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## UNIQUELY GIFTED: A THEOLOGY OF MENTAL ILLNESS FOR INCLUSIVE ECCLESIOLOGY

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UNIQUELY GIFTED: A THEOLOGY OF MENTAL ILLNESS  
FOR INCLUSIVE ECCLESIOLOGY

by

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in partial fulfillment

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## Abstract

**ABSTRACT:** This thesis surveys the possibility of a theology of mental illness in order to create an inclusive ecclesiology for modern churches. Mental illness is greatly stigmatized in the Church as demonic or spiritual and moral failing. In combat of such stigma and prejudice to create an inclusive atmosphere in the Church, a positive theology of mental illness understood as a unique gifting is argued for. With the elusive nature of mental illness in both definition and experience taken into account, all aspects of mental illness are considered, such as biology, psychology, and philosophy of mental disorder. The thesis understands mental illness in light of the *Imago Dei* and considers an adapted model of disability theology to rationalize such ideas. In addition, historical figures displaying symptoms of mental illness are compared with the uniquely gifted individuals in Scripture to see similarities. From these ideas, a theology of mental illness is positively constructed as a unique gifting. With a positive theology of mental illness given, models for practical inclusion are given for clergy and laity to implement.

**KEY WORDS:** Mental Illness, Theology, Ecclesiology, Inclusivity, Theology of Mental Illness, Disability Theology, Imago Dei, Image of God

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## INTRODUCTION

According to the National Alliance on Mental Illness, nearly 1 in 5 Americans experience mental illness in a given year, with 1 in 25 adults experiencing a severe disorder.<sup>1</sup> In other words, 20% of family members, friends, acquaintances, professors, coworkers, students, and peers suffer from a mental disorder. These illnesses are widespread across the United States, but even in light of their hefty prevalence, individuals with mental illness are victims of stigma in their day-to-day lives. Researchers at the National Center for Biotechnology Information state that stigma is the “most formidable obstacle to future progress in the arena of mental illness and health,” going on to say that stigma is the leading issue keeping patients from seeking care, breaking family and friend relationships, and discriminating in the workforce and hiring process.<sup>2</sup>

In her discussion of Erving Goffman’s theory of stigma, Nancy Eiesland explains the sociological construction of stigma arises through interpersonal interaction; prejudice originates to segregate the socially denied attributes in certain individuals because those attributes discredit the individual’s societal status.<sup>3</sup> Unfortunately, this reality is not reversed within the walls of the Church.<sup>4</sup> There exists a mentality of this sociological naming of “otherness” and “abnormality”

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<sup>1</sup> National Alliance on Mental Illness, “Mental Health by the Numbers,” NAMI.org, <https://www.nami.org/learn-more/mental-health-by-the-numbers>, (Accessed April 12, 2018).

<sup>2</sup> Office of the Surgeon General (US), Center for Mental Health Services (US), and National Institute of Mental Health (US). *Mental Health: Culture, Race, and Ethnicity: A Supplement to Mental Health: A Report of the Surgeon General*. Publications and Reports of the Surgeon General. Rockville (MD): Substance Abuse and Mental Health Services Administration (US), 2001. <http://www.ncbi.nlm.nih.gov/books/NBK44243/>.

<sup>3</sup> Nancy L. Eiesland, *The Disabled God: Toward a Liberatory Theology of Disability*, (Nashville: Abingdon Press, 1994) 59.

<sup>4</sup> Stephen Grcevich, *Mental Health and the Church*, (Grand Rapids, MI: Zondervan, 2018), 16.

in church congregations that reflects the stigmatic voices in the world. There also exists the notion that perhaps mental illness is not quite reality in terms of the ecclesiastical, or practicing, community, and is often stigmatized among church members. Within this stigmatization and prejudice, Christians often ignore and possibly reject that such disorders are in fact a characteristic of the one diagnosed, a part of the person's ontology, even though it is quite difficult to separate the disorder from the individual since it affects the "self," and seems to characterize much of the person's life.<sup>5</sup> The Church perpetuates the notion that mental illness is either caused by sin, continued by a lack of faith in God's power to heal, or a hopeless effect of the fall, and therefore rejects persons with mental illness all-together..<sup>6</sup>

Thus, the community critical for the well-being of believers and non-believers with mental illness often goes neglected in Christian circles because the Church either believes the need for complete healing of the disorders, or the Church rejects such people from entering the community entirely. These blatant forms of rejection are birthed from and nurtured by sustained stigma both outside and inside the Church. The Christian community, therefore, not only neglects an opportunity to love its neighbor and witness to an issue that both the world and the Church face, but it also loses the possibility of understanding such mental "illnesses" as something worth embracing. If the confessional community of Christ affirms that everyone is created in the Image of God, and that every person has the unique opportunity to live in covenantal relationship with his or her Creator, then the reality of stigma in regard to mental illness must change, beginning in the Church.

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<sup>5</sup> Ashok Malla, Ridha Joobar, and Amparo Gracia, "Mental Illness is Like Any Other Medical Illness," *Journal of Psychiatry and Neuroscience* 40, no. 3 (May 2015).

<sup>6</sup> Eric D. Wesselmann and William G. Graziano, "Sinful and/or Possessed? Religious Beliefs and Mental Illness Stigma," *Journal of Social and Clinical Psychology* 29, no. 4 (April 2010).

Once this change is engaged, therein lies the possibility for those labeled with “mental disorder” to participate in communal worship, and to explore the means in which God created him or her in His likeness as faith progresses. Yet, this exploration must necessarily include the attributes of the experienced mental “disorder”<sup>7</sup> and how those “disorders” either influence or compose the individual’s personhood. If the furtherance of faith of the individual does not at least acknowledge, let alone include, such matters it is neither authentic nor accurate. This process of exploration must, then, be done faithfully and carefully, with understanding in regard to both salvation and sanctification. In other words, this process, that is normalized to all who profess belief in Christ, must also be applicable and processed in the lives of those with mental “disorder.”

For these reasons, this thesis surveys the possibility of not only the acceptance of the population of persons with mental “disorder,” but also the possibility of *embracing* such “disorders” in review of these individuals’ personhood. First, this thesis gives an overview as to how mental illness is defined and what may cause or perpetuate it. This overview includes the legal definition of disability, the procedures of diagnoses, and the various causes of mental disorder. Following thereafter is an explanation of the Image of God, and how humanity is created in the likeness of its Creator, which precedes a portion devoted to a discussion of disability theology. The importance of the *Imago Dei* in regard to this discussion is realized in the discussion of the personhood of individuals with mental disorder. Coinciding with this is disability theology, which incorporates this concept and adds a liberation understanding of those with mental illness in light of the embodied Christ. This discussion includes seminal works from

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<sup>7</sup> It is to be noted a significant transition here that will be thematic throughout this thesis, an important motif. The word “disorder” has now been placed within quotation marks to symbolize the beginning of a change in perspective of such mental capabilities in individuals that possess a mental “disorder.” Therefore, the word “disorder” comes into question in this thesis, however, this concept will be expounded upon later.



theologians such as Nancy Eiesland and Amos Yong to better understand sociological and theological understandings of how the disabled persons of society are viewed followed after by how they should be viewed.

After this, a brief look into individuals' lives such as Vincent van Gogh and Martin Luther are given to show a giftedness that seems to coincide, or at the very least work alongside, mental disorder. This discussion precludes a survey of uniquely gifted persons in Scripture, and their impact on and reception by society. These chapters culminate to the thesis question: How does one theologically evaluate mental illness in light of the *Imago Dei* to understand the personhood of such people with said mental "disorder"? Following is the applicable praxis from conclusions made in order to practically implement inclusive strategies in the modern day Church.

The purpose of this thesis is to bring awareness to the overlooked, prevalent issue of ignoring individuals with mental illness in the Church, to offer a different perspective of the life and experience presently and in the future for those that have mental "disorder," and to call the Church to action in creating a more inclusive environment for those with mental "disorder" to worship and participate in the confessional community. Ultimately, this thesis seeks to liberate the marginalized minority of those with mental "disorder," bring justice to the institutional Church, and provide reconciliation between the two in working towards a healthier community representative of Christ.

## UNDERSTANDING MENTAL ILLNESS

Modern research in the field of psychology has come a long way within the past century, and recent studies have advanced biological psychiatry immensely.<sup>8</sup> However, there remains an element of elusivity in both the study and definition of such matters regarding the human brain, especially in the realm of abnormal psychology. This is due in part to the extensive and multifaceted complexity of the human perception of others and the self, behavior, and consciousness.<sup>9</sup> This obscurity stems also from the element of philosophy included in mental illness, unlike other illnesses, since the nature of mental disorder affects the very core of the individual's essence.<sup>10</sup> To accommodate, this chapter contains a versatile and yet brief study of mental illness coinciding with the elaborate nature of abnormal psychology. This study approaches general biological, behavioral, sociological, philosophical, and phenomenological perspectives and models of explanation for mental illness.

Legally, the United States' government defines disability as "a physical or mental impairment that substantially limits one or more major life activities of such individual; a record of such an impairment; or being regarded as having such an impairment."<sup>11</sup> In the discussion of disability exists mental impairments, and the Diagnostic and Statistical Manual for Mental Disorders (DSM-5) identifies mental disorders as such impairments. They define a mental disorder as, "a syndrome characterized by clinically significant disturbance in an individual's

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<sup>8</sup> Ashok Malla, Ridha Joobar, and Amparo Gracia, "Mental Illness is Like Any Other Medical Illness," *Journal of Psychiatry and Neuroscience* 40, no. 3 (May 2015), 147.

<sup>9</sup> *Ibid*, 148.

<sup>10</sup> *Ibid*, 148.

<sup>11</sup> "U.S. Code, Title 42, Chapter 126, § 12102 - Definition of Disability," *Cornell Law School: Legal Information Institute*, <https://www.law.cornell.edu/uscode/text/42/12102> (accessed August 5, 2018).

cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning.”<sup>12</sup> Along this, the National Institute of Mental Health (NIMH), a United States’ government-based resource, defines any mental illness as, “a mental, behavioral, or emotional disorder. [Any mental illness] can vary in impact, ranging from no impairment to mild, moderate, and even severe impairment...which substantially interferes with or limits one or more major life activities.”<sup>13</sup> And the National Alliance on Mental Illness (NAMI) adds that mental illness is a condition which “affects a person’s thinking, feeling, or mood.”<sup>14</sup> Important to note, however, is Stephen Grcevich’s, a clinical psychiatrist and founder of Key Ministries, necessary mentioning that “disability law also recognizes that a person is still considered to have an impairment even when their conditions are episodic or in remission.”<sup>15</sup> Grcevich goes on to explain that mental illness may be episodic in patients as symptoms come and go, hidden away from society within the patient’s lifestyle and personality, and situation specific as certain stimuli arise in ranging environments; therefore, though the mental illness may appear hidden in social instances or periodically remissive, the individual is still classified as having an impairment, and thus they remain legally disabled.<sup>16</sup>

All together these definitions point to similar themes of abnormal psychology.

Consequently, Ronald J. Comer of Princeton University harmonizes these characteristics of each

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<sup>12</sup> American Psychiatric Association, *Diagnostic and Statistical Manual for Mental Disorders*, 5th ed. (Arlington, VA: American Psychiatric Association Publishing, 2013), 20.

<sup>13</sup> National Institute of Mental Health, “Mental Illness,” National Institute of Mental Health, [https://www.nimh.nih.gov/health/statistics/mental-illness.shtml#part\\_154785](https://www.nimh.nih.gov/health/statistics/mental-illness.shtml#part_154785) (accessed August 5, 2018).

<sup>14</sup> “Mental Health Conditions,” National Alliance on Mental Illness, <https://www.nami.org/learn-more/mental-health-conditions> (accessed August 5, 2018).

<sup>15</sup> Stephen Grcevich, *Mental Health and the Church* (Grand Rapids, MI: Zondervan, 2018), 35.

<sup>16</sup> *Ibid*, 36.

definition into four commonalities: deviance from contextual cultural norm, periodic states of distress, possible dysfunctional lifestyles due to an abnormality interfering with everyday activity, and at the very worst, dangerous behavior to oneself or others.<sup>17</sup> Additionally, these disorders are recently being defined as spectrum disorders, meaning they are experienced at different variations and intensities from patient to patient, with symptoms overlapping from different disorders.<sup>18</sup> In other words, mental disorders have common characteristics that define individual disorders, but they can range in severity from person to person. Thus, even in the midst of such correlation in the range of definitions regarding abnormal psychology, Comer recognizes the subjectivity and ambiguity burdening both the application of such definitions and the diagnosis process over a range of patients.<sup>19</sup> He supports the considerable advancements made in the field of psychological research, but he does acknowledge the elusive nature of mental illness in regard to a generic, objective definition. This is important to remember in the discussions to follow, for though there is objective and reliable evidence and reasoning for such disorders, there remains an element of obscurity within their explanation.

