

Emotional Well-being Sermon Series - Sermon 3

Sharing and Caring in the Community

Scripture text: Job 2:11-13

Note to leaders:

Some of the experiences shared by members during this sermon series may contain sensitive information. Do take some time to emphasize the importance of respect and confidentiality in the group before you start each session.

We pray that your small group will be a safe place for members to share and receive support.

The recommended time allocation for your group meeting is:

If you meet weekly :

- Worship through song (10 mins)
- Discussion - 1 session worth of core questions (40 mins)
- Discussion - 1 session worth of additional questions (30 mins)
- Sharing, Prayer, Fellowship (30 mins)

If you meet fortnightly :

- Worship through song (10 mins)
- Discussion - 2 sessions' worth of core questions (60 mins)
- Optional - additional questions (10 mins)
- Sharing, Prayer, Fellowship (30 mins)

Introduction:

In the midst of an ever-changing environment, we observe a growing trend of more young and elderly persons facing mental health concerns. How should we, as a Christian community, relate to these persons, pricelessly made in the image of God, who may be our family members and friends? What does a biblical and care-filled response look like?

The narrative in Job reveals some inadequacies in how Job's friends attempted to show care amidst Job's suffering. It also gives some indications to how a Christian community can support the well-being of such persons in practical and helpful ways.

Core Questions:

(If your group meets fortnightly, combine Core Questions of two sessions and choose one Further Question from either session.)

Consider which may be the crucial points for your group to focus on.

1) Job experienced one crisis after another that left him physically, emotionally, mentally and socially depleted of well-being. From Job 2:11-13, 6:14-30, 16:1-5, 19:1-4, 42:7-9, consider the different ways Job's friends related to him and addressed his predicament.

- **Which of their various actions were helpful and which were unhelpful for Job's emotional well-being?**

Intention:

Drawing from the biblical narrative about Job and his friends, and reflecting on their own experiences, invite your group members to consider what makes a helpful/not helpful companion that contributes towards the well-being of a person in need.

Suggestions for discussion:

The following passages in Job give insights on what “caring for a friend in need” should and should not look like:

- Job 2:11-13 (pay a visit, show sympathy and comfort, feel and cry with him, be present with him in silence).
- Job 6:14-30 (willing to associate and not shun away, willing to be of help)
- Job 16:1-5 (words that are insensitive, hurtful or critical rather than comforting)
- Job 19:1-4 (Withholding judgements / criticism vs. diagnosing person’s problems and errors)
- Job 42:7-9 (Prayer support & intercession)
- Being a good listener vs. being quick to provide personal opinions, suggested solutions, or Christian axioms.
- Understanding what the person is really going through vs. giving superficial or clichéd reasons (spiritual, physical, social, etc.) for the person’s situation.
- What other observations do the members have concerning the ways Job’s friends “ministered” to him?

Invite members to consider which words are more or less appropriate in communicating care for a person’s well-being.

- Refer to the dialogue box below and explore possible alternative words.
- When would you speak or NOT speak to them? What would the context be?

<u>Being a HELPFUL Comforter</u>	
Words that can be unhelpful & even hurtful	What would you say or how would you respond? (be mindful of each unique context)
“Everything happened for a reason.”	“You must be feeling confused and lost even now.” or “It must be hard for you to make any sense now.”
“It could be worse.”	“It hurts to hear what you are going through. How can I help?”
“All things work for good to those who love God.”	“It must be difficult for you to understand why this is happening to you.”
“I know, right! I have experienced this before. It was so.... I felt like...”	“I can only imagine what you are going through is not easy for you. Would you like to share more with me?”
“You know, this is what you should do...”	“What would you be thinking now?”
“Snap out of it. Be positive!”	“You must be finding it very hard to remain positive at this moment.”
“God only gives you what you can handle.”	“You’re not alone. I’m here with you.”
“You don’t have enough faith.”	“If it helps, I can support you in prayer.”
“Reject it. This is not God’s will for you.”	“Sounds like you are afraid to go through this alone.”
“Don’t need to be anxious. Time will heal.”	Say nothing, Just give the person a hug.
“Don’t be so stress about it. God will make everything turn out well.”	“You must be feeling really stressed. How may I pray for you?”

2) The sermon presents three forms of care (*Company, Co-suffering and Consolation*) where, we as individuals or as a community, can extend to someone who is facing a mental health concern.

- Which of these three is your small group strongest at?
- Which can you improve on as a group?

Intention:

Sometimes, we can flood a person in need with a-hundred-and-one possible solutions, but their need at that point may simply be your presence, listening ear, understanding heart or a shoulder to cry on. Spouting cheap advice or clichés to spiritualize their situation definitely would not help. What then would “good” help, or effective caring look like?

