



Give Me Your Hand

A GUIDE TO MENTAL ILLNESS FOR JEWISH CLERGY

In the Talmud the story is told of a time when Rabbi Yochanan fell ill and Rabbi Hanina came to visit him. Rabbi Hanina asked “Are these sufferings welcome to you?” Rabbi Yochanan answered, “Neither they nor their reward.” Rabbi Hanina saw that Yochanan was in pain and replied: “Give me your hand.” Rabbi Yochanan reached up his hand and Rabbi Hanina raised him up. Our Sages asked: “Why could Rabbi Yochanan not raise himself?” The tradition answers, “The prisoner cannot free himself from jail.”

Adapted from Babylonian Talmud Brachot 5b

Compiled by Rabbi Elliot Kukla, Bay Area Jewish Healing Center. We wish to thank The Jewish Community Endowment Newhouse Fund of the Jewish Community Federation of San Francisco, the Peninsula, Marin and Sonoma Counties for their gracious support in recognizing the spiritual care needs of those who live with mental illness.



THE ROLE OF JEWISH CLERGY IN THE SPIRITUAL CARE OF PEOPLE LIVING WITH MENTAL ILLNESS

One in four Americans suffers from mental illness. This means that in every Jewish community, it is likely that at least a quarter of our members are touched by mental illness. Nearly every Jewish family has been impacted by this disease. Research tells us what so many of us know first-hand from the privacy of our offices – nearly 60% of people with mental illness concerns turn to clergy first for spiritual support and referrals before reaching out to anyone else. We have a unique opportunity to make a difference.

Mental illness frequently raises specifically spiritual issues for individuals, families and communities that call for a spiritual care, as well as a mental health care, response. Which means that in addition to being prepared to make mental health referrals we have an opportunity to offer pastoral care. Below are a few of the spiritual needs that may be present for individuals and families living with mental illness and some suggested responses.

1. Self worth and dignity

וַיִּבְרָא אֱלֹהִים אֶת-הָאָדָם בְּצַלְמוֹ

God created the human being in God's own image.

–Genesis 1:27

In today's world mental illness is often surrounded by stigma and shame. Sadly, these societal attitudes can impact the inner sense of self among people who are touched by mental illness. This can lead to feeling a lack of self worth and a loss of dignity. Judaism has a myriad of sacred sources on the spiritual value of each person. In the Torah we are taught that each and every person is created “*b'tzelem Elohim*” in the image of God (Gen 1:27); in the Mishna we learn that when we save a single human life it is as if we saved an entire world (Mishna Sanhedrin). Individuals with low self worth benefit particularly strongly from belonging in community but may have difficulty reaching out and asking for help. We can affirm the value and worth of members of our communities living with mental illness through empathetic listening, *bikkur cholim* visits to home or hospital, publicly naming mental illness from the *bimah* and offering pastoral care that includes prayers and sacred texts that affirm the worth and dignity of all people.

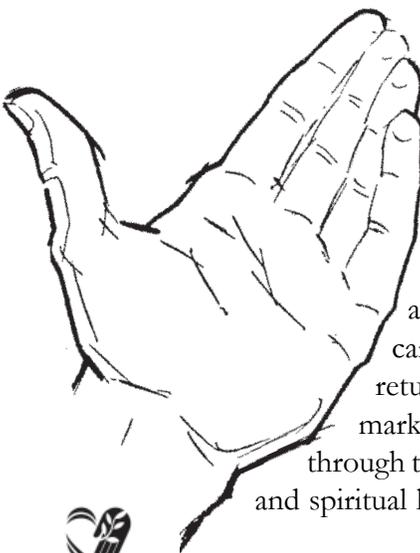
2. Guidance through grief and loss

וַיִּבְכוּ בְנֵי יִשְׂרָאֵל אֶת-מֹשֶׁה בְּעֶרְבַת מוֹאָב שְׁלֹשִׁים יוֹם

And the Israelites wailed out loud for Moses in the steppes of Moab for thirty days.

– Deuteronomy 34:8

The journey through mental illness is shaped by loss. Individuals and families may experience losses of physical or mental functions, relationships, employment, financial support, social status and spiritual beliefs. We can learn from Jewish mourning practices about the significance of ritually marking loss in Jewish tradition. The days after a death and before a funeral are known as a period of *anninut*, a time when everyday life is suspended for mourners. It can be helpful here. After the funeral ritually marks the loss, mourners gradually return to daily life. This cycle of mourning, affirms the idea that loss must be marked before we can begin to heal. As spiritual care-givers we can guide people through the grief connected to mental illness by naming and validating physical, emotional and spiritual losses. These losses can be marked through empathetic listening and sanctified



through innovative rituals or prayers. You may also consider adapting traditional rituals such as mikvah or *birchat ha'gomel* (the traditional blessing for surviving a life threatening experience).

