Students Battling Mental Health Crises

I WAS STUCK. There is no better way to phrase it. I was in a situation where my faith directly conflicted with my job. This situation needed divine intervention.

I was teaching an online high-school music-appreciation course. Generally, those types of courses are not as personal as traditional classroom courses. But in this situation, circumstances became quite personal.

A student I’ll call “Andrew” enrolled in the course. As I made phone contact with students and parents to initiate the class, I learned that “Andrew” had previously been “Chelsea.” Indeed, I was confronted with a gender-identity crisis. I also quickly learned that this student’s mother had mental health issues.

The mother bared her soul to me while on the phone. She explained how the gender-identity decision had resulted in a downward mental spiral for both her and her daughter. Chelsea had been removed from school and become “home-bound” due to disintegrated mental health and suicidal tendencies.

In seeking how to best grapple with this issue that she admitted was sinful, Chelsea’s mom turned to her church. She tearfully said her church did not handle the situation well, condemning and ostracizing both her and her daughter.

As a result, the mother had turned to secular psychology. She explained how the psychologist encouraged the acceptance of the new identity and to begin utilizing “Andrew’s” preferred name and pronouns. The mother, struggling with her own developing mental health issues, was at the end of her rope.

I ministered to both where possible, considering the public-school restrictions under which I operated. At the end of the course, this girl and her mother thanked me for demonstrating that I cared.

The Effects of Sin on Mental Health

Not many years ago, psychologists would have characterized Chelsea’s situation as a mental illness; specifically, “gender dysphoria.” In this postmodern, relativist era, it is politically incorrect to characterize this condition as mental illness. Rather, it has been elevated to hero status where the gender-confused individual is courageously embracing his or her “true identity.”

As with most matters of right and wrong today, a person’s gender is seen as relative and fluid. However, Jeremiah 1:5 characterizes God as being intimately involved in human creation and knowing each individual personally. Confusion is a tactic of the devil, not the act of our orderly God (see 1 Corinthians 14:33). God is precise, exacting, truthful, and rational (see Proverbs 30:5).

Satan’s preferred battlefield is the mind—particularly, children’s minds—and his strategy is not limited to just the homosexual agenda. Research indicates a rising trend of many types of mental illness. Does a correlation exist between the growing secularism and worsening mental health of subsequent generations?

To embrace atheism and claim there are no moral absolutes is illogical, irrational, and argues against nature itself. We must pray for hedges of protection for our and our children’s minds (Job 1:10), ensure church supersedes all other activities (Hebrews 10:25), and safeguard family devotion (Proverbs 22:6).

According to the U.S. Centers for Disease Control and Prevention, 43 percent of LGB (lesbian/gay/bisexual) teens have seriously considered suicide, compared with 15 percent of heterosexual teens. Twelve percent of heterosexual teens have made a plan to kill themselves, versus 38 percent of LGB teens (cdc.gov). The homosexual agenda is wreaking havoc on
our children and causing a mental health crisis.

As Christians, we cannot ignore this issue. We know the truth, and it is liberating (John 8:32). We need to eschew the spirit of fear and allow the Spirit of power, love, and a sound mind to work through us to help troubled teens (2 Timothy 1:7).

The Effects of a Caregiver’s Mental Health

As a teacher and school administrator, I have seen the negative impact a caregiver’s mental health problems can have on their children. I have encountered many situations where a child’s misbehavior resulted from the effects of a stressful home life. Generally, children manifest inappropriate behavior—whether in school, Sunday school, or youth group—because of underlying issues. Rarely does their misbehavior result from a child simply being incorrigible.

Research shows several correlations between the variables of mental health conditions and socioeconomic circumstances. For example, mental health significantly correlates with poverty. Individuals of limited means and opportunity are more likely to develop some manner of mental health illness; conversely, mental illness can result in poverty. To be clear: correlations do not define or certify relationships between variables. There are many instances where affluent individuals exhibit mental health illnesses. Correlations simply express statistical trends.

These children may come to school or church after giving care to younger siblings due to a parent’s inability to fulfill their caregiving role due to mental illness. These children often exhibit impaired social functioning that hinders their schoolwork, intensifies mood swings, creates social isolation, heightens potential for drug abuse, enhances their anxiety level, and creates feelings of guilt and bitterness.

These students want to please but are stuck between a rock and a hard place. They are ensnared in a vicious cycle where a caregiver’s mental illness affects the child’s mental health, resulting in misbehavior which compounds the caregiver’s mental health issues.

A Word About Mental Illness

Over the years, conditions like depression, anxiety, schizophrenia, and bipolar disorder have often been seen by the church as reflecting an impaired relationship with Christ. While this is sometimes true, this is often not the case.

If someone injures their arm, we do not think twice about taking them to the emergency room. Dental exams are routine among Christians. To combat certain sicknesses, we take an antibiotic. So when someone struggles with depression, why do we question their spirituality?

Our Lord is omnipotent—able to heal depression as easily as He is able to heal a broken bone or clean someone’s teeth.

However, God has never cleaned my teeth nor reset my broken arm. While He is able, He has instead provided access to knowledgeable health-care providers to help me maintain my health. In like manner, mental health professionals provide assistance to individuals struggling with debilitating mental conditions.

The Role of the Church

First, the church must understand mental illness is not a taboo topic.

Second, when individuals seek help for their mental condition, we should encourage them, pray for them, and direct them to a Christian mental health professional. Christian psychologists will help individuals apply Biblically sound principles to their lives.

Third, the church must exhibit patience when working with children who may be suffering from a caregiver’s inability to fully perform their duties due to their condition. Children need the love, and godly relationships more than anything. We as Christian adults can be role models who display the fruit of the Spirit (Galatians 5:22-23). Christian adults can be mentors and godly “grandparents” to these kids.

I am reminded of one such relationship I see each week in my church (although mental health is not the issue in this situation). Our “church mother,” Katherine, is 97. Because Sister Katherine, who is in stellar physical condition, wanted to remain active in ministry, she became a teacher in our children’s ministry. While Katherine is a role model for the entire church, she has accepted a role by which her wisdom, experience, and godliness is impacting the youngest generation. Such church relationships can revolutionize a child’s life.

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