To begin the overview of causation and composition of mental illnesses, the biological model of explanation for abnormal behavior looks to issues within brain anatomy and chemistry. The human brain is comprised of nearly 100 billion neurons and thousands of billions of support cells, both of which comprise large groups of neurons in such areas known as brain regions.<sup>20</sup> The neurons within each region control important bodily functions and behavioral attitudes, and

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<sup>17</sup> Ronald J. Comer, *Abnormal Psychology*, 8th ed. (New York, NY: Worth Publishers, 2013), 4.

<sup>18</sup> Deepti M. Lobo and Mark Agius, "The Mental Illness Spectrum," *Psychiatria Danubina* 24, no 1 (September 2012): 157.

<sup>19</sup> Comer, *Abnormal Psychology*, 5.

<sup>20</sup> *Ibid*, 48.

each region is specialized in its function.<sup>21</sup> Clinical researchers have found a connection between dysfunction, impairment, or damage within certain regions of the brain and certain psychological disorders.<sup>22</sup> The biological causation for each mental illness is acute and distinct from other illnesses because of the specialization of each brain region. For example, in a psychotic disorder such as schizophrenia, brain imaging has proved that cognition can be impaired to an extent because of a reduction in the density of grey matter.<sup>23</sup> In comparison, by use of a resting-state fMRI, researchers have demonstrated that Obsessive Compulsive Disorder (OCD) involves abnormalities within the limbic system of neurons.<sup>24</sup> Both of these disorders result from two different issues within the brain, and thus are very different in nature and experience; yet, both correlate in part to issues within the physical brain regions. In addition, problems from a molecular level may also result in corresponding psychological abnormalities. Neurons communicate by means of electrical impulses and neurotransmitters; abnormalities within the communication between cells' neurotransmitters or amounts of neurotransmitters present in the brain are thought to cause specific mental disorders.<sup>25</sup> For example, it is assumed that depression is caused by "low levels of two neurotransmitters, serotonin and norepinephrine."<sup>26</sup> In other cases, there may be an over-exertion or abundance of a certain neurotransmitter; such is believed

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<sup>21</sup> Ibid, 49.

<sup>22</sup> Ibid.

<sup>23</sup> Stephan Heckers, "Neuroimaging of Psychotic Disorders," in *Charney and Nestler's Neurobiology of Mental Illness*, ed. Dennis S. Charney, Eric J. Nestler, Pamela Sklar, and Joseph D. Buxbaum (New York, NY: Oxford University Press, 2018), 180.

<sup>24</sup> Jing-Ming Hou, et al. "Resting-State Functional Connectivity Abnormalities in Patients with Obsessive-Compulsive Disorder and their Healthy First-Degree Relatives," *Journal of Psychiatry and Neuroscience* 39, iss. 5 (September 2014): 310.

<sup>25</sup> Comer, *Abnormal Psychology*, 50.

<sup>26</sup> Matthew S. Stanford, *Grace for the Afflicted: A Clinical and Biblical Perspective on Mental Illness* (Colorado Springs, CO: Paternoster Publishing, 2008), 81.

to be the case with schizophrenia: “it is suggested that schizophrenic symptoms are the result of an overactive dopaminergic system in the brain.”<sup>27</sup> Even further, researchers have found the endocrine system to play a role in psychological abnormality as hormones are an essential component to brain function.<sup>28</sup> This is seen in the ebb and flow of a woman’s hormonal balance through the course of a lifetime; further, she is more susceptible to an affective or psychotic disorder in periods of vast hormonal changes such as puberty, pregnancy, and menopause.<sup>29</sup> In addition, male sex hormones have also been theorized to “play a role in the pathophysiology of ADHD, namely by influencing the development of dopaminergic neuronal systems.”<sup>30</sup> Aberrations of such kind as the three described here result in many different forms of peculiar mental disorders depending on very specific circumstances. In other words, many different components of neurochemistry, brain anatomy, and bodily functions affect and direct many different responses; when those components act abnormally, the brain performs abnormally.

So what might be the cause of such biological dysfunctions to the extent of regularity that clinicians could diagnose an individual with a mental illness? Clinicians and researchers have been studying and continue to study whether or not these disorders are inherited genetically. Some studies have shown that some mood disorders, schizophrenia, and other mental illnesses can be inherited from a complex series of multiple genes working together.<sup>31</sup> However, this genetic causation is still widely debated and unfortunately under researched, as is the case with

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<sup>27</sup> Ibid, 120.

<sup>28</sup> Ibid, 50.

<sup>29</sup>Holger Steinberg, Kenneth C. Kirkby, and Hubertus Himmerich, “The Historical Development of Immunoendocrine Concepts of Psychiatric Disorders and Their Therapy,” *International Journal of Molecular Sciences* 16, iss. 12 (2015), 28847.

<sup>30</sup> Ibid.

<sup>31</sup> Comer, *Abnormal Psychology*, 50.

most of the neurobiology of mental illness. In present times of research, neurobiology of mental illnesses has gained respect and rightly so, but the model still has its shortcomings due to the difficulty of such research.<sup>32</sup>

Therefore, biology should not be the only attributing factor to understanding mental disorders both in their function and causation. Another factor that must be considered is environment. There are many forms of environment, and as to keep this study general, only a few will be covered. The first environment influential in the causes or formulation of mental illness is the environment of the psyche, namely the unconscious mind. In explaining mental illness, the psychodynamic model views childhood experiences and possible traumatic events during developmental stages as reason for present conflict; moreover, speaking deterministically, all behavior is dictated by childhood experiences.<sup>33</sup> According to Sigmund Freud, dysfunction lies in excessive conflict between an individual's id, ego, and superego, the contributing factors of personality that contain biological impulses, control of such impulses, and a conscious that ascertains values.<sup>34</sup> Freud proposed that events throughout development challenge an individual to grow by creating adjustments in the ego's control of the id's natural drives, and in the values held in the superego; problems arise when one becomes fixated upon a stage of development because an adjustment did not occur properly.<sup>35</sup>

Though Freud's work is theory based, it is proven that adverse childhood experiences can expedite and in some cases cause certain forms of mental illness. Biologically, it has been proven

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<sup>32</sup> Ibid, 52.

<sup>33</sup> Ibid, 53.

<sup>34</sup> Ibid, 54.

<sup>35</sup> Ibid, 54.

that certain exposures to chemicals during natal development has lead to schizophrenic disorders,<sup>36</sup> and certain metal exposures have been linked to psychosis when exposed during crucial neurodevelopmental stages.<sup>37</sup> Behaviorally, adverse experiences and exposures to harmful situations act similarly in that they, too, may result in abnormal behavior. In a 2014 study conducted by the Psychiatry and Clinical Psychobiology group from the Ospedale San Raffaele research partnership, adverse childhood experiences were found to increase the chances of adult physical and mental health disorders, and to increase the use of psychotropic drugs to treat illness such as OCD.<sup>38</sup> This propensity, and perhaps causation, of mental illness from childhood incidents is theorized from what psychologists call the nature versus nurture phenomenon. The nature principle explains that humans behave and act certain ways because they are biologically designed to, whereas the nurture principle explains that humans are designed to behave and act in certain ways because at one point they were taught to through learned behavior.<sup>39</sup> In his book *The Nurture Effect*, Anthony Biglan explains the development and evolution of human behavior stems from consequences of learned behavior and experiences.<sup>40</sup> Biglan expounds on this by saying, “the progress in understanding how to improve the human condition (...) stems largely from pragmatic evolutionary analysis, which has pinpointed critical environmental conditions that select useful or problematic functioning”.<sup>41</sup>

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<sup>36</sup> Stanford, *Grace for the Afflicted: A Clinical and Biblical Perspective on Mental Illness*, 120.

<sup>37</sup> Amirhossein Modabbernia et al., “Early-Life Metal Exposure and Schizophrenia,” *Eur Psychiatry*, (June, 2016): <http://dx.doi.org/10.1016/j.eurpsy.2016.03.006>

<sup>38</sup> Francesco Benedetti et al., “Adverse Childhood Experiences and Gender Influence Treatment Seeking Behaviors in Obsessive-Compulsive Disorder,” *Comprehensive Psychiatry* 55, iss. 2 (February 2014), 300.

<sup>39</sup> Glenn Geher, *Evolutionary Psychology 101* (New York, NY: Springer Publishing Group, 2014) 22, 170.

<sup>40</sup> Anthony Biglan, *The Nurture Effect* (Oakland, CA: New Harbinger Publications, 2015) 13.

<sup>41</sup> *Ibid*, 14.



This formulation of behavior is for positive and negative behaviors, or as he refers to them as “prosocial,” and “antisocial” behaviors. Thus, in developmental stages of an individual’s life there may be certain behaviors he or she is exposed to in the environment in which they were raised that may lead to learned behaviors expressed later in life. This phenomenon is supported also by behavioral psychologists in what learning theorists call conditioning and modeling. Behavior is learned through modeling by simply watching another perform the action, and through conditioning behavior is molded overtime by certain outcomes that trigger learned responses.<sup>42</sup> This can also be true for abnormal behaviors. If an individual, whether young or old, is repeatedly exposed to an object or action that is present during a negative experience, then abnormal reactions to the object or action can be conditioned over time.<sup>43</sup>

Environment has a great impact on an individual's personality and behavior. Childhood experiences and exposure to negative or adverse actions as an adult may influence how one formulates responses and actions; further, these can be a factor in the formulation of mental abnormalities, even to the extent of mental disorders.<sup>44</sup> Another environment that plays a large role in mental dysfunction is society. To be reviewed next is the sociology behind mental disorder and the role that social norms, functions, and barriers play in the entity of abnormal psychology.

In their recent article “Psychiatry’s Little Other,” Claire Laurier Decoteau and Paige Sweet from the University of Illinois find fault within the DSM-V in that the sociological nature of mental disorders are not factored into the description of the disorders’ nature and diagnosis of

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<sup>42</sup> Comer, *Abnormal Psychology*, 58.

<sup>43</sup> Ibid, 58.

<sup>44</sup> Ibid, 59.

the disorders.<sup>45</sup> They suggest the sociological aspect of mental disorders is not as subjective as once implied, and rather it is imperative to both diagnosis and treatment; moreover, because humans are social in nature and humans have social factors impressing upon them everyday, sociology must be factored into the equation of mental illness. According to the sociocultural model, “abnormal behavior is best understood in light of the broad forces that influence an individual,” forces such as rules, expectations, cultural values, and societal norms.<sup>46</sup> It is also important to note that, “the kinds of thoughts, emotions, and actions commonly referred to as ‘mental illness’ are experienced across diverse cultures, social structures, physical environments, and historical epochs.”<sup>47</sup> Therefore, the undeniable presence of such disorders throughout history and culture suggests that a social construct of mental illness is in fact objective in reality.<sup>48</sup> Now, sociological explanations for mental illness emphasize the causal factors of the disorders, and look at one’s social standing as the leading cause of such consequences.<sup>49</sup> Within the sociological model of mental illness, it is suggested that mental disorders are constructed by society in two manners: first of all, social factors may cause mental disorders, and secondly, society may construct what is deviant from present norms and classify those who differ as “ill,” or having a “disorder.”<sup>50</sup> Here, mental illness is seen as a significant deviation from societal

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<sup>45</sup> Claire Laurier Decoteau and Paige L. Sweet, “Psychiatry’s Little Other: DSM-5 and Debates Over Psychiatric Science,” *Social Theory and Health* 14, no. 4 (November 2016).

<sup>46</sup> Comer, *Abnormal Psychology*, 70.

<sup>47</sup> Carol S. Aneshensel and Jo E. Phelan, “The Sociology of Mental Health,” *Handbook of the Sociology of Mental Health*, ed. Carol S. Aneshensel and Jo C. Phelan (New York, NY: Kluwer Academic/Plenum Publishers, 1999), 4.

<sup>48</sup> *Ibid.*

<sup>49</sup> *Ibid.*, 11.

<sup>50</sup> *Ibid.*, 10.

norm, usually implying a violation of such norms.<sup>51</sup> Though not all deviance is necessarily and inherently bad, most violations of norms are not rewarded; as is the case sociologically with mental illness.<sup>52</sup> This begs the question, is culture affecting mental illness by defining and upholding such strict norms? In some cases, the answer is unfortunately yes. In one example, a study found that in order to avoid the shameful stigma linked with the mental disorder, the Chinese began to rename depression as neurasthenia.<sup>53</sup> With all the similar symptoms of depression, neurasthenia was the solution to avoiding a shameful deviance. In another example, the rise of diagnoses of depression in the U.S. in recent years has been thought to be linked to those capitalizing on the diagnosis, entities such as drug companies and advocacy groups.<sup>54</sup> In either case, social construction of the same disorder with different results illustrates how strongly cultural processes can fundamentally influence diagnosis, treatment, and social standing of an individual.

There is a dualistic nature to sociological construction of mental illness. In one sense, culture creates mental illness by first “providing the symbolic expressions of meaning that organize all thought and action,” and creating the schema that the deviant persons can fit under.<sup>55</sup> In other words, culture creates the linguistic norm and the behavioral norm, and therefore it is able to formulate a standard of disorder by which the abnormal are assigned. However, the other

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<sup>51</sup> William C. Cockerham, *Sociology of Mental Disorder* (Upper Saddle River, NJ: Prentice-Hall, Inc., 1996), 92.

