

Interfaith Service Homily

by: Brandon Fitch
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(Editor's Note: Brandon Fitch, who credits his faith as a leading factor in his process of recovery from mental illness, has spoken at two interfaith services and at least one plenary session at NAMI's yearly conventions. He has also been the guest lecturer at numerous meetings concerning faith and mental illness.)

This is our last get together at this wonderful NAMI Convention. We are gathered here from many religious faiths to ponder and wonder at all the information we have digested and to carry it home with renewed hope, inspiration, and determination. We will share what we have learned and rejoice in the many friendships we have made.

Many of us have come to this convention alone, from many disparate regions and countries, and expecting many different things. Yet, by making this pilgrimage to a single destination where many have gathered with a common concern, we have found a community, a "Community of Hope." We have discovered many new brothers and sisters, and we have made an immutable bond with each and every one. I believe that I can rightly say that each of us came as "an island," in John Donne's words, but will leave "a part of the main." We will leave enriched by the profusion of ideas, life experiences and perspectives that we have absorbed.

I know that the sun is setting on this assemblage, and though musically, we could call this the "coda," there is still one note yet to be played, one voice to join the wafting chorus.

When I was asked to speak at this service, I was asked to touch upon the theme of "*Building Communities of Hope*." A certain passage came to mind, and, if I may be slightly denominational, I will discuss 1 Corinthians 12:14-26 that so piqued my imagination. In it, the apostle Paul compared the church to a "...single body, which has many parts..." and yet "...it is still one body, even though it is made up of different parts..." Thus, Paul delineates the process by which a community must work together for a common cause such as improving the lives of those with a mental illness and their families. Yes, there must be one purpose, but it must be brought to fruition through cooperation and reciprocity and the careful use of what gifts and talents everyone can contribute.

The Faith Community can be an important part of the "body" of the *Communities of Hope*, by renewing the strength and spirit of its members. A faith belief gives us the tools to deal with both the tragic and mundane. It helps us to understand and believe in what cannot be seen. It gives us answers to our deepest spiritual queries, and ennobles us. Most religions give credence to the fact that we are, even in our imperfect state, an extension of God. He has given us life, and has endowed us with certain characteristics that only He possesses. He has given us discernment, judgment, and creativity. Most of all, He has given us the ability to fathom His mind. Despite our imperfection, we still have seen the face of God. With His all-encompassing love, He could do no less. In His many manifestations, our universal God is a God of love, and He has an honor that He means to maintain, that He will never abandon us, but that He will always enfold us to Himself. God truly loves us with a motherly love, a love imbued with the utmost tenderness, a love which will never let us be separated from Him. A love that will permit us, no matter how tarnished we are or will become, to know and be a part of Him.

If I might allude to myself for a few minutes, it was these thoughts and musings that somehow kept me going in the flurry of my almost insuperable symptoms. It was these remembrances that helped me to stave off the suicidal thoughts. However, this same faith gave me the conviction that I would surmount the symptoms, too. And, mercifully, for the most part I have. For eleven years I have been on one of the

new atypical anti-psychotics, and it has helped to overcome my symptoms. Faith surely helped me make it through.

But, the support of my mother and my friends and finding an appropriate and efficacious medication were also essential toward my recovery. I believe that God gives us tools such as medications as a form of healing grace. Surely, if He were against them, they wouldn't work! I believe that one who is ill must approach his God with humility and a deep desire to aid in his or her recovery, which means to take advice and medication, and to be cognizant of the times when one cannot go on alone.

I know that this was meant to be an interfaith service, and please bear with me as I have tried to be as broad as possible. Yet, as I now address those who are religious, I believe that such a service and organization as the Faith Community can bring about a consummation of the vibrant diversity which is represented here. There might be some very marked differences between religions, but the mountain ranges that seem to divide one area from another must and can be scaled. We have the power to create a truly interdenominational movement; one that will draw on our different perceptions and strengths. We all, in the sum of things, have too much in common and mental illness and stigma are such formidable foes. We must begin a concerted pilgrimage, a sort of "Pilgrim's Progress" to the "Celestial City." And at the forefront must be the clergy of our many congregations. Great strides are being made in the interdenominational movement, and yet, because of the illusory and intangible nature of mental illness, an illness that seems to defy logic, the clergy involved with the mentally ill and their families are somewhat diffident and guarded from one another and from us. They must not be. They must join hands and plunge into the thick of the fight and tend to the most vulnerable of their flock.

Perhaps the clergy in our faith communities have not been as forthcoming because they have not been as educated in their training about mental illness as they should have been, if at all. We can help with that. We can tell them our stories and of our suffering. We can provide them with information and books, such as *Souls Are Made of Endurance* by Stewart Govig, Ph.D. and *In The Shadows of The Steeples* by the same author.

The Faith Communities can be a very important and necessary part of the Communities of Hope, especially if we believe what Benjamin Franklin said, "*He that lives on hope alone will die fasting!*" As we work together, we must make it our first priority to help and assuage the sorrows and deficits that so afflict those of us who are mentally ill. We must be given the wherewithal to deal with these symptoms and the attendant stigma, with our clergy, family and professionals working in tandem.

Then we can lobby for our rights such as medication, parity, housing, support, jobs, and dignity. Thus, we can create an axis of politician, professional, provider, clergy, family and consumer. These "classes," so to speak, can work together as many parts of one single body.

So I ponder Paul's words further on in this passage, "*God Himself has put the body together in such a way as to give greater honor to those parts that need it. And so there is no division in the body, but all its different parts have the same concern for one another. If one part of the body suffers, all the other parts suffer with it... if one part is praised, all the other parts share in its happiness...*" How important it is to keep this in view. We are here because of the suffering of one so close to us and ourselves. What a wonderful thing to think of how special our family member or friend is in the eyes of God, that God has a purpose for him, that God truly cherishes him. And as for the illness... remember Paul's words, "*We fix our attention not on things that are seen, but on things that are unseen. What can be seen lasts only for a time, but what cannot be seen lasts forever.*"