippings specifically addressing issues related to mental illness
- Poster display in a prominent location
- Chairs arranged in a circle or semi-circle for an informal discussion format
- Low volume of appropriate Jewish music playing in the back ground prior to the beginning of the program
- Table displaying appropriate educational materials for participants to receive

#### **EXAMPLES OF DISCUSSION TRIGGERS:**

- On a piece of paper list as many words as you can to connote mental illness. e.g. crazy, nuts, loony, etc. Have you ever used these words? In what context? To whom were they directed?
- View a trigger film or video.
- Examine Jewish Scripture or other sacred writings dealing with the subject of mental illness.
- Present a patient willing to speak to the group about his/her life experiences. - Present a panel of rabbis, communal social workers, Jewish psychologist or psychiatrist, family member of a patient to present information and initiate discussion topics.

#### **EXAMPLES OF PROGRAM/DISCUSSION TOPICS:**

Defining Mental Illness  
 Alcoholism - Self-medication  
 Suicide - A Jewish Response

Co-dependency - What Does It Imply?  
Mental Illness in Scripture, Mishnah and Responsa  
Role of the Jewish Community Regarding Mental Illness  
Costs of Mental Illness - Emotional and Financial  
How to Become a Welcoming Community

## **PROGRAM RESOURCES:**

1. Caring for the Soul - R' fuat HaNefesh, a Mental Health Resource and Study Guide edited by Rabbi Richard Address, available for purchase at UAHC Press includes: references in Jewish texts; discussions of the various forms of mental illness; responsa and resolutions regarding mental illness; programming suggestions ([www.uahcpress.com](http://www.uahcpress.com))
2. "Reform Judaism" - Fall 2007, article: "When a Loved One Refuses Help" ([www.reformjudaismmag.org](http://www.reformjudaismmag.org))
3. The Gateway Rehabilitation Center- program resources from a traditional Jewish perspective ([www.gatewayrehab.org/index](http://www.gatewayrehab.org/index)) founded by Rabbi Dr. Abraham J. Twerski, a well-known American Chasidic Rabbi and psychiatrist
4. Jewish Community Mental Health Education Project - Milwaukee, WI, USA Jewish Community Jewish Family Services - program resources ([www.family.org/mental\\_health\\_index](http://www.family.org/mental_health_index))
5. Mental Illness Network - St. Louis, MO, USA -order form available on-line for purchase of various materials: e.g. "Who Has Mental Illness?", "When Mental Illness Strikes in a Jewish Family", "Putting the Pieces Together: Correcting the Myths of Mental Health and Aging", "Responding to People with Mental Illness in the Congregation and in the Community", basic manual- "Pathways to Partnership" ([www.pathways2promise.org](http://www.pathways2promise.org))
6. Substance Abuse and Mental Health Services Administration- U.S. Dept. of Health and Human Services - free materials e.g. brochure - "What a Difference a Friend Makes", booklet - "Participatory Dialogues" Guide to Organizing Interactive Discussion on Mental Health Issues, poster - "Know me as a person notby my Mental Illness," fact sheet - "Mood Disorders", booklets- "Building Bridges", "Developing a Stigma Reduction Initiative" and much more. ([www.samhsa.org](http://www.samhsa.org))
7. John Hopkins Medicine -Epidemiology- Genetics Program in Psychiatry - "Why Study Ashkenazim?" and "Frequently Asked Questions" ([www.hopkinsmedicine.org/epigen](http://www.hopkinsmedicine.org/epigen)) br>
8. Naomi Ruth Cohen Charitable Foundation - Chicago, IL, USA - Overcoming the Stigma of Mental Illness- program ideas for various constituent groups; provides links to other mental health organizations ([www.naomicohenfoundation.org](http://www.naomicohenfoundation.org))
9. JAMI-The Jewish Association for the Mentally Ill -London, England - provides links to other mental health organizations within the United Kingdom ([www.jamiuk.org](http://www.jamiuk.org))
10. NAMI- National Alliance on Mental Illness - store for purchase of books, brochures, videos: e.g. "Mental Illness: Facts & Numbers" Oct. 2007; "An Illness Like Any Other," poster -

“Famous People” ([www.nami.org](http://www.nami.org)) 11. American Foundation for Suicide Prevention - educational resources, even ideas, brochures ([www.afsp.org](http://www.afsp.org))

12. Wings of Care of the Jewish Mental Health Network - Melbourne, Australia - resources e.g. “Ten Principles of Tolerance” ([www.wingsofcare.org.au](http://www.wingsofcare.org.au)) (<http://home.vicnet.net.au/~support/>)