<sup>52</sup> *Ibid*, 94.

<sup>53</sup> Pauline Agbayani-Siewert, David T. Takeuchi, and Rosavinia W. Pangan, “Mental Illness in a Multicultural Context,” *Handbook of the Sociology of Mental Health*, ed. Carol S. Aneshensel and Jo C. Phelan (New York, NY: Kluwer Academic/Plenum Publishers, 1999), 30.

<sup>54</sup> Allan V. Horwitz, “Creating an Age of Depression,” *Society of Mental Health* (March, 2011), 42.

<sup>55</sup> Allan V. Horwitz, “The Sociological Study of Mental Illness,” *Handbook of the Sociology of Mental Health*, ed. Carol S. Aneshensel and Jo C. Phelan (New York, NY: Kluwer Academic/Plenum Publishers, 1999), 63.

side to this is that society's regular functioning in of itself could cause and perpetuate certain aspects of the actual disorders themselves. No matter what society it is, "the arrangements that are functional for society as a whole are seen as creating conditions that are dysfunctional for some persons."<sup>56</sup> A clear example is found in the lower rungs of social class all over the world in and amongst different cultures everywhere. Existing data proves those who inhabit the lower social classes are more susceptible to mental illness.<sup>57</sup> One explanation for this is through social stress, meaning those in lower social classes must cope with the deprivation of resources oftentimes leading to mental disorder.<sup>58</sup> Another is through social selection, meaning since the already mentally ill drift towards the lower rungs of society they remain there and produce others that perpetuate the illnesses either through learned behavior or genetics.<sup>59</sup> In either case, if poverty is perpetuated, most likely mental disorders will as well, and if mental disorder is perpetuated, poverty will most likely follow. Sociology both creates mental illness through labels and systems, but it also continues the growth of mental illness through entities like poverty.

The last aspect to mental illness that plays a part in causation and perpetuity is the undeniable role of both the philosophy of causation and the mentally ill's phenomenological experiences. In the very beginning of this general overview, it was discussed that mental illness is unlike other illnesses in that it involves the self and personality of the individual diagnosed. This is unique to mental disorders and also complicates them greatly. However, in order to understand in full where mental disorder stems from and how it acts, one must be open to the theoretical and philosophical nature of the mind and when the mind acts abnormally. Paul

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<sup>56</sup> Aneshensel and Phelan, "The Sociology of Mental Health," 12.

<sup>57</sup> Cockerham, *Sociology of Mental Disorder*, 149.

<sup>58</sup> Ibid.

<sup>59</sup> Ibid, 151.

Thagard of the University of Waterloo argues that philosophy is undoubtedly embedded within the sciences, especially psychology.<sup>60</sup> From the naturalistic perspective he takes,

epistemology is tightly connected with psychology and the other cognitive sciences, and metaphysics draws on all the sciences from research in physics relevant to the nature of space and time to research in psychology concerning the relation of mind and body. Ethics (...) collaborates with relevant sciences such as psychology, economics, biology and anthropology to develop theories of right and wrong.<sup>61</sup>

This reasoning helps formulate his argument that theoretical neuroscience is in fact necessary to the diagnosis and treatment of mental disorders because it fills in the gap between objective reality and subjective experience. Moving further, a philosophical view of humanity includes self-awareness, values, freedom of choice, and a sense of purpose in life, and for humanistic, existential psychologists it is in these areas that the disorder and abnormality stems from.<sup>62</sup> When said aspects of life are not characteristic of the philosophical norm, then the individual might be labeled “abnormal.” In another perspective, the humanistic approach suggests that individuals are driven to self-actualize and realize their goals and highest potentials in life, whereas existentialists suggest from birth individuals are given the task to find meaning in life.<sup>63</sup> If either is missed or incomplete dysfunction arises. Take the example of depression once again: how should its foundational symptom of sadness be interpreted? With theoretical neuroscience, “emotions are processes that represent the overall cognitive and somatic state of the organism, and conscious experience arises when neural representations achieve high activation.”<sup>64</sup>

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<sup>60</sup> Paul Thagard, “Mental Illness from the Perspective of Theoretical Neuroscience,” *Perspectives in Biology and Medicine* 51, iss. 3 (Boston, MA: 2008), 336.

<sup>61</sup> *Ibid*, 337.

<sup>62</sup> Comer, *Abnormal Psychology*, 64-65.

<sup>63</sup> *Ibid*, 65.

<sup>64</sup> Thagard, “Mental Illness from the Perspective of Theoretical Neuroscience,” 341.

Therefore, conscious thoughts are connected with biological functions and must be treated accordingly.<sup>65</sup>

However, philosophically approaching diagnosis, Liah Greenfeld instead looks at mental disorders as a disease of thinking and a disease of the mind.<sup>66</sup> She views depression and other psychotic disorders through the lens of experience, exemplified in her theory that a culture employing unprecedented freedom to become and build a personal identity and destiny, as is the case in the Western world, comes with it a complicated psychological strain to fulfill such freely given responsibility; therefore, the vulnerable in society that have a hard time managing such a task might fail under the pressure and succumb to experiences that symptomologically diagnose them depressed or psychotic.<sup>67</sup> This more cultural and anthropological approach in philosophy of psychology is necessary because of the empirical nature of such illnesses. The very ontology of mental illness is experiential and affectual, for these attributes are a part human life.<sup>68</sup> Though these elements of human existence are not objectively measurable, they are still present and therefore play a role in the psychological approaches to understanding mental illness.

In further consideration of the experience of mental illness accounted for philosophically, Harry Hunt's survey of Deleuze, Bion, and Guattari in the realm of the psyche and phenomenological mysticism, elemental in transpersonal activity, deconstructs the normal

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<sup>65</sup> Ibid, 343.

<sup>66</sup> Liah Greenfeld, *Mind, Modernity, Madness* (Cumberland, MA: Harvard University Press, 2013), 5.

<sup>67</sup> Ibid, 12.

<sup>68</sup> Thagard, "Mental Illness from the Perspective of Theoretical Neuroscience," 340. Here, Thagard utilizes this reality to explain the necessity of branching philosophical theories of the mind and cognition with biological functions of the brain.

definition of psychosis to suggest a possible archetype of psychosis concealed in every human.<sup>69</sup> This in turn enacts a normalization of such an event to each human in unthought-of daily experiences, and instead seeks to harvest the power of abstract thought brought on by stoic, mystical and psychotic “break thoughts” instead of “break downs.” Here lies within the possibility of psychoanalytic mysticism, which ushers support of cognitive psychology of mystical states in being both beneficial to personhood and healthy in the experience of ultimate reality. In light of this, it is possible to philosophically assume that mental “disorders” are conceivably latent in each individual, and more pronounced in some, correlating with the spectrum nature of mental disorders offered earlier. Causation of this can be linked to many different entities, most that have already been discussed such as culture, biology, and behavior.

Ultimately, mental illness is multifaceted and complex to say the least. With so many contributing factors to causation, perpetuity, and diagnosis, mental illness is yet to be fully defined and fully understood. However, much can be said, observed, and interpreted from the experiences those with mental disorder encounter daily. There is viable evidence for the provenance of mental disorder through biology, neuroscience, sociology, environment, and phenomenological experience. As seen in this brief study, these impressing factors upon an individual’s life can lead to a possible predisposition to such disorder. There also lies objective evidence of such disorder as explained through biology and philosophically. In conclusion, it is interesting to note the similarities between the models of explanation for the disorders. Undergirding each model contained an element of deviancy from an imposed standard as well as a consequence of dysfunction or distress of life to a certain extent. Though mental illness is often

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<sup>69</sup> Harry T. Hunt, “Implications and Consequences of Post-Modern Philosophy for Contemporary Transpersonal Studies III Deleuze and Some Related Phenomenologies of Felt Meaning: Psychosis and Mysticism as Inherent ‘Structures of Thought’,” *The International Journal of Transpersonal Studies* 33, no. 2 (2014).

labeled as a disruption of life, the deviancy and dysfunction characterized so often will be challenged in chapter 4 as possible misnomers of a unique and gifted life.



## THE *IMAGO DEI* AND DISABILITY THEOLOGY

In the discussion of the personhood of those with mental illnesses, there must necessarily include a survey of the Image of God. Every human is made in the image and likeness of God, even those with labeled “disabilities.” Therefore, what does it mean to be “made in the image and likeness of God”? This question will drive the discussion throughout this chapter to survey what this “image” is, alongside discussing also what conformity to the “image of Christ” looks like. Then there will be a brief overview of the discipline of disability theology. As explained in the previous chapter, mental illness is categorized legally and medically as a disability, but it is also sociologically assumed to fit the “abnormalities” of “disability.” For this reason, disability theology will be integrated into the conversation to find a place for individuals with mental illness theologically.

### The Image and Likeness of God

Though less discussion in the significance of the Image of God exists in the biblical tradition than in theological study, the *imago Dei* is significant in the deliberation and understanding of human personhood in the modern theological realm of practice.<sup>70</sup> Sparsely mentioned in Scripture, humanity’s creation in the Image of God holds consequences for one’s perception of humanity, God, and humanity’s relationship with God. The statement that humanity is “created in the Image of God,” clearly aggregates an understanding and positive affirmation of the place of humanity in all of creation.<sup>71</sup> Thus, it is the first item of examination

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<sup>70</sup> Edward M. Curtis, “Image of God (OT),” in *The Anchor Bible Dictionary*: volume 3, ed. David Noel Freedman, et. al. (New York, NY: Doubleday, 1992), 389.

<sup>71</sup> Ibid.

in the discussion of personhood in regard to both individuals with and without mental illness. The following discussion includes an exploration of biblical texts involving the Image of God and the likeness of both Creator and Christ with a theological overview of different interpretations following thereafter. With multiple understandings of the *imago Dei* discussed, a multifaceted, dynamic interpretation of such an entity is to be expected.

The concept of humanity created in the Image of God is first introduced in the Pentateuchal book Genesis. According to Walter Brueggemann, this book is narrative both of primeval history and Israel's very beginnings, yet it is the beginning of the five books constitutive of the Torah, or the instructions for proper communal living.<sup>72</sup> In light of this, the theology portrayed throughout this artful account of history, especially the history of creation, is what Brueggemann claims is "a normative resource, rooted in the authority of Moses, for the sustenance of a peculiar community of faith and life (...) to fashion widely variegated and diffuse memories into a more or less coherent statement upon which this otherwise resourceless community could stake its life."<sup>73</sup> In other words, the theology contained within this account of history was pivotal for Jewish thought and conduct to be set apart amidst surrounding ancient Near East<sup>74</sup> religions. To strengthen this idea of a sanctioned Israelite theology and orthopraxy, there are interestingly quite a few observed similarities between the Genesis account of human creation, presumptuously recorded by the Priestly writer<sup>75</sup>, and the *Enūma eliš* from Babylonian

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<sup>72</sup> Walter Brueggemann, *An Introduction to the Old Testament: The Canon and Christian Imagination* (Louisville, KY: Westminster John Knox Press, 2003), 16.

<sup>73</sup> *Ibid*, 22-23.

<sup>74</sup> The abbreviation of ANE will now be used for ancient Near East.

<sup>75</sup> The Graf-Wellhausen Documentary Hypothesis is assumed throughout this brief exegesis of Genesis. For a brief explanation of the hypothesis, please reference John Barton, "Source Criticism" in *The Anchor Bible Dictionary* volume 5 ed. David Noel Freeman, et. al. (New York, NY: Doubleday, 1992).

creation mythology.<sup>76</sup> Brueggemann explains these similarities give evidence “that Israel readily participated in that common cultural heritage (of sharing ANE myths) and made use of the same narrative materials as were used in other parts of that common culture.”<sup>77</sup> The common cultural mythology of creation is said to be artistically adapted by Israel to portray creation through a lens of a Yahwistic means of living.<sup>78</sup> The adapted literature could have been utilized to emphasize the differences and defining characteristics of YHWH that other ANE religions could not assign to their gods. Therefore, the depiction of the creation of the world and humanity that possibly was taken from surrounding ANE mythology can be viewed as a means of strengthening the Israelite theology since it was common cultural belief now supported and inspired by the Israelite God; and this, therefore, increasingly affects the idea of “humanity created in the image of God.”

The comparison between an ANE understanding of the creation of humanity and Israelite belief of the creation of the human heightens what the Priestly document has to say about the image of God in that it is a contrasting concept not held by surrounding religions of Israel, and withheld in the bounds of a cultural norm.<sup>79</sup> Israel’s theology is set apart by YHWH and is therefore considered substantive nourishment to healthy communal ideology under YHWH’s rule. Not only is the Israelite God different in that He is one deity in exclusion of all other deities, He also desires a unique relationship with humankind unmatched and incomparable to the relationship that the surrounding deities had with their subordinate subjects.<sup>80</sup> According to

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<sup>76</sup> E. A. Speiser, *The Anchor Bible: Genesis* (Garden City, NY: Doubleday and Company, 1964), 23.

<sup>77</sup> Brueggemann, *An Introduction to the Old Testament: The Canon and Christian Imagination*, 30.

<sup>78</sup> *Ibid*, 31.

