







## What family members may be experiencing: Mental Illness Lack of Fear of loved Shame and resources/access not responding one's wellbeing isolation to care to treatment Grandparents Guilt when Financial impact Relapse raising setting healthy of treatment grandchildren boundaries

5





Do's and
Don't of
Mental
Health
Conversations

DO

Ask Open ended Questions

DON'T

Don'T

Don'T

Don'T

Don'T

sadness, hopelessness

Do's and Don't of Mental Health Conversations

Listen intently to their feelings and ensure that they know their feelings are valid. Ask for clarity when necessary

DON'T

Invalidate feelings they share with you

9

Do's and Don't of Mental Health Conversations

DON'T

Attempt to have a personal conversation in a space that is not conducive to privacy

Do's and Don't of Mental Health Conversations

DO

Be encouraging and offer unwavering support

DON'T

Say that "everything is going to be alright". We cannot guarantee after we are done that things will get better. It takes time and effort to recover from a mental illness and some diagnoses last a lifetime

11

Do's and Don't of Mental Health Conversations

DO

Share lived experiences, when relevant. Finding common ground can help a person to open up.

DON'T

Don't offer specific solutions to issues. We want to leave solutions to mental health professionals.

Do's and Don't of Mental Health Conversations

DO

Ensure that you are creating a safe space by setting honest expectations for interaction.

DON'T

Don't make promises to keep something a secret. Sometimes when people are at risk, we need to share information for safety reasons. This is especially true with youth.

13

Association of
Catholic
Mental
Health
Ministers:
Developing
Mental
Health
Ministry

Principle 1:

Christ calls us to attend to those who suffer from mental illness and provide hope and healing

Mental Health Ministry Principle 2:

The scope and burden of mental illness in our society is enormous.

15

Mental Health Ministry Principle 3:

Those suffering from mental illness should not be stigmatized or judged.

Mental Health Ministry Principle 4:

The Church, mental health-care professionals, and scientific researchers should work together to improve mental health care.

17

Mental Health Ministry Principle 5:

We must meet and attend to those in need where they are.

Mental Health Ministry Principle 6:

Those impacted by suicide need our compassionate response.

19

## **Holy Listening**

Holy listening, that is, listening in the context of the healing presence of God, means hearing what a person tells us and letting their story unfold at their pace. It affirms a person's dignity and value. Their story is a sacred story. We respond and react to their story in a non-judgmental way with an unconditional love for the person. Holy listening allows and encourages people to relate their experiences in a supportive atmosphere that leads to comfort and healing.

## What your can offer

Ask, what does support look like for you?

May I pray for you and your loved one?

Meals, housecleaning, yardwork, respite

Transportation

Checking in with them periodically

Continuing to present even when the road is long

Smiles & Hugs

21

## Boundaries in ministry

Know your limits—when to refer

Ask for assistance

It's OK and healthy to set boundaries

Take care of your own mental health

Find balance and joy in your life

Know when you might be acting on your own "stuff"