3. Reconciliation in Relationships

רְאִיתִי כְּנִידָה כְּרֵאֵת פְּנֵי אֱלֹהִים

Seeing your face is like seeing the face of God.

– *Jacob speaking to his estranged brother Esav when they are reunited, Genesis 33:10*

The symptoms of mental illness and the stigma that surrounds it can cause significant strains on all types of relationships. Individuals living with mental illness may have broken relationships to loved ones, to community and to Jewish tradition. Judaism is rich in sources on the sacred significance of rebuilding relationships through *teshuva* (repentance) and forgiveness. As clergy and spiritual care-givers we can support individuals in reconciliation by affirming the Jewish value of *teshuva* and forgiveness. We can also serve as a mirror to individuals, families and the community as a whole to reflect back the damage that has been done in relationships and lift our prophetic voices to highlight the need for repair.

4. Awe and Mystery--

וַיֹּאמֶר אֱלֹהֵי-קַרְבֵּי הַלֵּם שֶׁלֹּא תֵעָלֶיךָ מֵעַל
רַגְלֶיךָ כִּי הַמָּקוֹם אֲשֶׁר אַתָּה עוֹמֵד עָלָיו אֲדָמַת-קֹדֶשׁ הִוא:

Remove your sandals from your feet for the place on which you stand is holy.

– *Exodus 3:5*

Struggling with mental illness is usually extremely painful. It can also lead to shifts in identity and perspective that may provide certain individuals an opening to contemplate the mystery of the universe and the human mind. We should be extremely careful to suggest this approach it can seem minimizing to the very real pain of illness or hint at theological rationales for mental distress and suffering. However, when people living with mental illness themselves wish to see their illness within a larger spiritual context, accompanying them in exploring awe and mystery can be profoundly healing. The concept of awe, *yirah*, is central to Jewish tradition. The place where those struggling with mental illness are standing is holy ground. We can acknowledge the sacredness inherent in the journey through mental distress toward healing by affirming awe when it is present for individuals, as well as offering prayer, meditation and text study that helps individuals connect their struggles to a larger spiritual context.

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If you feel like someone in your community could use extra spiritual support please call us at 415-750-4197, our rabbis are able to provide spiritual care to those struggling with mental illness and their care-givers regardless of their ability to pay. We would also be happy to provide support to clergy and congregational leaders as you explore the best ways to meet the needs of community members living with mental illness.



A PRAYER OF HEALING FOR MENTAL ILLNESS

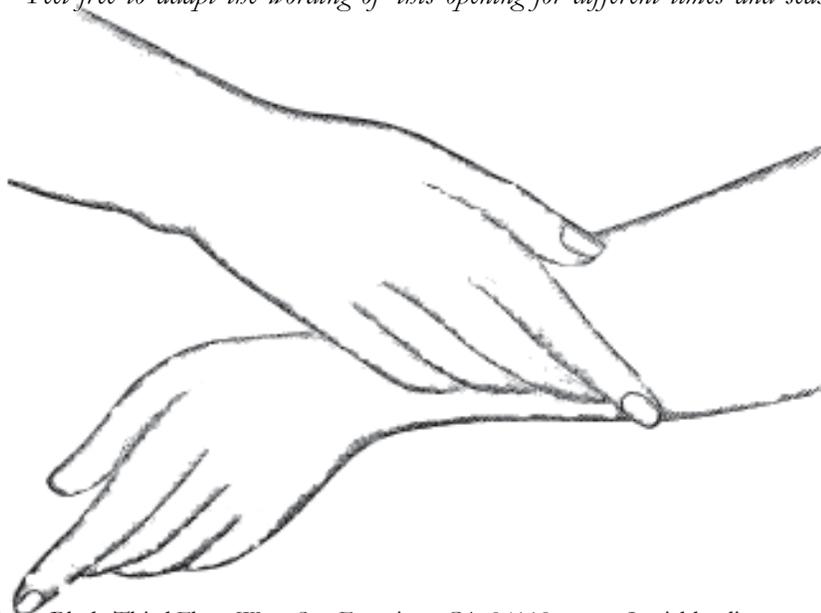
May the One who blessed our ancestors bless all those who live with mental illness, their care-givers, families and friends; May they walk in the footsteps of Jacob, King Saul, Miriam, Hannah and Naomi who struggled with dark moods, hopelessness, isolation and terrors, but survived and led our people. Just as our father, Jacob, spent the night wrestling with an angel and prevailed, may all those who live with mental illness be granted the endurance to wrestle with their pain and prevail night upon night. Grace them with the faith to know that though, like Jacob, they may be wounded, shaped and renamed by this struggle, still they will live on to continue an ever unfolding, unpredictable path toward healing. May they not be alone on this path but accompanied by their families, friends, care-givers, ancestors and the Divine presence. Surround them with loving-kindness, grace and companionship and spread over them a *sukekat shalom*, a shelter of peace and wholeness. And let us say: Amen