13. National Institute of Mental Health - Agency of the U.S. government- offers free brochures, fact sheets, reports, and other educational materials ([www.nimh.nih.gov/](http://www.nimh.nih.gov/))

14. Jewish Alcoholics, Chemically Dependent Persons, and Significant Others, a program of the Jewish Board of Family and Children’s Services ([www.jacsweb.org/](http://www.jacsweb.org/))

15. World Fellowship for Schizophrenia and Allied Disorders- can be accessed in French and Spanish ([www.world-schizophrenia.org](http://www.world-schizophrenia.org))

16. World Federation for Mental Health - multiple language options- Founded in 1948 to advance among all peoples and nations, the prevention of mental and emotional disorders, the proper treatment and care of those with such disorders and the promotion of mental health ([www.wfmh.org/](http://www.wfmh.org/))

17. European Federation of Associations of Families of People with Mental Illness - multiple language options- Founded in 1990 and registered in Belgium with a commitment to improving care and welfare for people afflicted by mental illness ([www.eufami.org](http://www.eufami.org))

18. Jewish Lights Publishing, Woodstock, Vermont - offers books e.g. Healing of Soul, Healing of Body , edited by Rabbi Simka Y. Weintraub, CSW - a project of the Jewish Healing Center or Recovery from Codependence - A Jewish Twelve Steps Guide to Healing Your Soul by Rabbi Kerry M. Olitsky (<http://jewishlights.com>)

## **Films:**

“Fierce Goodbye - Living in the Shadow of Suicide” 44 minutes  
produced by Mennonite Media; hosted by Judy Collins, folksinger, a survivor of her son’s suicide. Also featured is Kay Redfield Jamison, professor of psychiatry at Johns Hopkins University. “It offers hope and healing and presents a difficult subject from experiential, spiritual, medical and theological viewpoints.”  
[www.fiercegoodbye.com](http://www.fiercegoodbye.com)

“Shadow Voices: Finding Hope in Mental Illness” - 58 minutes  
produced by Mennonite Media; featuring Rosalyn Carter and Dr. David Satcher, former U.S. Surgeon General “Ten persons from many sectors of American life tell their stories while mental health experts and advocates add perspective and insights”.  
[www.shadowvoices.com](http://www.shadowvoices.com)

“Families Coping with Mental Illness” - 22 minutes or 43 minutes

produced by Mental Illness Education Project “Allows viewers to sit in on a discussion among family members who have a mentally ill relative. This film touches on various struggles, adjustments, needs and lessons learned.” The 22 minutes version of the film includes early nightmares, learning to have a life of one’s own, coping with persistent problems and the ongoing nature of mental illness. The 43 minutes version adds suggestions for survival, managing relatives’ money, holidays and other occasions and families and the mental health system.”

[www.miepvideos.org/shop](http://www.miepvideos.org/shop)

“When Someone You Love Suffers From Depression” - 32 minutes

produced by MEDCOM, Inc. “This film begins in black and white, symbolic of the world experienced by persons suffering from clinical depression. Along with family stories, it discusses symptoms and causes of major depression, attitudes that hinder rather than help, sources and methods of treatment, tips on helping someone, reality and the challenge of stigma, and recovery expectations.”

[www.mental-health-matters.com](http://www.mental-health-matters.com)

“Addiction and Depression” - 24 minutes - Distributed by Mental Health Ministries -

Story of three individuals, suitable for small groups of adults and teens . “ What is the correlation between substance abuse and mental illness, specifically major depression? Which is the cause? Which is the effect? The viewer sees this vicious cycle in the stories of three courageous individuals in recovery. Before recovery began, however, denial and dishonesty were part of their illness”.

[www.mentalhealthministries.net](http://www.mentalhealthministries.net)

“Overcoming Stigma, Finding Hope” - 21 minutes - Distributed by Mental Health Ministries - story of four professionals

“This video helps break down several misconceptions perpetuated by media, popular opinion, and even insurance companies who deny equal coverage for mental disorders. Four professionals unfold their journey and recovery from major depression and severe anxiety disorder, describing how they first resisted treatment due to their own misunderstanding about mental illness. By hearing their stories, we see that mental illnesses are biological brain disorders which - with proper treatment - do not have to lead to total disability or long term hospitalization.”

[www.mentalhealthministries.net](http://www.mentalhealthministries.net)

I challenge every Jewish community worldwide, large and small, that has not already begun, to commit to taking the first step to educate the ignorant, replace stigma with dignity and encourage those who suffer to seek help. We can all be truly caring communities in the broadest context.

**Let the conversation begin!!**

The families of every Jew who suffers will thank you.