<sup>79</sup> *Ibid*, 31.

<sup>80</sup> Gordon J. Wenham, “Genesis,” in *Eerdmans Commentary on the Bible*, ed. James D. G. Dunn and John W. Rogerson (Grand Rapids, MI: Wm B. Eerdmans Publishing Co, 2003), 37.

Gunkel, the author of *Genesis*, and specifically the 26th and 27th verses of chapter 1, endeavors to highlight this aspect of the unique Yahwistic belief in that human life holds great value.<sup>81</sup>

With this cultural heritage behind the text, the “image and likeness of God” language becomes all the more intriguing and important. In *Genesis* 1:26, the Hebrew words תְּצַלְחֵם *tz’lēhm*, for “image,”<sup>82</sup> and דְּמוּת *d’mooth* from דָּמָה *dāmāh*, for “likeness,” “after the manner of” or “resemblance,”<sup>83</sup> appear consecutively in the same sentence, with *tz’lēhm* occurring first and signifying a certain form of dominance.<sup>84</sup> However, in chapter 5 verse 1 of *Genesis* the word order is reversed, suggesting *d’mooth* to take precedence.<sup>85</sup> This reversal and seeming equality of structural dominance balances both words to give broader imagery in the portrayal of this act of creation. This grammatical formulation in cohesion with the translations of the words give imagery and support to the supposed value of humanity previously mentioned. Hermann Gunkel reiterates this perception of special value given to humankind in that humanity is created with precise detail, humanity is the last creature fashioned in the order of creation, and humanity is given order and dominion over every other creature.<sup>86</sup>

Gordon Wenham emphasizes this ruling dominion in light of common thought in the ancient world that kings and rulers were in fact the very image of God; further, the kings would

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<sup>81</sup> Hermann Gunkel, *Genesis*, trans. Mark E. Biddle (Macon, GA: Mercer University Press, 1997), 112.

<sup>82</sup> George V. Wigram, *The Englishman’s Hebrew and Chaldee Concordance of the Old Testament*, 5th edition (Grand Rapids, MI: Zondervan, 1970), 1073.

<sup>83</sup> *Ibid.*, 345-346.

<sup>84</sup> Terence E. Fretheim, “*Genesis*,” in *The New Interpreter’s Bible: volume 1*, ed. Lender E. Keck, et. al. (Nashville, TN: Abingdon Press, 1994), 345.

<sup>85</sup> *Ibid.*

<sup>86</sup> Gunkel, *Genesis*, 112.

rule and govern as God would give them power on earth to do so on His behalf.<sup>87</sup> In the Israelite adaptation, this authority instead is applicable to all of humanity, male and female, to represent God's authority and dominion over the rest of Creation.<sup>88</sup> This in turn, again, reiterates the unique value assigned to humanity. Gunkel continues this thought with humanity as the minor god of the world to mirror God's ruling in Heaven.<sup>89</sup> Therefore, in light of a biblical perspective the *Imago Dei* gives humanity inherent value unmatched by other creatures, as well as both male and female are given dominion over other creatures in reflection of the dominion of their Creator.

Though it would leave both humanity and God misunderstood if a perspective of the *Imago Dei* was comprised solely of innate worth and creaturely governance. In operation of biblical theology commingled with Platonic philosophy, Augustine added to this understanding through his perspective of intellectual creatures. Humanity is a form of intellectual creature in that humanity is self-aware, and in this cognizant act the intellectual creature turns its knowing towards God as a form of acknowledgement, namely worship.<sup>90</sup> In the creation account, this intellectual creature follows the creation of plants; in their creaturely nature, plants procreate to breed other plants *secundum genus*, or according to genus.<sup>91</sup> However, the term assigned to humanity's creation is *secundum similitudinem*, of the same likeness, in which *genus* is unnecessary because humanity is singularly unique and distinguished because it finds its likeness

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<sup>87</sup> Wenham, "Genesis," 39.

<sup>88</sup> Ibid, 39.

<sup>89</sup> Gunkel, *Genesis*, 113.

<sup>90</sup> Matthew Drever, "Image, Identity, and Embodiment: Augustine's Interpretation of the Human Person in Genesis 1-2," in *Genesis and Christian Theology*, ed. By Nathan MacDonald, Mark W. Elliot, and Grant Macaskill (Grand Rapids, MI: William B. Eerdmans Publishing Co, 2012), 121.

<sup>91</sup> Ibid, 122.

in the image of God.<sup>92</sup> For Augustine, this shift in the creation account clarifies the relation of God and the human soul; humankind participates with God through dependence of That which it images.<sup>93</sup> This creation of the human soul is an act of God, and therefore a human life is an intellectual act orientated toward God.<sup>94</sup> Thus, the image imparted on humanity is God's act of reflection, a more direct relation in the creature's existence, in which the creature acknowledges the Creator in its very nature.<sup>95</sup> Matthew Puffer examines Augustine's work and finds that he concludes his theology as such: the image of God is an intrinsic and inherent capacity for loving God that is persistent in human nature.<sup>96</sup> However, before this conclusion, Augustine first understood the *Imago Dei* to be extrinsic in essence to where human disposition is aimed toward the telos of the likeness of the Son; later in his life this concept would mold into a reference of the spiritual body from the resurrection only the chosen would gradually receive.<sup>97</sup> These former understandings of Augustine were not fully dismissed, but they were given thought to another aspect of the likeness of God: sanctification into the likeness of Christ. However, this form of "likeness" and formulation into the "image of Christ" will be discussed later in this chapter.

Thus far, it is understood that the image of God is the distinctive characteristic of humanity in its creation, it endures throughout the generations of humanity, and it affirms the

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<sup>92</sup> Ibid.

<sup>93</sup> Ibid.

<sup>94</sup> Ibid, 123.

<sup>95</sup> Ibid, 124.

<sup>96</sup> Matthew Puffer, "Human Dignity after Augustine's *Imago Dei*," *Journal of the Society of Christian Ethics* 37, no. 1 (2017), 69.

<sup>97</sup> Ibid, 76.

sanctity of humanity.<sup>98</sup> Theologically this is explained by Claudia Welz of the University of Copenhagen and her proposition of a more multifaceted view of the *Imago Dei* summarized in her concept of *Bildwissenschaft*.<sup>99</sup> This model encompasses the functional, dynamic, relational, and mimetic approaches to the image of God. Firstly, the *Imago Dei* is functional in its ontology, meaning there is a certain extent of comparability between humankind and God; further, in a more blatant case this would mean humanity is a copy of God, but in a more relative understanding, humanity is God's image represented on Earth through reason, affection, and intellectual existence.<sup>100</sup> The image of God in humankind then is understood as God's functionally representative on earth to carry out the will of God; this is both teleological and vocational. However, this functionality reduces the *Imago Dei* within humanity to mere action-oriented purpose if not understood in compatibility with the other models.

Thus, the relational model is considered as well. This perspective of the image of God is understood as the event of being addressed by the Divine.<sup>101</sup> In other words, God does not appear "in" or "as" His image, but rather "at work" in humanity. Karl Barth proposes the *Imago Dei* in a similar lens in that the human being is in God's image in being human, because the image is relational and conversational; furthermore, the Divine relationally interacts with human creation because humanity is God's counterpart.<sup>102</sup> Similarly, Stanley Grenz interprets the *Imago Dei* as both eschatological and ecclesiological due to this Divine relationality, in which God communally interacts with humanity imparting the image of the Triune community upon human

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<sup>98</sup> Ibid.

<sup>99</sup> Claudia Welz, "Imago Dei," *Studia Theologica* 65, no. 1 (2011), 74.

<sup>100</sup> Ibid, 76.

<sup>101</sup> Ibid, 80.

<sup>102</sup> Ibid, 82.

sociology to create a social being.<sup>103</sup> Therefore, being God's image is a means of relation and communication to the Divine.<sup>104</sup> In a sense, this interactive image of relationality then leads to a comprehension of the dynamic model emphasizing conformation into the image of God. This is a perspective that sees the *Imago Dei* as participatory, future-orientated, transformational, and conformational throughout the course of an individual's earthly presence.<sup>105</sup> The dynamic model is evolutionary in nature, reflecting both Greek antiquity and Renaissance humanism, as humanity evolves into the image and likeness of God.<sup>106</sup> Lastly, within Welz's *Bildwissenschaft* and modern theology's multifaceted understanding of the *Imago Dei*, there exists also the mimetic model. This model represents the understanding that humanity contains either an immaterial or material resemblance of God through His image in order to reflect and correlate characteristics, physical or metaphysical, of God.<sup>107</sup> The Augustinian understanding affirms memory, intellect, and will as resembling God's, and Dietrich Bonhoeffer refines this to the state of freedom that humanity is given resembles God's freedom.<sup>108</sup>

This versatile understanding and multifaceted concept of the *Imago Dei* leaves many different interpretations and implications at hand. And, unlike Luther and other theologians that affirm total depravity, this inherent image of God and the value it possesses is not lost, and is key to the understanding of human personhood. John Kilner refutes this loss of the image of God by

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<sup>103</sup> Jason Sexton, "The Imago Dei Once Again: Stanley Grenz's Journey Toward a Theological Interpretation of Genesis 1:26-27," *Journal of Theological Interpretation* 4, no. 2 (2011), 188.

<sup>104</sup> Welz, "Imago Dei," 82.

<sup>105</sup> Sexton, "The Imago Dei Once Again," 191.

<sup>106</sup> Welz, "Imago Dei," 83.

<sup>107</sup> Ibid, 79.

<sup>108</sup> Ibid, 80.



arguing even though humanity was changed at the Fall in many different ways, this does not mean the image of God was altered.<sup>109</sup> The *Imago Dei* seems untouched by the Fall in light of its function and nature in humanity's condition, pre-Fall and after.<sup>110</sup> The writer of the book of James, presumably the brother of Jesus, includes the Jewish understanding of the image of God in his epistle as to continue the idea of an untouched *Imago Dei* that consummates value of human life.<sup>111</sup> He does this in his explanation of the kinds of evil that exist in humanity, where in one situation the human praises God, and in the next the human curses another human. James adds a tone of repulsion to this evil because he adds that that human is made in the image of God, giving them value and a reason to avoid cursing such a creature. Additionally, in regard to New Testament language of the image of God Kilner argues that the image is actually being restored as believers are fashioned more and more into the image of Christ.<sup>112</sup> Therefore, the problem at hand is not a defiled or corrupted image, but rather sinful humanity. In other words what God calls good remains good, unlike the Calvinian concept of total depravity which is not accepted in this thesis. This is because in either case, pre-Fall or conformation into the image of Christ, both provide a standard of human status.<sup>113</sup>

Furthering the discussion is now a review of the New Testament's portrayal of the image of God. Christopher Carter of the University of San Diego purports the *Imago Dei* can be

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<sup>109</sup> John F. Kilner, *The Journal of Evangelical Theological Society* 53 (2010), 605.

<sup>110</sup> James D. G. Dunn, *Word Biblical Commentary: Romans 1-8* volume 38 (Nashville, TN: Thomas Nelson Publishers, 1988), 483.

<sup>111</sup> Ralph P. Martin, *Word Biblical Commentary: James* volume 48 (Waco, TX: Word Books Publisher, 1988), 118-119.

<sup>112</sup> Kilner, "Humanity in God's Image: Is the Image Really Damaged?" 611.

<sup>113</sup> *Ibid.*

inferred as the “mind” of Christ.<sup>114</sup> He argues that a better interpretation of the *Imago Dei* in relation to Jesus would be to understand,

Jesus as the image of God perfected, and view human animals as having the ability to reflect the image of God only inasmuch we model ourselves after the perfected image of Christ Jesus. In this way, in modeling our lives after the life of Jesus, we are working toward actualizing the potential of the *imago Dei* as it has been revealed to us, in its perfected state, in the Christ Jesus.<sup>115</sup>

Thus, the *Imago Dei* is now also considered Christologically because Jesus, as with all of humanity, reflected the image of God and was also *the* “image of the invisible God, the firstborn of all creation” (Colossians 1:15, NASB). This Christology of Paul implies a heavy amount of theology holding many assumptions of the character and nature of God through the life and resurrection of Christ; however, this statement also assumes quite a bit about human nature since Christ dwelt in human form. In a sense, this is a twofold view of the image of God. First and foremost, Christ was the living image of the Divine, a revelation of God for all humanity. Second, however, Christ is also the goal of humanity in which humanity engages in relationship with God to become like the Son.<sup>116</sup> Paul reiterates this idea in his first letter to the church in Corinth:

So it is written: “The first man Adam became a living being”; the last Adam, a life-giving spirit. The spiritual did not come first, but the natural, and after that the spiritual. The first man was of the dust of the earth; the second man is of heaven. As was the earthly man, so are those who are of the earth; and as is the heavenly man, so also are those who are of heaven. And just as we have borne the image of the earthly man, so shall we bear the image of the heavenly man. (1 Corinthians 15:45-49, NASB)

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<sup>114</sup> Christopher Carter, “The *Imago Dei* as the Mind of Jesus Christ,” *Zygon* 49, no. 3 (September 2014), 754.

<sup>115</sup> *Ibid.*, 755.