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An introduction to your congregation's usual prayers for healing for Mental Illness Awareness Week (October 5-11, 2008) and beyond:

One in four Americans suffers from Mental Illness, which means that it is likely that a quarter of the people in this congregation have been touched by mental distress. This year Mental Illness Awareness Week falls during the High Holidays, a time when we are turning our attention to individual and communal healing. Today, when we recite our blessings for healing for all who are ill, may we remember to pray for those who are suffering from mental illness, their care-givers, families and friends; may the words of our prayer break through the walls of stigma that have been built in society, and the walls of isolation that we erect in our own hearts, to bring all who are suffering comfort and healing.

Feel free to adapt the wording of this opening for different times and seasons.



You may want to include this responsive reading after your congregation's usual prayers for healing or after the Amidah.

GIVE ME YOUR HAND

Responsive Reading

When all seems dark and the darkness is harsh, GIVE ME YOUR HAND.

When I cannot see light even in the brightest day, GIVE ME YOUR HAND.

When you are tired and every breath is heavy, GIVE ME YOUR HAND.

*When my words do not grasp the depth
of yearning in my soul, GIVE ME YOUR HAND.*

When your feelings are overwhelming or dulled, GIVE ME YOUR HAND.

When I am confused and don't know what to do, GIVE ME YOUR HAND.

So that we may be together, GIVE ME YOUR HAND.

© Rabbi Eric Weiss, based on text from Talmud Bavli, Berachot 5b



A JEWISH CLERGY'S GUIDE TO SUICIDE ASSESSMENT AND PREVENTION

Suicide is a fact of life – many families within our congregations have been touched by suicide in some way. Clergy are often the first to hear about suicidal thoughts. Here is a brief summary of how to make assessments and some simple suggested responses that can prevent suicide. With all of these suggestions, seek your own professional support as well.

ASSESSMENT

There are four kinds of suicidal people in any community and they correspond roughly to the four children in the Passover Haggadah.

1. There is the **BITTER** person: This person says, “I am going to kill myself.”

You need to ask this person four questions that determine HOW before WHY. How is more important as the answers will help you know if this person is in immediate danger. The questions are easy to remember as they spell the word “PLAN” vertically.

Plan: “Do you have a plan for how you want to kill yourself?”

Lethal Method: “Have you got the means to do it”

Access: “Where is the means now? Can you get it easily?”

Now? “When do you want to do this? Is it now?”

For the person who says “yes” to all four questions, you need to call 911 to arrange for hospitalization as quickly as possible, involving the family and loved ones as appropriate.

2. There is the **INTELLECTUAL** person: This person says, “I am thinking about suicide.”

You need to ask this person the four above questions, but it is likely that not much thought has been given to putting the plan into action. You need to arrange for this person to have regular counseling, begun within 24 hours, or to tell his/her existing therapist/counselor about these thoughts.

3. There is the **PAINFULLY SIMPLE** person. This person simply says “I am always thinking about suicide.”

You need to ask this person the four questions, but it is likely that the person will not even have a plan. There will simply be so much pain, which will have existed for so much time, that the thought is always there. You need to arrange for this person to call a suicide hotline on a regular basis for pain control purposes. You need to suggest a specialized therapist as well.

4. There is the person who **DOES NOT SAY ANYTHING** but who drops hints.

You need to ask this person whether you are being told that he/she is in a lot of pain, and whether the pain has begun to make him/her think about suicide. And if the answer is “Yes,” you need to begin with the four questions. It will be a relief for both of you. You need to suggest a specialized therapist as well.



