



Faith and Clergy

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The faith community is especially relevant to the behavioral health field in the Pikes Peak region because:

- The region has a substantial number of faith organizations;
- Leaders of the faith community are important opinion leaders within their congregations ? especially on the issues pertaining to behavioral health; and
- An integrated behavioral health approach includes a comprehensive wellness orientation (body, mind and spirit), requiring collaborations in this area.

Factors that promote recovery include a sense of community, rituals and other spiritual practices, an understanding of mental illnesses and psychiatric disabilities, and cultural competence. Factors that hinder recovery include discrimination and stigma, lack of outreach to persons with mental illnesses, an authoritarian perspective and/or lack of openness, and the historical schism between religion and the mental health community.¹

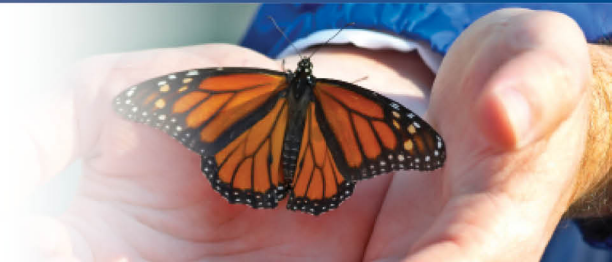
Partnerships can build supportive environments that promote recovery for individuals with mental health disorders and at the same time educate clergy, congregations, and members of the community at large about mental illnesses. Partnerships can reduce discrimination and stigma attached to mental illness and, ultimately, foster hope and help for everyone who experiences mental illness.

We have helped coordinate three full-day forums on issues relating to the military. See [Combat Stress Disorder Training for the Faith Community](#).

1. Building Bridges: Mental Health Consumers and Members of Faith-Based and Community Organizations in Dialogue, 2007, Substance Abuse

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