<sup>116</sup> J. Paul Sampley, et. al. *The New Interpreter's Bible: Second Corinthians - Philemon* volume 11, (Nashville, TN: Abingdon Press, 2000) 598.

As Paul exhorts the church in Corinth, those who are of heaven, meaning the corporate personality of the risen Christ, now “bear” the image of the heavenly man.<sup>117</sup> The word “φορέσομεν” *phoresomen* from “φορέω” *phoreo* means to “be like” or to literally “wear,”<sup>118</sup> implying that those that proclaim allegiance to the last Adam, the personhood of the risen Christ, must showcase and present the image of Christ in both nature and action. Paul purposefully imitates the Genesis motif of *Imago Dei* in order to signify the aspect of identity in humanity that must conform to the identity of Christ if one is to be a heavenly man.<sup>119</sup> Along with this, Paul also states in his letter to the church in Rome, “For those whom He foreknew, He also predestined to become conformed to the image of His Son, so that He would be the firstborn among many brethren” (Romans 8:29, NASB). This statement of the image of the Son is salvific in nature<sup>120</sup> and encompasses the form in which the Son takes.<sup>121</sup> The word “εἰκόνοϛ” *eikonos* from “εἰκών” *eikon* to symbolize the “image” means also “likeness,” “statue,” “resemblance,” and “representation,”<sup>122</sup> however in this instance, Paul most probably means “the concrete representation which his appearance embodies.”<sup>123</sup> Furthermore, this is an image to be formed in the Christian human by a process of transformation.<sup>124</sup>

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<sup>117</sup> Joseph A. Fitzmyer, *The Anchor Yale Bible: First Corinthians* volume 32 (New Haven, CT: Yale University Press, 2008), 599.

<sup>118</sup> Barbara Aland, et. al. eds., *The Greek New Testament* 5th ed. (Stuttgart, Germany: Deutsche Bibelgesellschaft, 2014).

<sup>119</sup> Fitzmyer, *The Anchor Yale Bible: First Corinthians*, 600.

<sup>120</sup> James D. G. Dunn, *Word Biblical Commentary: Romans 1-8*, 467.

<sup>121</sup> *Ibid*, 483.

<sup>122</sup> James Strong, *The New Strong's Exhaustive Concordance of the Bible* (Nashville, TN: Thomas Nelson Publishers, 1990): 528.

<sup>123</sup> James D. G. Dunn, *Word Biblical Commentary: Romans 1-8*, 483.

<sup>124</sup> *Ibid*.

Interestingly enough, this transformation into the image and likeness of the Son, namely Christ, contains an element of that upholds the Jewish traditional reading of the *Imago Dei* motif in Genesis. This can be seen in James 3 as the New Testament writer encourages his audience to overcome the duplicity of human nature to bless God and to curse fellow humans with the same “tongue,” a synecdoche used to explain the nature of gossip, slander, profanity, and such related behavior in the lives of Christian believers. James sees this as perverse because it is such harmful behavior done unto beings that bear the image of God, and thus makes the sin despicable because humanity is God’s good creation.<sup>125</sup> As James exhorts his audience to worship God in the similar sense that Christ had on Earth, he also maintains the perspective that humanity has inherent value because of the image of God marked on each member of humanity. Therefore, the *Imago Dei* and the likeness of God that humankind was initially formed in, and the transformation of believers into the likeness of Christ work in tandem to not only give humanity inherent worth, but also functionality on Earth, and relationality with God. The Hebrew understanding of value gives human personhood validity at creation, while the transformation into the likeness of God through Christ completes this personhood throughout individuals’ existence.

### Disability Theology: An Analysis

It is now appropriate to give an overview of different perspectives in disability theology. At its very core, disability theology understands dis-abled<sup>126</sup> persons in relation to God and an

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<sup>125</sup> Ralph P. Martin, *Word Biblical Commentary: James*, 119.

<sup>126</sup> The scripting of “dis-abled” is strategic to the understanding of dis-abled persons. The dash in between the prefix “dis” and the root word “able” represents the distinction of such people from their circumstances that traditionally have been labeled as “disabilities.” It must be noted that this distinction is strategic and necessary for understanding the theology and circumstances of dis-abled persons.

ableist<sup>127</sup> world to liberate disabled individuals from stigma and oppression. This analysis of the discipline of disability theology will review a sociological approach and a biblical approach to understanding dis-abled individuals' personhood, experience, and standing in both society and in relation to God. This study will review several theologians' ideas in conversation with one another to create a fundamental understanding of disability theology.

Firstly, in disability theology the issue is commonly found in society rather than an inherent problem of the person with the considered dis-ability. Amos Yong and Grant Macaskill both affirm the challenges already presented to those with either physical, intellectual, or mental disabilities are intensified and made worse by the stigma and social outcasting burdened upon them by society.<sup>128</sup> According to Nancy Eiesland, dis-ability in of itself is immersed in ambiguity, and defining what is disabled has continually been subjective for society; additionally, the very act of labeling dis-abled persons with a dis-ability gives power to the labeler and stipulates a jurisdictional relationship between the two, as the dis-abled person is subjected to a subtle yet intense social power-control struggle.<sup>129</sup> Thus, dis-ability becomes a social construct, defined by an ableist society, lathered in the dichotomous struggle between the "norm" and the "other" to ultimately end in a hierarchical system. This struggle therefore is comprised and perpetuated by the "abled" in society in their fear of the "other." Although "dis-

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One will also recall that in the Introduction portion of the thesis I began naming mentally ill patients as individuals with mental "disorders," with the word "disorder" in quotations. The transition of such statements is a reflection of this current distinction.

<sup>127</sup> Meaning, one who is not perceived as dis-abled. Or, a social group that are not made of individuals with dis-abilities. Or, a sociological perspective that does not include perspectives from dis-abled individuals, and instead stigmatizes or ostracizes individuals with dis-abilities.

<sup>128</sup> Amos Yong, *The Bible, Disability, and the Church*, (Grand Rapids, MI: Wm. B. Eerdmann's Publishing, 2011): 12.

And, Grant Macaskill "Autism Spectrum Disorders and the New Testament: Preliminary Reflections," *Journal of Disability and Religion* 22, no. 1 (2018): 4.

<sup>129</sup> Nancy Eiesland, *The Disabled God* (Nashville, TN: Abingdon Press, 1994): 20-24.

abilities” do complicate matters of life for the individuals that possess them, perhaps simply because they must navigate an ableist-run society, the stigma and exclusion these individuals face from their “abled” counterparts further complicate life. Therefore, this is the crux that disability theology seeks to reverse in order to offer those with dis-abilities an equal opportunity in an ableist world.

With these matters in mind, the first concept to be engaged is whether or not disability is caused by sin. Dis-abilities are usually linked to some Divine purpose intended to handle an issue of sin, and usually dis-abilities are seen as curses.<sup>130</sup> Or, dis-abilities can be viewed as a curse of the general Fall as well. Either way, in the model of liberatory<sup>131</sup> disability theology, this does not seem to be the case. This is firstly noted in the case of the man born blind in John 9 as Jesus says, “It was neither that this man sinned, nor his parents; but it was so that the works of God might be displayed in him” (John 9:3, NASB). According to Eiesland, there is not a link between moral imperfection or habitual sin in the lives of those with dis-abilities, or those with dis-abilities that are not taken away in times of prayer for healing. Instead, those that are accounted as healed in New Testament Scripture are rather an exemplary act by Jesus using an impairment as “opportunity to manifest the immediacy of God in an otherwise ordinary life.”<sup>132</sup> Additionally, in his rejection that this passage might be a fundamental continuation of the Johannine thematic dichotomy between impurity-purity, evil-good, and darkness-light, Yong argues that the man

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<sup>130</sup> Yong, *The Bible, Disability, and the Church*, 23.

<sup>131</sup> Liberation theologians seek to bring freedom to marginalized people from the oppression of social, political, or economic abuses of power. In regard to this thesis, though it is not strictly a theology of liberation, there are undertones of such ideals. Therefore, this word is used to describe the call to freedom from social oppression through stigma against those with dis-abilities.

<sup>132</sup> Eiesland, *The Disabled God*, 72.

was not simply healed to bring him out of “darkness.”<sup>133</sup> Instead, separating from the dominant ableist view, Yong includes the dichotomy without negatively portraying the blind man as sinful; further, he focuses on the change of spirituality from the man, stating that he moves from *spiritual* darkness to *spiritual* light as he becomes a disciple of Jesus, worshipping Him as Lord.<sup>134</sup> Yong purports that the difference in reading this text is the perspective one is reading from. Yes, this text can imply many things, but those implications are often perceived and understood from an ableist view; however, when reading from the perspective of the dis-abled, then this text can be honoring and redemptive for those with dis-abilities.<sup>135</sup>

The next concern theologically for persons with dis-abilities is the question of whether or not those with dis-abilities are made in the image of God. As previously discussed, the *Imago Dei* is that which uniquely marks humanity with value and vocation, it is that which humanity was made for: to be in relationship with God. To say that those with dis-abilities are either not made in the image of God, or they are a marred image of God, is to discredit their very *relationship* to and with God. Steven Fettke, similar to Yong’s rationale, purports that the Church misinterprets the image of God with a solely ableist perspective considering only able-bodied and able-minded individuals to have complete personhood.<sup>136</sup> He goes onto say, “ If no one can help how he/she is ‘embodied’ in creation, including the disabled, then it seems very unjust to single out the disabled for their inability to adjust their embodiment or their alleged

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<sup>133</sup> Yong, *The Bible, Disability, and the Church*, 55.

<sup>134</sup> *Ibid*, 56.

<sup>135</sup> *Ibid*, 57.

<sup>136</sup> Steven M. Fettke, “The Spirit of God Hovered Over the Waters: Creation, the Local Church, and the Mentally and Physically Challenged, A Call to Spirit-led Ministry,” *Journal of Pentecostal Theology* 17, no. 2 (December 2008): 174.

insufficiency in believing in divine healing.”<sup>137</sup> Therefore, it is necessary to move from an ableist perspective to a more inclusive means of understanding the image of God, thus leading to a Christocentric theology of disability.

Macaskill explains that while humanity is created “in,” “after,” or “according to,” the image of God, Christ is the *living* image of God; in other words, humanity is merely made in the likeness of God, whereas Christ *is* the image of God.<sup>138</sup> Consequently, the model to look toward and the only normality standard that is worthy is the one set by Christ, the very image of God. Again, as previously discussed, this conformation into the image and likeness of Christ is a journey that every professing Christian embarks upon, however, there is deeper meaning and implication to this Christocentric perspective of the image of God. Meaning, whatever He speaks, however He behaves, and whatever situations He faces, Christ is one to model human life after. Eiesland develops her liberation work upon this concept, specifically in the broken body of Christ. Eiesland views Christ as “Disabled God,” a contextual Christology that legitimately perceives how God is present in the lives of the “dis-abled” while unmasking the ways in which “theological inquiry has frequently instituted able-bodied experience as the theological norm.”<sup>139</sup> She understands the Disabled God as, “Jesus Christ the disabled God repudiates the conception of disability as a consequence of sin. Our bodies participate in the image of God, not in spite of our impairments and contingencies but through them.”<sup>140</sup>

Eiesland continues this contextualized Christology in her understanding of Emmanuel, God with us, to show the fundamental nature of such a statement to mean embodied human

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<sup>137</sup> Ibid, 175.

<sup>138</sup> Grant Macaskill “Autism Spectrum Disorders and the New Testament: Preliminary Reflections,” 26.

<sup>139</sup> Eiesland, *The Disabled God*, 99.

<sup>140</sup> Nancy Eiesland, “Encountering the Disabled God,” *The Other Side*, (2002): 13.



experience and physicality. Thus, in the resurrected Jesus the conclusion is not a suffering servant for whom the last and most influential aspect of life was tragedy, but rather the resurrected Christ symbolizes a “disabled God,” who embodies impaired limbs, the hidden wound of a pierced side, and the *imago Dei* at the same time.<sup>141</sup> From this understanding, Eiesland concludes that dis-ability not only affirms human-divine integrity, but it becomes a new model of wholeness and a symbol of solidarity.<sup>142</sup>

In culmination then, Yong argues that there is not anything inherently wrong with those with dis-abilities, but rather with the “abled” people in society in their consistent discriminatory attitudes and behaviors.<sup>143</sup> With conceptions of the dis-abled in need of change presently, there must also be change in the perception of dis-ability in the eschaton. Thus, the notion that dis-abilities will be taken away in the eschaton is disqualified being that this is an ableist perspective of Revelation 21:4.<sup>144</sup> Instead, Yong and Fettke argue that some dis-abilities are so identity-constructive, such as autism, Down syndrome, and sensory disorders, that to remove them from oneself in the eschaton would almost be to remove the identity of the person.<sup>145</sup> However, in the ableist view, “suffering” that is said to be removed from eschatological life is often understood to include dis-abilities; but this perpetuates continued ostracization that causes the dis-abled community to suffer since this ableist perspective devalues the personhood of those with dis-

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<sup>141</sup> Ibid, 99.

<sup>142</sup> Ibid, 101.