ONGOING RELATIONSHIPS THAT CAN PREVENT SUICIDE

Numerous studies have shown that three kinds of painful feelings appear to contribute to thoughts of suicide, or to make them stronger. Rabbis and congregations are in a special position to counteract the power of these feelings.

Lack of a sense of belonging — People who are suicidal often mention the sense that they no longer feel they are part of a community or a family. Often this is true; some mental illnesses and other forms of emotional distress can cause people to “fade from view.” Clergy can reach out to this person and invite them to participate in congregational activities to reactivate a sense of membership. Mentioning mental illness and suicide from the bimah can also help to reduce isolation.

Burdensomeness — Often the idea that one’s death will be a relief to family and friends becomes a part of a person’s impulse towards suicide. Pastoral care, support groups and visits from community members can reinforce the value this person has in community. Peer support from others who have struggled with suicidal thoughts has the potential of bringing comfort to the experience of pain, as it reinforces the message that after pain has been conquered, one is especially suited to help others who are in danger.

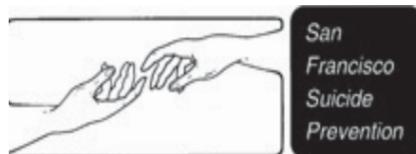
Lack of Control — The taking of one’s own life is often seen as the only way of asserting control over a painful and chaotic situation not of one’s own choosing. Clergy should be well educated about suicide and able to offer referrals and community resources to individuals that help them get the support they need to make choices that represent life and enable at least partial control.

Created by Eve Meyer, San Francisco Suicide Prevention and Rabbi Elliot Kukla, Bay Area Jewish Healing Center

Anyone can call any local crisis/suicide line at any time. The number is 1/800-273-TALK. This always connects to the nearest qualified 24-hour service. In San Francisco Contact the San Francisco Suicide Prevention 24-Hour Crisis Hotline at 415-781-0500

If you are working with a community member who you feel could also use regular spiritual care (in addition to mental health care) the Rabbis of the Bay Area Jewish Healing Center are able to provide spiritual counseling regardless of an individual’s capacity to pay. Call us at 415-750-4197 to make a referral.

Please note: Therapy does not replace the importance of your spiritual work with an individual with mental illness.



CLERGY CONGREGANT NO HARM *BRIT* (COVENANT)

NO-HARM

Anyone who regularly works with people who are thinking about suicide should have a no harm agreement. It is always advisable to ask a person who is thinking of suicide to contact someone whenever the thoughts threaten to turn into action. For clergy, it may make sense to frame this as a *brit*, a sacred covenant, between an individual and their clergy. This *brit*, can be very simple and can take the form of a contract that uses wording such as:

“Promise me that you will not kill yourself without making a phone call to _____ first and talking to them.

The words “Promise ME” are very important, because people in crisis will do a favor for another meaningful person when they will not do an action for their own benefit. The blank can be filled in with a counselor’s number, a local crisis/ suicide service, 911, or the night emergency service for the congregation.

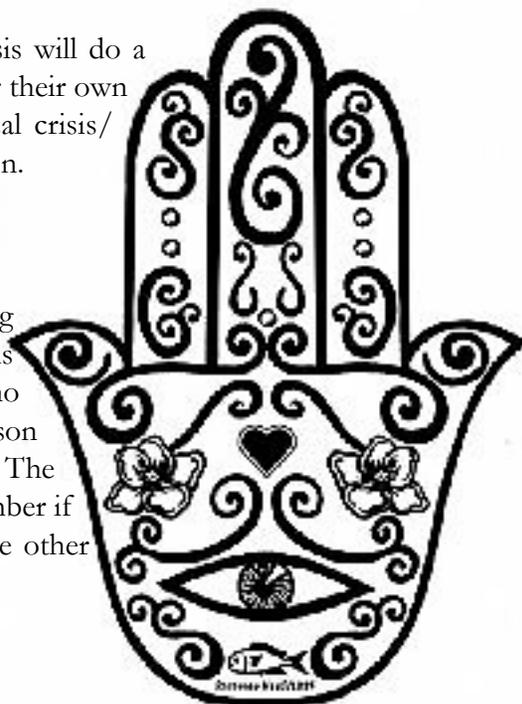
SELF-CARE

Increasingly, many crisis centers and community leaders are also using Self-Care contracts. These imply that the person can anticipate the crisis and take action to defuse it and may be especially useful for people who have some congregational supports. Together, a clergy member and a person select 3-5 actions the person can take that are soothing and restoring. The suicidal person will either try to do them first and call an emergency number if they don’t work, or try them during the call to see if they work before other measures are put in place.

