VALUES STATEMENT

“...a greater appreciation of the whole person is emerging in the mental health field...”

The California Mental Health & Spirituality Initiative was established in June 2008 at the Center for Multicultural Development of the California Institute for Mental Health. It developed out of a grassroots movement founded in 2006 by Jay Mahler and other consumers, family members, and service providers. The purpose of this document is to state the values that guided the formation, and now operation, of this initiative.

RESPECT FOR ETHICAL AND LEGAL BOUNDARIES. We advocate for the inclusion of spirituality as a potential resource in mental health services. None of our work should be construed as advocating that mental health providers should “push religion” on the people they serve. There are barriers (including political, legal, and cultural) between the public mental health system and spirituality/religion that need to be addressed carefully and respectfully. We are committed to helping service providers understand these barriers so that they can make informed choices about policy and practice. In particular, we believe that mental health providers should never promote a particular religion or proselytize. They should, however, be receptive and responsive to the expressed interests of their clients and potential clients, including their requests for support with the spiritual aspects of their wellness and recovery.

SPIRITUALITY INCLUDES, BUT IS NOT LIMITED TO, RELIGION – There are many ways to define “spirituality” and “religion.” We utilize the following definitions: Spirituality is a person’s deepest sense of belonging and connection to a higher power or life philosophy which may not necessarily be related to a religious institution. A religion is an organization that is guided by a codified set of beliefs and practices held by a community, whose members adhere to a worldview of the holy and sacred that is supported by religious rituals.

SPIRITUALITY IS A CORE COMPONENT OF CULTURAL COMPETENCY – The public/private mental health system in California recognizes that cultural competency, including the ability to understand different worldviews, is necessary for effective practice. Spirituality represents a core value within many ethnic and cultural communities and is often considered a primary resource. Faith-based organizations are a vital source of community leadership for individuals, families, and neighborhoods. Therefore, spirituality can be regarded as an essential connector for ethnic and cultural communities and for understanding wellness, illness, intervention, and recovery. We are committed to the inclusion of multicultural voices that represent California’s broad array of faith traditions and practices.

SPIRITUALITY IS PART OF A HOLISTIC APPROACH TO MENTAL HEALTH -- We know that physical health can influence an individual’s mental health. The same is true for spirituality. Understanding spirituality as an element in wellness promotion and mental health recovery brings us closer to dealing with the whole person. Many persons from diverse, multicultural communities utilize spiritual and/or faith-based organizations as a source of social support and hope in their wellness promotion and healing process. Spirituality can be a powerful tool to inspire hope, create motivation, and promote healing. By integrating spirituality and multicultural factors into prevention and treatment, a greater appreciation of the “whole person” is emerging in the mental health field.

SPIRITUAL EXPERIENCES CAN OCCUR DURING ALTERED STATES -- Some people experience altered states with a spiritual component that can support the journey toward wellness and recovery. For some, this
can be a life-changing event. Too often, this spiritual component has been ignored, labeled, or confused with delusions or other symptoms. Providers should respond respectfully and appropriately when clients ask for assistance with these experiences.

ENGAGEMENT OF FAITH-BASED ORGANIZATIONS – Faith communities and spirituality can be a source of coping and social support for those struggling with the impact of mental health issues: poverty, homelessness, loss of meaning and purpose, stigma, isolation, etc. Some faith communities have become “welcoming congregations” to people with mental health issues, and others have adopted mental health advocacy as part of their social justice agendas. Mental health agencies are better able to reach unserved, underserved, and inappropriately served populations when they invite collaboration with local faith-based organizations.

We acknowledge that some individuals and families have experienced traumatic interactions with religious communities. In these instances, it is important to provide a safe environment for talking about these experiences in an open and accepting way.

THE PARAMOUNT IMPORTANCE OF CLIENT CHOICE – We are passionate about choice – including individuals’ and families’ choice not to engage with spirituality and/or religion. Mental health services are enriched by an open, welcoming, and non-judgmental stance toward spiritual, religious, and cultural beliefs, practices, rituals, values, theologies, and philosophies – including non-belief or non-practice -- that may be different from one’s own. We welcome the opportunity to be enriched by the wisdom that others have gleaned from their own spiritual path and/or life experience.

NEED FOR NETWORKING AND TECHNICAL ASSISTANCE -- County mental health authorities and community-based organizations already interact with spirituality and faith-based organizations in numerous ways. We believe they can benefit from knowing more about what other individuals, agencies, and systems are already doing and what results they have had. It is the role of the California Mental Health & Spirituality Initiative to facilitate this technical assistance.

This values statement was revised and adopted by the Initiative’s Statewide Steering Committee (then called “Work Group”) on January 20, 2009. Because we are always learning, this values statement will be updated over time as needed.

STATEWIDE STEERING COMMITTEE, CALIFORNIA MENTAL HEALTH & SPIRITUALITY INITIATIVE:

- Patty Blum, PhD, CPRP, Crestwood & Dreamcatchers, Sacramento, CA, 209-481-8203, pblum@cbhi.net
- C. Rocco Cheng, Ph.D., Corporate Director of Prevention and Early Intervention Services, Pacific Clinics, Irwindale, CA, 626/960-4020 x 208, rcheng@pacificclinics.org
- Gigi Crowder, MSW, Ethnic Services Manager, Alameda County Behavioral Healthcare Services, 510-777-2118, gcrowder@acbhcs.org
- Khani Gustafson, MSW, Project Manager, California Mental Health & Spirituality Initiative, Center for Multicultural Development, California Institute for Mental Health, 916-317-6230, kgustafson@cimh.org
- Manuel J. Jiménez, Director, Merced County Mental Health, 209-381-6805, Manuel.Jimenez@co.merced.ca.us
- David Lukoff, PhD, Professor of Psychology, Institute for Transpersonal Psychology & Founder, Spiritual Competency Resource Center, 707-763-3576, david.lukoff@gmail.com
- Jay Mahler, Consumer Relations Manager, Alameda County Behavioral Healthcare Services, Oakland, CA, 510-567-8135, jmahler@acbhcs.org
- Rev. Laura L. Mancuso, MS, CRC, Interfaith Chaplain & Consultant, Goleta, CA, 805-886-9193, mancuso@west.net
- Kumar Menon, MSPA, Chief, Community & Government Relations, Office of the Director, Los Angeles County Department of Mental Health, Los Angeles, CA, (213) 639-6757, KMenon@dmh.lacounty.gov
- Min. Monique Tarver, Mental Health and Spirituality Events Coordinator/Consultant, Peers Envisioning and Engaging in Recovery Services, Oakland, CA, (510) 552-5284, mtarver@peersnet.org
o Alice J. Washington, Training, Policy, and Research Associate, California Institute for Mental Health, Sacramento, CA, 916-556-3480, Ext. 139, awashington@cimh.org