<sup>143</sup> Yong, *The Bible, Disability, and the Church*, 118.

<sup>144</sup> Ibid, 119.

<sup>145</sup> Yong, *The Bible, Disability, and the Church*, 121. Fettke, “The Spirit of God Hovered Over the Waters: Creation, the Local Church, and the Mentally and Physically Challenged, A Call to Spirit-led Ministry,” 175.

abilities.<sup>146</sup> Yong explains this suffering, that of stigma and ostracization, will be taken from the dis-abled lives instead of the normate<sup>147</sup> view that part of their personhood or identity will be taken. He infers also that this normate eschatology is the very thing that feeds a continued exclusionary atmosphere in churches today because the idea that dis-abilities will be wiped away as mere “blemishes like sin” or “sufferings” oppresses the dis-abled and pushes them out of the ecclesiastical community.<sup>148</sup>

Instead, since those with dis-abilities are made in the image of God, they are an expression of true personhood not a marred image of such, and in certain occasions that their dis-ability adds to their personhood, than those with dis-abilities must be included in the confessional, practicing Christian communities. This inclusion of such people is charismological.<sup>149</sup> Firstly, this inclusivity is found in the “body of Christ” language employed throughout the New Testament, especially in the Pauline Epistles. Yong views these passages to emphasize the Church as the priesthood of believers, welcoming ministries and gifts of people from a wide spectrum of abilities.<sup>150</sup> Additionally, Fettke offers that those with dis-abilities are, as those with abled-bodies, people who need ministry, and those who can minister.<sup>151</sup> He explains,

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<sup>146</sup> Ibid.

<sup>147</sup> To be compatible with Yong’s theology, I kept in continuity with his language. “Normate,” here is similar to “ableist,” in my own, and others, language. Normate is used to describe the group of society without dis-abilities, but it is also used to describe their oppressive ideology of those with dis-abilities.

<sup>148</sup> Ibid.

<sup>149</sup> Charismological refers to the workings of and the gifts of the Holy Spirit in humanity. It is, as Steven Fettke describes, the Spirit’s work of hovering and working in the midst of humanity. It is also the gifts of the Spirit, the charismata, that are given to humanity.

<sup>150</sup> Ibid, 105.

<sup>151</sup> Fettke, “The Spirit of God Hovered Over the Waters: Creation, the Local Church, and the Mentally and Physically Challenged, A Call to Spirit-led Ministry,” 181.

all have been created by God's Spirit with their own unique 'life force' that expresses God's true intention for them...The disabled should be recognized as having a 'life force' made possible by the Spirit's work. This approach to pneumatology has great implications for those whose very lives have been defined by their disability.<sup>152</sup>

Thus, dis-abled persons can minister, even with the gifts of the Spirit, because they have been given the same Spirit as abled-bodied people, a perspective the normate group might often reject. Yong affirms this to say that dis-abled persons to experience and engage the gifts of the Spirit because the charismata manifest themselves in humanity, they are communal in that they are for the common good, and thus the yare distributed to each person for a distinctive role to be fulfilled by certain individuals.<sup>153</sup> Therefore, dis-abled people must be included in the Church not only because they need ministry themselves, but also because they have a unique place to minister as well.

In conclusion, disability theology seeks understanding of those with dis-abilities in light of the image of God and in relationship with the Church. In study, theologians under this practice have come to the conclusion that most of the struggles that those with dis-abilities face are created and perpetuated by an exclusive, ableist society. Thus, there is continuity throughout these works that the dis-abled person is not dis-abled by sin or by curse, but rather by a repeated societal misnomer and misunderstanding of personhood. Instead, disability theology looks to the disabled body of Christ to understand the personhood of those with dis-abilities to be persons of solidarity and wholeness. Further, there is nothing inherently wrong with people with dis-abilities other than the conflicts they face in light of stigma and ostracization by their able-bodied

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<sup>152</sup> Ibid, 174.

<sup>153</sup> Amos Yong, "Disability and the Gifts of the Spirit: Pentecost and the Renewal of the Church," *Journal of Pentecostal Theology* 19, no. 1 (January, 2010).

peers. Thus, the argument is made that those with dis-abilities have the right to both be ministered to, and to fulfill their own calling in ministry with the gifts given to them by the Spirit.

## THE MENTALLY ILL AND THE UNIQUELY GIFTED

In light of an understanding of mental illness, this chapter will survey unique individuals throughout the course of history that expressed such characteristics and symptoms of mental disorder. These individuals were not formally diagnosed with any specific illness because a formal diagnostic method was not yet created during their lifespan, however, their expression of such behavior and thoughts do, in fact, ascertain a probable presence of mental disorder. This survey will recognize these characteristics alongside their profound impact on the history of the world. In concordance with this, a review of individuals in Scripture that expressed unique gifts given by God will follow thereafter. These gifts include workings in the prophetic, tongue speech, and other such Divinely inspired abilities. It will also be surveyed as to how the surrounding community accepted or rejected the gifts and the individuals that expressed them. After, a short synthesis will conclude the chapter in order to compare the two groups of people studied.

### The Mentally Ill Through History

Through different periods of recorded history there are several unique individuals that have impacted society in uncountable ways; however, in some cases these individuals faced struggles that are presently characteristics of diagnosable mental illnesses. For the sake of time, this portion of the chapter will review two major figures of society that also displayed characteristics of mental disorder, and their impact upon culture in lieu of their apparent mental struggle.

One of the most well-known figures in history that seems to inimitably be described as such a figure is the widely acclaimed artist Vincent van Gogh. Van Gogh is described as the father of expressionism,<sup>154</sup> an art form that seeks to portray inward, emotional experience rather than perceptions of the external world. This form of art seems to coincide with his unceasing devotion and lustrous passion of portraying “humanity” in his artwork.<sup>155</sup> Additionally, in his review of the profound work of the Art Gallery of Ontario, Henri Dorra explains that van Gogh was also one of the first pioneers in cloisonism, a post-impressionist art form that contours textured and flat brush strokes with dark colors.<sup>156</sup> Thus, his artwork has been displayed at some of the world’s most exclusive exhibits,<sup>157</sup> and are still yet displayed in modern universities, museums, and exhibits.

There is no doubt that van Gogh impacted not only the realm and discipline of art, but also the culture of the era in which he lived through his artwork; yet, van Gogh also displayed characteristics of serious mental disorder as observed in his letters to his brother Theo and other forms of autobiographical documentation.<sup>158</sup> Vincent often found consolation in his brother, and was recorded to admit to Theo that he struggled through his childhood because it was “gloomy, cold and sterile.”<sup>159</sup> The early stages of his life were, unfortunately, not much easier since they

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<sup>154</sup> Margaret Breuning, “Vincent van Gogh,” *Parnassus* 7, no. 6 (1935), 7.

<sup>155</sup> Ibid.

<sup>156</sup> Henri Dorra, “Van Gogh and Cloisonism,” *Art Journal* 41, no. 3 (1981), 258.

<sup>157</sup> The Art Institute of Chicago, “The van Gogh Exhibition,” *Bulletin of the Art Institute of Chicago* 30, no. 5 (1907-1951), 62.

<sup>158</sup> Breuning, “Vincent van Gogh,” 8.

<sup>159</sup> Kaylan Bhattacharyya and Saurabh Rai, “The Neuropsychiatric Ailment of Vincent Van Gogh,” *Annals of Indian Academy of Neurology; Mumbai* 18, no. 1 (March 2015), 6.

were marked by failure and disillusionment through several different careers.<sup>160</sup> One of these included a rejection of both the church at large and the clergy members as well.<sup>161</sup> At the age of twenty-eight, van Gogh began painting, but upon his move to France van Gogh checked himself into the asylum in Saint Rémy in 1888.<sup>162</sup> In 1890, he moved to a commune where he was treated again by a well known physician in France; at this time he painted some of his seminal works until he was shot, either self-inflicted or accidentally, and died.<sup>163</sup> Throughout these years, anxiety, impotence, absent-mindedness, hallucinations, stupor, and several severe physical ailments constituted van Gogh's internal struggles.<sup>164</sup> In light of these symptoms and the advancements made in psychological research in the present time, there have been many proposed "diagnoses" for van Gogh's mental disorder. These diagnoses range from lead poisoning, to epilepsy, to bipolar depression, and although these are mere surmises as to what van Gogh did actually express, there is substantial and "incontrovertible evidence that van Gogh must have suffered from some intractable neurological or psychiatric disorder."<sup>165</sup> It is, then, undoubtedly clear that van Gogh possessed mental disorder, but also an undying creativity that has impacted the realm of art and culture since the time of his death.

In addition to van Gogh's impact on society in lieu of his mental disarray, another historical figure that presumptuously displayed characteristics of mental disorder is the theologian Martin Luther. A foremost leader of the Reformation in the sixteenth century, Luther

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<sup>160</sup> Breuning, "Vincent van Gogh," 8.

<sup>161</sup> Ibid.

<sup>162</sup> Bhattacharyya and Rai, "The Neuropsychiatric Ailment of Vincent Van Gogh," 6.

<sup>163</sup> Breuning, "Vincent van Gogh," 8.

<sup>164</sup> Bhattacharyya and Rai, "The Neuropsychiatric Ailment of Vincent Van Gogh," 6.

<sup>165</sup> Ibid, 8.

impacted the world incalculably. One obvious manner in which Luther changed history and altered theology was through his grievances he proposed to the Catholic Church, and his means to reforming the church's orthodoxy and praxis in order to reflect the Pauline notion of righteousness bestowed by grace alone. In light of such ideas, he fought to reform church practices such as the sale of indulgences that, in Luther's eyes, only gave the Catholic church more power.<sup>166</sup> In addition, with Augustinian ideology and a profound scrupulosity for biblical hermeneutics, Luther introduced much of what modern theology still affirms today; such ideas shaped the Protestant movement which in turn produced copious amounts of denominations and movements within itself, whether or not it was Luther's initial intention or not.<sup>167</sup> These movements and churches expounded and expanded upon one another to the extent of the amount of Reformed and Neo-reformed churches that still exist today. Martin Luther's theology and action to protest injustice within the Catholic church largely impacted theology and philosophy from the sixteenth century forward, especially in the West.

Though profound in his impact on the Church at large and society, Luther expressed signs of mental disorder as well. Throughout his life, Luther recorded anxious thoughts and obsessive behavior, said to be due in part to his austerity.<sup>168</sup> Upon his first altar call as a young Catholic boy, Luther remembers in his journal of his utter and debilitating fear of serving God in such a manner, and of the possibility of making a mistake; he accounts, "...I was utterly stupefied and terror-stricken."<sup>169</sup> Throughout his childhood and into his twenties, Luther exemplified signs

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<sup>166</sup> Justo L. González, "Martin Luther: Pilgrimage to Reformation" in *The Reformation to the Present Day*, 2nd edition, volume 11 of *The Story of Christianity*, (New York, NY: HarperCollins, 2010), 19-36.

<sup>167</sup> Ibid.

<sup>168</sup> Ibid, 21.

<sup>169</sup> Roland H. Bainton, *Here I Stand: A Life of Martin Luther*, (Nashville, TN: Abingdon Press, 2013), 25.



of obsessive perfectionism that seemingly lead to compulsive, repetitive behavior, such as intensely habitual confession in order to make recompense for sin,<sup>170</sup> and even ascetic self-harm in punishment of imperfect thoughts or actions.<sup>171</sup> Through his obsessive confession, Luther “spent hours listing and examining all his thoughts and actions, and the more he studied them the more sin he found in them.”<sup>172</sup> It was not until a spiritual advisor of Luther’s pointed him in the direction of the Mystic interpretation of piety that he found liberation from his obsession of his sinfulness and continuing need of confession; further, Luther came to accept the grace of God by reasoning that faith is to be the ultimate means of righteousness.<sup>173</sup> However, this seemingly intense attention to detail, almost in obsessive form, was still present in Luther as he lectured and formed the theses for his proposed reformation. With this information in mind, it is probable that Martin Luther, one of history’s most notable theologians and a pioneering reformer, possessed characteristics and expressed behaviors of Obsessive Compulsive Disorder.<sup>174</sup> However, these behaviors can most likely be contributed to the leading of Luther to God’s grace, a liberating experience with Divine mercy, that further pushed Luther into his theology of faith-based

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<sup>170</sup> Ibid, 26-29.

<sup>171</sup> Gonzalez, “Martin Luther: Pilgrimage to Reformation,” 23.

<sup>172</sup> Ibid.

<sup>173</sup> Ibid, 24, 26.

<sup>174</sup> Please refer to the DSM-5 criteria of diagnosis of OCD. The similarities of behaviors recorded by Luther that could align with the diagnosis criteria of OCD are both obsessions and compulsions. Firstly, obsessions are “recurrent and persistent thoughts, urges, or images that are experienced, at some time during the disturbance, as intrusive and unwanted, and that in most individuals caused marked anxiety and stress,” which could align with Luther’s obsessive reflection and meditation upon his sin. Additionally, compulsions are defined as, “repetitive behaviors (e.g., hand washing, ordering, checking) or mental acts (e.g., praying, counting, repeating words silently) that the individual feels driven to perform in response to an obsession or according to rules that must be applied rigidly,” which seem to correspond with Luther’s consistent confession and ascetic self-punishment.