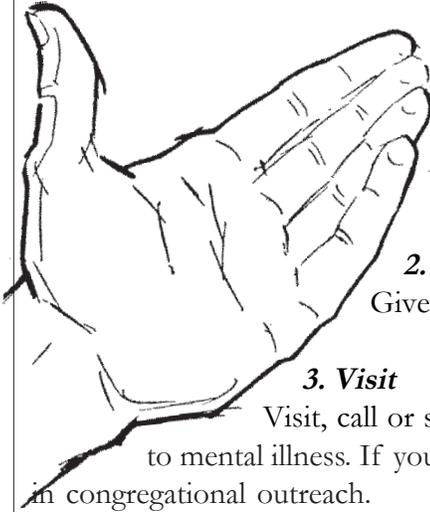
Examples:

- ❖ Herb Tea
- ❖ Prayer or meditation (you may want to work together on a soothing prayer to use in these moments)
- ❖ Listening to sacred or fun music
- ❖ Hot bubble bath
- ❖ Frivolous magazine
- ❖ Neighbor’s pet
- ❖ Walk around the block

Created by Eve Meyer, San Francisco Suicide Prevention and Rabbi Elliot Kukla, Bay Area Jewish Healing Center



TEN THINGS JEWISH CLERGY AND LAY LEADERS CAN DO TO REACH OUT TO THOSE LIVING WITH MENTAL ILLNESS



1. Listen

Listen empathetically to stories of mental distress and healing; respond with compassion and openness.

2. Speak

Give a d'var torah on mental illness or publish a newsletter article on the topic.

3. Visit

Visit, call or send cards when community members are hospitalized or home-bound due to mental illness. If your congregation has a Caring Committee make sure mental illness is included in congregational outreach.

4. Pray

Whenever illness or healing is mentioned in from the bimah in prayer acknowledge mental illness. Due to stigma most people living with mental illness and their care-givers do not assume that they are included in general prayers for healing.

5. Invite

Invite members of your congregation living with mental illness to tell their stories; acknowledge the bravery it takes for individuals to speak about their experiences.

6. Educate

Educate yourselves about mental illness, read, discuss and take part in trainings; make information on mental illness and community resources available in public places.

7. Examine

Your prayers, text studies and expressions of basic theology, so as not to blame those who are ill or perpetuate the concept that sin, guilt or weakness lead to mental illness or suicide.

8. Sanctify

Mark moments of healing such as coming home from the hospital or beginning new medications, as well as moments of loss with traditional and innovative Jewish ritual such as *mikvah* or *birkat ha'gomer* (the traditional blessing for surviving a life-threatening occasion).

9. Collaborate

Help to raise awareness on mental illness by collaborating with other faith groups, social service agencies, spiritual care agencies, and consumer organizations.

10. Support

Offer space for support groups to meet or start your own support group!

Created by Rabbi Elliot Kukla, Bay Area Jewish Healing Center



HIGH HOLY DAY STARTERS

SHABBAT SHUVA SERMON IDEAS

This year Mental Illness Awareness Week begins on October 5th, the same day as *Shabbat Shuva*, the special Sabbath of repentance and healing in between *Yom Kippur* and *Rosh HaShana*. The themes of this day and its timing make it an ideal time to raise mental illness awareness. Here are some ideas for themes and texts to start connecting mental illness to *Shabbat Shuva*.

1. Comfort

Shabbat Shuva concludes seven weeks of special *shabbatot* known as weeks of *nechemta*, comfort, with *Haftarah* readings focussed on themes of comfort and consolation. Comfort is a key theme of this season and a Jewish value. The central text of this packet frames the obligation to comfort one another succinctly. Rabbi Yohanan reaches out his hand to comfort Rabbi Eliezer when he is in pain. As this text teaches us “a prisoner cannot free himself.” (Brachot 5b) In other words, when we are suffering we need other people to reach out and take our hands in comfort. How can we comfort those in our congregation who are suffering from mental illness? What would it look like to reach out our hands to those who are living with the pain of mental distress in this season?

You might want to end this *D'var Torah* with the prayer “Give Me Your Hand” which is included in this packet.