Help members to explore and consider:

- What would Company, Co-suffering and Consolation look like for each of the members?
- Which is very evident in your small group? Which is less evident?
- Is there any co-relation to the gifting or preference in your group? e.g. if the group likes to spend much time together, “Company” may be more evident to anyone who comes in contact with the group.

Also help members to explore and consider:

- Understand how the person in need really wants to be helped, by checking in with him or her. Do not make assumptions, as personal situations may vary.
- Ask your small group to consider: How would they want others to help them in realistic, tangible and practical ways if they themselves are the ones in need?
- Differentiate between:
 - **Cure / Treatment**, e.g. medical therapies, psychological interventions, counselling, which involve only trained professionals.
 - **Care / Healing**, e.g. spiritual direction, mutual support groups, spiritual friendship, companionship, practical support by helping with everyday tasks.
 - Most of us are not equipped to give Treatment or help to Cure, and it would be dangerous or detrimental for us to attempt to

“The most useful thing a friend can do is keep in constant contact with the mentally ill patient. This is true whether or not the person is suicidal. To know that your friend remains your friend even though you are mentally ill, or even before you know that, when you think you are just miserable and grumpy, is a great aid toward health. A phone call, a lunch, or even an e-mail can bolster a sagging mood. Don't expect your mentally ill friend, however, to be fun to be with. It is important for you to realize that the friend's poor mental health may look like rejection of friendship, but it is not really this. It is just a sick brain, barely functioning. [...] Being a friend or clergy to a mentally ill individual can be difficult. Because of the stigma of mental illness, the ill person may not feel able to open up to you. Do not be offended. Be consistent in your concern, prayer, and inquiries. Let them know that your friendship or care [...] is unconditional. And remember, since mental illness can be a terminal disease, you may be helping to improve or even to save a life.”

- Kathryn Greene-McCreight, *Darkness Is My Only Companion*, chap.12.

do so. However, as brothers and sisters in Christ, we very much have a role in showing Care and supporting the process of Healing.

- Differentiate between:
 - “Do For” – this involves taking over a task that a person is unable or unwilling to do.
 - “Do With” – this is undertaking a task together with a person. In the process, the person is trained and enabled to better perform the task, or they are emotionally supported or encouraged.
 - “Being With” – this is not performing any task, but simply being present with and being attentive to the person.
 - All of the above may help to support a person’s practical and emotional well-being. However, depending on the context, different approaches may be needed. Ask your small group to consider which contexts or situations each of these might be more helpful or less helpful.

Can your small group, and BRMC at large, be a community that provides “care-full” attentiveness?

Further Question:

(Optional question for discussion if time permits. Do allocate adequate time for prayer and fellowship.)

- 3) *“The Church can be that welcoming community that embraces people with Alzheimer’s and dementia, a place where those who are suffering from illnesses and limitations are seen not as outsiders but as part of the communal reality”*

– Dr. Roland Chia, *“Darkness has become My Companion”*
(full article available at <https://ethosinstitute.sg/darkness-has-become-mycompanion/>)

- What does Dr. Chia mean by describing “as part of the communal reality”?
- What does it take for your church community to be one that welcomes others and actively cares for their well-being, regardless of their emotional or mental concerns and well-being?
- Are you ready to be a part of this community that cares and shares? Why or why not?

Intention:

Invite members to consider how your small group can be more receptive and open to relate with people who may not be the “same” as them.

Suggested points for discussion:

- Our community includes persons of all spectrum e.g. persons with various disabilities, persons with mental health concerns, etc.
 - o Get the members to share some of their personal encounters.
 - o What was their experience like?
 - o How did they show care and acceptance?
- Consider the following:
 - o *“I’m ready to accept and relate with such persons because...”*
 - o *“I’m not ready because...”*
 - o *“I’m want to but I feel... because...”*
- If Jesus were to visit your small group as a person in need,
 - o Would they recognize Him?
 - o How would the members relate to him or treat him?

Suggestions for Prayer:

- 1) Recall an occasion where you were helpful/less helpful in aiding someone towards their well-being. If you could do it again,
 - How would you do it differently?
 - What would you ask of God to help you change?
 - Which of your gifts or abilities would you use to show care and share?Share with your group members and pray for one another.
- 2) Pray for divine opportunities where you can be involved in ministries that care for persons in need and help them in their well-being.
- 3) Pray for your small group.
 - How can God use your small group to be a community that welcomes, cares and shares?
- 4) Pray for BRMC to be a community that cares and shares.
 - What do you think God would desire BRMC to be and do so that she be such a community? What needs to change?
 - Commit these observations and needs to God and ask Him to work His purpose and will into His church.