American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders* 5th edition, (Washington D.C.: American Psychiatric Publishing, 2013), 235-264.

Paul Cefalu, “The Doubting Disease: Religious Scrupulosity and Obsessive-Compulsive Disorder in Historical Context,” *Journal of Medical Humanities* 31, no. 2 (June 2010), 111.

righteousness; even further, these obsessive traits seemed to remain into his years later as he sought reform from the Catholic church.

### The Uniquely Gifted

Now the discussion will transition to the individuals in Scripture that expressed unique gifts given by God, and a review of such gifts. The first point of discussion is to understand Divinely given gifts. This concept appears to be twofold simply because of the nature and definition of “gift,” so that a Divine gift may be something one is naturally graced with from God, or something uniquely given to one by God. The former aspect of Divine gifts appears to be more universal than the latter. This universal gift begins at the very existence of each human being, meaning that the very ontology of humanity is given as a gift by God because it was by the grace of God that humanity was created in the first place. This is why Paul argues in his epistle to the Romans that humanity’s cause for wrath originated from ingratitude of God’s creation of the world and all of humankind.<sup>175</sup> Further, in James’ epistle, this universality is reckoned by his explanation that *every* good and *every* perfect gift is given by God (James 1:17). James’ definition of gift is often interpreted to be a vague, comprehensive sense of the term that encompasses all good things, but it can also imply that every good and perfect gift is *wisdom*, originating from the ultimate Source of wisdom.<sup>176</sup> Sophiologically, in this sense, “gift” then could imply this wisdom is all that is good, and therefore all that is good is comprised as a gift

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<sup>175</sup> Troels Engberg-Pedersen, “Gift-Giving and Friendship,” *Harvard Theological Review* 101, no. 1 (January 2008): 24.

<sup>176</sup> J. C. Poirier, “Symbols of Wisdom in James 1:17,” *Journal of Theological Studies* 57, no. 1 (2006): 58.

unto humanity existing in a world deviated from the truest form of good.<sup>177</sup> Therefore, every universal good thing is a gift given by God to all humanity. Such universal gifts comprise much of ordinary life, like provision of sunlight, rain for crops, and air to breathe; however, these gifts can and do expound to provisions of food, safety, and other such specific needs humanity has for survival.

The latter aspect of Divine gifting is more specific and unique both in the giving and the receiving. These gifts remain universal in that they are given universally by the same God, as Paul expounds upon to say that no one can boast for his or her gift since they are begotten by God, bestowed by God, and boastable solely by God.<sup>178</sup> This credibility to boast reaches to the gift of salvation as well, in that salvation is a gift from God that is not earned, lest it lose its “giftiness.”<sup>179</sup> Salvation is given by God and is accomplished by faith; faith thus receives the gift in order to actualize the event; therefore, this event in its entirety is a gift of God, and boastable only by God.<sup>180</sup> This gift of salvation does universally reach to all people through the propitiating and resurrected work of Christ, though still given as a gift by God.

In addition to the gifts of the Father, such as existence and provision, and the gift of the Son, salvation, there is also not only the gift of the Holy Spirit, but the charismata given by the

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<sup>177</sup> This concept is adapted from a lecture given by Dr. Chris Green. Christopher E. W. Green, “Sophiology,” Lectures in Contemporary Theology, Southeastern University, Lakeland, FL (September 28, 2018).

<sup>178</sup> Joseph A. Fitzmyer, *The Anchor Yale Bible: First Corinthians* volume 32 (New Haven, CT: Yale University Press, 2008), 217.

<sup>179</sup> Andrew T. Lincoln, *Word Biblical Commentary: Ephesians* volume 42 (Dallas, TX: Word Books Publisher, 1990), 112.

<sup>180</sup> *Ibid.*

Spirit as well.<sup>181</sup> Augustine's hermeneutic of the Spirit's bestowment upon humanity leads him to believe the title and occupation of the Spirit is both "Love," and "Gift."<sup>182</sup> Much of church history, both Eastern and Western tradition, has also accepted this understanding of the Spirit's role in humanity's existence. Although the ontology and occupation of the Holy Spirit cannot be limited to these two terms, it is important to note that the Spirit is given to humanity throughout the course of Scripture in both testamental periods. Accounts of this conferral of God's Spirit upon humanity begins with Bezalel and his commission of artistry for the Tabernacle, stretches to the voice of the prophets of ancient Israel, and reaches to the prophecy of Joel, the promise of Jesus, fulfilled at Pentecost in which the Spirit would be poured out on all believers. In each case, and in similar circumstances throughout Scripture and church history, the Spirit of promise was given unto believers as a seal of salvation and a help.<sup>183</sup>

This working of "helper" that is embodied by the Spirit encompasses many character traits, such as helper, witness, interpreter, prosecutor, and revealer;<sup>184</sup> and these characteristics often manifest themselves in the gifts of the Spirit. Though they are not to be worshipped or praised, and they remain to be gifts given by God, these gifts are ones that are characteristically given sparingly to certain individuals or communities, therefore ascribing the individuals receiving such characteristics as uniquely gifted. Within this overarching idea of spiritual gifts

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<sup>181</sup> I am not arguing tritheism in this differentiation of each Giver of the separate gifts; the gifts listed are bestowed by God, who is One, through whom the three Persons of the Trinity give in the respective manner by which each interact with humanity. However, the gifts originate and are given each by God, originating from a trinitarian perspective.

<sup>182</sup> Matthew Levering, "The Holy Spirit in the Trinitarian Communion: 'Love' and 'Gift'?" *International Journal of Systematic Theology* 16, no. 2 (April 2014).

<sup>183</sup> John 14:16, Ephesians 1:13-14 NASB, Matthew N. O. Sadiku, *Ephesians: A Pentecostal Commentary*, (Bloomington, IL: AuthorHouse Publishing, 2012), 18-19.

<sup>184</sup> F. F. Bruce, *The Gospel of John: Introduction, Exposition, and Notes*, (Grand Rapids, MI: William B. Eerdmans Publishing Co., 1994), 302.

there exists a multitude of various Divine endowments. As previously mentioned, the first recorded human filled with the Spirit, along with other gifts including wisdom, knowledge and skills of various crafts, was Bezalel the artisan of the Tabernacle.<sup>185</sup> He was empowered by the Spirit and the gifts of wisdom and skill to carefully craft and design the Tabernacle artfully.<sup>186</sup> Additionally, throughout the history of Israel the various prophets that arose expressed a prophetic gifting that is traditionally understood to be inspired and endowed by the Spirit. Calvin purports that the Spirit is proved divine because of His work and speech through the prophets' forthtelling.<sup>187</sup> With their prophecies understood as this "forthtelling," it is good to say the prophets of Israel were Spirit-inspired simply through the word of God, specifically the Torah, to fulfill the ministry of God.<sup>188</sup>

In addition to these unique individuals that furthered the ministry of God in light of what He had equipped them with, there also must be a consideration of the spiritual gifts expressed in the New Testament period listed in the Pauline epistles and attested of in Acts. In both his epistle to the church at Corinth and to the believers in Rome, Paul gives a list of certain gifts that people can be graced with. According to Max Turner, these gifts, and those not listed, prototypically function in five charismatic manners: various types of revelation, wisdom either accumulated over time or phenomenally given, various forms of prophetic speech, charismatic praise, and

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<sup>185</sup> Victor P. Hamilton, *Handbook on the Pentateuch: Genesis, Exodus, Leviticus, Numbers, Deuteronomy*, (Grand Rapids, MI: Baker Academic Publishing, 2005), 220.

<sup>186</sup> Ibid.

<sup>187</sup> Keith D. Stanglin, "Spiritus Propheticus: Spirit and Prophecy in Calvin's Old Testament Exegesis," *Calvin Theological Journal* 50, no. 1 (April 2015), 32, 36.

<sup>188</sup> Matthias Wenk, "What is Prophetic about Prophecies: Inspiration or Critical Memory?" *Journal of Pentecostal Theology* 26, no. 2 (September 2017), 183.

miraculous acts of power.<sup>189</sup> These giftings, in accordance to Paul's linguistic continuity throughout these passages, seem to express themselves as functionality within the member of the body rather than as latent gifting which the individual can call on at will.<sup>190</sup> In other words, these giftings are how the member functionally edifies the Church, whether on an individual level or within the broad context of the Church, rather than a gift that periodically appears upon demand.<sup>191</sup> Further, these gifts are "experienced only as *given*," meaning they are available only as "the reality of the living relationship between God and man."<sup>192</sup> Therefore, the uniquely gifted in New Testament Scripture are as the individuals exist in communion with God for the very functionality and edification of the body of believers.

Lastly, in the discussion of the uniquely gifted in Scripture it is important to see how the gifted individuals were perceived and received from the community surrounding them. In regard to the Old Testament prophets, Rickie Moore argues these characters in Scripture were perceived as messengers, minstrels, mad men,<sup>193</sup> and martyrs.<sup>194</sup> First and foremost, the prophets operated as messengers of the *dabar* (word) of YHWH, and they have been, at the very least, traditionally received in such a manner, along with the few others in Scripture that listened to their speeches

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<sup>189</sup> Max Turner, "Spiritual Gifts and Spiritual Formation in 1 Corinthians and Ephesians," *Journal of Pentecostal Theology* 22, no. 2 (2013), 194.

<sup>190</sup> James D. G. Dunn, *Word Biblical Commentary: Romans 9-16 volume 38b* (Dallas, TX: Word Books Publisher, 1988), 725.

<sup>191</sup> Joseph A. Fitzmyer, *The Anchor Yale Bible: First Corinthians* volume 32 (New Haven, CT: Yale University Press, 2008), 464-465.

<sup>192</sup> Dunn, *Word Biblical Commentary: Romans 9-16 volume 38b*, 726.

<sup>193</sup> Moore does realize the shortcomings of this term's lack of gender inclusiveness regarding the prophetesses in Old Testament scripture.

<sup>194</sup> Rickie D. Moore, "The Prophetic Calling: An Old Testament Profile and its Relevance for Today," *Journal of the European Pentecostal Theological Association* 24, no. 1 (April 2004).

and oracles.<sup>195</sup> In another sense, these individuals with the prophetic voice, said to be a gifting from God, poetically delivered their messages to the community to enact emotive responses and the hopeful, desired change of God.<sup>196</sup> The prophets are then labeled minstrels, in that the content of their message often included an elusivity that easily lost its meaning, logic, and practicality to the listener and even at times in the prophet's own consciousness.<sup>197</sup> Thus, Moore also describes the prophets to be mad men, because that was how they were received broadly.<sup>198</sup> Hosea explains his reception in his community as a "fool," while Jeremiah is perceived as drunk;<sup>199</sup> in both cases, the community they were giving their message to labeled the prophet in such a manner as "madmen." In light of these circumstances, the prophets were unfortunately martyrs as well. Moore explains that this martyrdom was not because they witnessed *for* God, but rather because they merely *witnessed* God; their radical theophanic encounters claimed their lives.<sup>200</sup>

In addition to the prophets' varied receptions from their communities, the gift of tongue speech was similarly received on the day of Pentecost in Acts 2. On this day, the Spirit was poured out upon believers that was said to appear as tongues of fire resting on them; they spoke in "other tongues" representing the miracle of speaking in different languages so that the foreigners amongst them would understand their message.<sup>201</sup> In his account for this occurrence,

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<sup>195</sup> Ibid, 18-20.

<sup>196</sup> Ibid, 21.

<sup>197</sup> Ibid, 23.

<sup>198</sup> Ibid, 24.

<sup>199</sup> Ibid.

<sup>200</sup> Ibid, 27.

<sup>201</sup> Hans Conzelmann, James Limburg, and Eldon Jay Epp, *Acts of the Apostles: A Commentary on the Acts of the Apostles*, (Philadelphia, PA: Fortress, 1987), 14.

Luke provides a positive valuation to tongue speech since it is the sign of the Spirit's presence empowering believers to minister the word of God.<sup>202</sup> However, members of the surrounding community interpreted this apparent miracle differently because they attributed the event to drunkenness. Luke was aware that the message of Christians was not popularly received amongst other communities, and was also mindful of the criticism that "Christians speaking with tongues sounded like drunken men."<sup>203</sup> Therefore, he added this detail to display that tongue speech was not positively received by all who were present at Pentecost, and thus, neither was the message of the Gospel. Therefore, in both cases of the prophets and the believers on the day of Pentecost the symbol of the Spirit's empowerment was not received positively by all, whether physical acts, a message from the Lord, or tongue speech.

### Synthesis

In review of the two different groups of individuals presented in this chapter, it is interesting to observe the similarities between them. Both groups of individuals, the mentally ill and the uniquely gifted, faced numerous challenges as they expressed what they were gifted in. Van Gogh experienced challenges as a person that was seemingly struggling with bipolar disorder; Luther fought the obstacle of perfectionism in his pursuit of holiness; the prophets faced challenges of persecution; and the message of the believers at Pentecost was overlooked as they were received as drunk. However, both groups also attributed greatly to their communities and history at large. Van Gogh fathered a new art form; Luther attributed to a revolutionary

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<sup>202</sup> Luke Timothy Johnson, "Tongues, Gift of," in *The Anchor Bible Dictionary* volume 6, ed. David Noel Freedman, et. al. 596-600 (New York, NY: Doubleday, 1992), 599.