2. Teshuva

The *Haftarah* reading for *Shabbat Shuva* begins with the word “*shuv*”, return or repent. *Teshuva*, a return to wholeness is the theme of this day and this season. Individuals, our community and the world all need repair in regards to mental illness. In the *Haftarah* reading for *Shabbat Shuva* we read the words from Micah which have formed the *Tashlik*, casting off, ritual that many communities observe during the high holiday season. We read: “The Holy One will take us back in love and will cover up our iniquities. You will cast out all our sins into the depths of the sea.” (Micah 7: 19) What do we need to cast off as a congregation and as a Jewish community in relationships to mental illness? Stigma, fear, broken relationships, misconceptions, or silence.

You might want to consider ending this *D'var Torah* with the “Prayer for Healing for Mental Illness” which is included in this packet.

3. Leadership

This year on *Shabbat Shuva* we read Parshat *Vayelekh*. The portion opens with Moses reflecting on his leadership in the face of imminent death and his passing on the mantle of leadership to Joshua (Deut 31: 1-3). What is the role of leaders (both clergy and lay leaders) in relationship to mental illness? On *Rosh HaShana* we read stories about Abraham, the first Jewish leader, and in many ways he sets the standard for what it means to lead a welcoming Jewish community. When two strangers appeared at his door Abraham ran to greet them and treated them with honor and respect, despite the fact that they were different than him and



unknown to him (Gen 18:1-16). These strangers turned out to be angels representing the presence of God. Those living with mental illness are in many ways strangers in our society. What would our congregation look like if we ran to greet everyone who came through our doors? What if we treated everyone as if they might be angels representing the presence of the Divine? How would this change the way we show leadership around mental illness?

You may want to accompany this *D'var Torah* with the hand-out “Ten Things Clergy and Lay Leaders Can Do to Reach Out to Those Living with Mental Illness” that is included in this packet.

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HIGH HOLY DAY STARTERS

YOM KIPPUR AFTERNOON STUDY GROUP ON THE BOOK OF JONAH

The book of Jonah is traditionally read on Yom Kippur afternoon. It is filled with relevant themes that can be connected to Mental Illness awareness. Here are some starting questions for a Yom Kippur discussion that could be led by lay leaders or clergy. You may want to consider handing out the sheet (also included in this packet) “Ten Things Clergy and Lay Leaders Can Do to Reach Out to People Living with Mental Illness” as a complementary action to this study group.

Discussion Questions on Jonah, Chapter One

Jonah in many ways is the most ordinary prophet. The book opens with Jonah fleeing from the call to speak out and be prophetic.

- ❖ Why does Jonah flee from God’s commandment to speak out and use his prophetic voice to help save the people of Nineveh?
- ❖ Are there times when you have been tempted to speak out about mental illness, suicide or emotional pain but stopped yourself or run away from this “call” to speak out?
- ❖ If so, what prompted you to run? If not, what helped you to speak out?

Discussion Questions on Jonah, Chapter Two

The Hebrew verb *yardeh*, to go down, is a very important word in this text. Jonah first goes down to Tarshish, then down into the hold of the ship, then farther down into sleep and finally he hits bottom in the depths of the sea in the fish’s belly. After that he finally begins to rise up — he is vomited out of the ocean abruptly and continues his journey.

- ❖ How is the image of depths related to the silence and stigma that surrounds mental illness? What do depths represent to you personally?
- ❖ As a community how might we begin raise each other up?

Discussion Questions on Jonah, Chapter Three

If the Book of Jonah ended here, at the end of chapter three, Jonah would be the most successful prophet in the Bible. It would also be the perfect *Yom Kippur* tale — the complete teshuva, repentance, of an entire city.

- ❖ Why do you think the story continues?
- ❖ What is unfinished for Jonah at this point?
- ❖ What, if anything, feels unfinished for you at this point?

Discussion Questions on Jonah, Chapter Four

The story of Jonah and the plant is all about learning empathy for all of creation from plants, to cattle to people.

- ❖ Why does Jonah miss the plant?
- ❖ What does the idea of empathy mean to you? How does it differ from pity?



❖ Do you feel empathetically touched by stories of mental illness in your community? Have you been helped when other people have expressed empathy for your own experiences with mental illness?

Conclusions

- ❖ Like Jonah, we all have the capacity to be prophets on this issue and many of us may want to run from this call because of the stigma and shame that surrounds mental illness. We are called by Jonah to lift our voices.
- ❖ Each of us has the potential to have empathy for those struggling with mental illness or to tell our own stories and allow others to respond empathetically to us.
- ❖ This is the essence of *teshuvah* — the repair of our relationships and our souls through empathy and kindness.

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