<sup>203</sup> C. K. Barrett, *A Critical and Exegetical Commentary on the Acts of the Apostles*, ed. J. A. Emerton, C. E. B. Cranfield, and G. N. Stanton, vol. 1 (London: T & T Clark, 2004), 125.



reformation; the prophets proclaimed the word of the Lord; and the believers at Pentecost shared the message of Christ that brought salvation to thousands. In both cases, therefore, it appears that those who possessed a certain gift<sup>204</sup> brought change to the community even while facing numerous forms of challenges. Lastly, these gifted individuals were also received similarly as well, in that, for the most part, the community as a whole was not always in favor for what they offered society. Van Gogh was rejected by most of his community for his personality and his failed attempts at several occupations; Luther was adamantly opposed and persecuted by the Catholic church; the prophets were oftentimes martyred for the word they brought; and the believers at Pentecost were labeled drunk. However, the reception of these characters did not destroy their impact to the world or to the Church.

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<sup>204</sup> Here the term refers both to a natural talent and a Divine endowment.

## A THEOLOGY OF MENTAL ILLNESS

With understanding to the various components of this discussion, the culmination of the thesis has now come to head: how does one theologically evaluate mental illness in light of the *Imago Dei* to understand the personhood of such people with said mental “disorder”? In light of such evidence that has preceded this chapter, working towards a theology of mental illness will engage the image of God and disability theology. General theologies of dis-ability that have been popularized have been comprised of physical dis-abilities or the dis-ability of autism spectrum disorders, so the conclusions following these constructions must and will be adapted. In addition, the elusive nature of mental illness will also affect the arguments made in this chapter. However, a theology of mental illness is still plausible and imperative. Thus, this chapter consists of a theology of mental illness that affirms the *Imago Dei* in the affected person, seeks to understand mental illness through an adapted lens of disability theology, and offers an alternative, inclusive perspective of individuals with such disorders.

First of all, it must be recalled that mental illness is different than a lot of dis-abilities because it affects the very essence of the human being. Whereas some dis-abilities solely dis-able physical attributes, which do in turn affect the psyche at times,<sup>205</sup> mental illness influences the character, personality, and the personal “self” of an individual. Though these disorders are linked to the brain, they do not merely end there; further there is not a division of mind and body, but rather an intertwining of the psyche with the body, emotions, and consciousness in

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<sup>205</sup> By no means am I diminishing or discrediting the psychological effects of physical disability. Rather, I am trying to show how mental illness affects person through the contrast of mental and physical dis-abilities.

psychosomatic unity.<sup>206</sup> Because of this, mental illness is similar to Yong's explanation of certain dis-abilities that add to the character of the persons with them. Thus, mental illness does affect and impact an individual's essential personhood.<sup>207</sup> Though they can be biologically caused and assessed, mental illnesses cannot be merely reduced solely to the physical being, but rather their phenomenological orientation must also be included since it affects the very ontological and experiential aspects of human personhood.<sup>208</sup> Therefore, the discussion of mental illness in relation to disability theology will be discussed as more than mere physical dis-ability, and rather as a small portion of a person's identity.<sup>209</sup>

Since mental illness affects personhood, stigmatizing those with mental illness as sinful or demonic is to diminish their personhood to less than human. The notion of total depravity and biologically determined sin is vehemently rejected in this theology of mental illness, and thus also then the notion that personhood is inherently sinful is also rejected. Instead, since humanity is living in a fallen world it is heavily inclined to sin because of the existence and prevalence of sin in all the facets of the environment and life experiences in which humanity exists in and encounters. This part of humanity does include mental illness, but not in the traditional understanding of it. Instead, it must be understood that mental illness is not simply a result of sin,

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<sup>206</sup> Luisa Barbato and Nitamo Federico Montecucco, "Neuropersonality: A Psychosomatic Unity Paradigm," *International Body Psychotherapy Journal* 15, no. 2 (Spring 2016): 78-80.

<sup>207</sup> Now, to the degree in which the individual's personhood is affected is based upon the degree in which they reflect the illness. As stated in chapter 1, mental illnesses are often spectrum disorders, so the greater degree of mental illness prevalent in the life of an individual, the greater degree the mental illness will affect the personhood of the individual.

<sup>208</sup> Ashok Malla, Ridha Joobar, and Amparo Gracia, "Mental Illness is Like Any Other Medical Illness," *Journal of Psychiatry and Neuroscience* 40, no. 3 (May 2015).

<sup>209</sup> However, I am not arguing that mental illness is comprehensive or overbearingly compositional of the individuals that express these disorders. By no means am I reducing them merely to their disorders; however, I must recognize that mental illness is different than most dis-abilities in this manner, and that they do play a role, albeit small, in personal identification.

nor is it inherently sinful. Rather, one can sin through the avenue of mental illness and the aspect of their humanity that is mental illness. However, his or her mental illness is not an act of sin or a habitual sin. From a liberationist perspective, this perpetuated belief of mental illness as direct result of sin or as inherently sinful, like those of other dis-abilities, can stem from an ableist understanding, meaning those without diagnosed mental illnesses. The social group that does not have or is not related to those with mental dis-orders attributes unusual and curious behavior to sin since it is abnormal, or against the norm of behavior and cognition. Since mental illness is not like other disabilities or illnesses in that it affects a person's very character and "self," this stigmatization inevitably results in the isolation of individuals with abnormal behavior and cognition from a socially configured norm.<sup>210</sup> In other words, society's majority isolates and dissociates from its "other" counterpart, demonizing such people as inherently sinful or damaged by sin because of their differences.

This in turn creates another social group, separated from the norm, and categorized as different. Though this is not integral to the discussion, it is to be noted that the concept of mental dis-order in theory is potential for every person. As discussed in the first chapter, mental illness is elusive in its nature, and thus extremely hard to define; further, it is even hard to differentiate and define what is mental dis-order and what is normal reactions to life events because of the spectrum character of mental illness.<sup>211</sup> In light of this, Karl Menninger states, "Gone forever is the notion that the mentally ill person is an exception. It is now accepted that most people have some degree of mental illness at some time, and many of them have a degree of mental illness

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<sup>210</sup> Malla, Joobar, Gracia, "Mental Illness is Like Any Other Medical Illness."

<sup>211</sup> Joseph M. Pierre, "Mental Illness and Mental Health: Is the Glass Half Empty or Half Full?" *Canadian Journal of Psychiatry* 57, no. 11 (November 2012): 651.

most of the time.”<sup>212</sup> Additionally, not only is there legitimate, factual evidence for mental illness, but there is also the phenomenological aspect to mental dis-order that purports its commonality as well.<sup>213</sup> In his review of Deleuze, Bion, and Guattari, Harry Hunt engages a postmodern philosophy that gives reasoning behind transpersonal behaviors such as psychotic behaviors. He found among the three philosophers a common thread, that psychosis has the potential to be archetypal in humanity, which means it has the potential to be prevalent in each person.<sup>214</sup> This possibility enacts a normalization of the even to each human in unthought-of-daily experiences, seeing psychotic “breakdowns” rather as “break thoughts,”<sup>215</sup> in that they break through the modern realm of categorized thought and function, to push the edges of scientific modernity’s clear and concise distinctions of reality.<sup>216</sup> In other words, if psychosis is phenomenologically archetypal, that every human can and does experience such “break thoughts,” then the event of such occurrences could not be singled out and labeled with prejudice. Hunt goes onto purport that these “break thoughts” are actually healthy occurrences in the experience of reality. Thus, mental dis-order has the potential to touch everyone, and perhaps this behavior is healthy as Hunt explains, but it certainly does not discredit personhood in an individual, nor does it discredit an ability to engage in relationship with the Divine through the *Imago Dei*.

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<sup>212</sup> Ibid, 652.

<sup>213</sup> Harry T. Hunt, “Implications and Consequences of Post-Modern Philosophy for Contemporary Transpersonal Studies III Deleuze and Some Related Phenomenologies of Felt Meaning: Psychosis and Mysticism as Inherent ‘Structures of Thought’,” *The International Journal of Transpersonal Studies* 33, no. 2 (2014).

<sup>214</sup> Ibid.

<sup>215</sup> This concept of “break thoughts” is in contrast to psychological “breakdowns,” in which Hunt argues these “break” ins are not destructive as usually understood as “breakdowns,” but rather as beneficial, and thus he considers them “break thoughts.”

<sup>216</sup> Ibid.

Kathryn Greene-McCreight asserts that God's image is imprinted upon the human soul to have relationship with humanity, as the second chapter of this thesis explained to be multifaceted and quite complex.<sup>217</sup> According to Greene-McCreight, God holds the human soul firmly in His hands and nothing can destroy the soul, not even mental illness.<sup>218</sup> What brings damage to the soul is a discontinuation of its relationship to God, but if one has a faithful relationship with God then they are not actively in soul sickness.<sup>219</sup> Therefore, it is not mental illness that is directly linked with soul sickness, but rather anything that disrupts a relationship with God. A person with mental illness can therefore have a healthy relationship with God, and there also is the possibility that a person with mental illness allows their illness to disrupt their relationship with God. However, this is possible with any aspect of humanity, aspects such as rationality, emotions, attitudes, and so forth. The point to be made clear here is that mental illness is compatible with Divine relationality, and is not sinful in the eyes of God, because it adds a certain amount of characterization and identity to the individual.

This is also not to argue that mental illness is given to certain individuals as a burden from wrongdoing or for the purpose of sanctification. Mental illness should not be viewed as a mere "thorn in the flesh," a phrase that leaves bad connotations. Throughout the history of biblical interpretation Christian theologians have been trying to find the meaning of Paul's unfortunately abstract problem. Irenaeus and Tertullian argued it to be a physical ailment, Basil and Chrysostom saw it as imagery for Paul's adversaries, and Aquinas and Kierkegaard offered

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<sup>217</sup> Kathryn Greene-McCreight, "In God's Hands: Mental Illness and the Soul," *The Christian Century* 123, no. 9 (May 2, 2006): 29.

<sup>218</sup> Ibid.

<sup>219</sup> Ibid, 30.

that it was a spiritual ailment bestowed by God for the protection of virtue against vice.<sup>220</sup>

However different each theologians' propositions for what this thorn could be, they all seemingly point to the same reason for Paul having it. This common thread is twofold: first, they attribute the thorn to perpetual chastisement for sin that was already committed by Paul, or second, they attribute it to some form of accountability in order to reduce the urge to fall into potential habitual sin.<sup>221</sup> In both cases God is placing the thorn in Paul's side, and the thorn is placed there for behavior modification, or in other terms: sanctification.

Now if it is to be understood what Paul is facing is dis-ability, either physical or mental, which most believe, the idea of a penal or purifying reason behind such a Divine order becomes problematic. First of all, from the perspective of liberatory disability theology this attribution for such a dis-ability would not work. If it is understood that dis-ability does not interfere with the *Imago Dei*, in that it does not counter the attributes of the image of God such as inherent, eternal worth and Divine relationality, then dis-ability cannot be reduced to a mere "thorn in the flesh," inferring causality to be sinful. If dis-abled bodies do not participate in the image of God *despite* dis-ability, but rather *through* the dis-ability,<sup>222</sup> then it is wrong to assume penalty upon the dis-abled person because of sin as the cause. Additionally, it also cannot be inferred that mental illness is reduced to a burden of accountability that further pushes the process of sanctification. Eiesland states, "Viewing suffering as a means of purification and of gaining spiritual merit not only promotes the link between sin and disability, but also implies that those who never

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<sup>220</sup> Adela Yarbro Collins, "Paul's Disability: The Thorn in His Flesh," in *Disability Studies and Biblical Literature* ed. by Candida R. Moss and Jeremy Schipper (New York, NY: Palgrave MacMillan, 2011), 166-167, 169.

<sup>221</sup> Ibid.

<sup>222</sup> Eiesland, *The Disabled God*, 101.

experience a ‘cure’ continue to harbor sin in their lives.”<sup>223</sup> Dis-ability is not given to humanity for purification or refinement in the process of sanctification. If this outcome occurs, it is in the course of navigating an ableist society as a dis-abled person. When Paul speaks of the thorn in his flesh, he attributes it to an aesthetic means of remaining steadfast against conceit and vainglory (2 Corinthians 12:6-8, NASB), but this is not a normative statement for those with disabilities. Instead, dis-abilities are an aspect of personhood, not caused by sin nor perpetuated for purification.

Thus, mental illness must be thought of in a similar sense. It is neither the cause for soul sickness, nor is it simply burdened upon individuals for the sake of purification through suffering. Both of these understandings are broadly promoted by ableist perspectives that reject the personhood of such individuals with mental illness by demeaning dis-ability to causal penalty and reducing such persons to their dis-ability. Instead, mental illness must be recognized, again, for its wide-reaching effects on the psyche, personality, and character of the individuals with such dis-orders. This is also not to diminish the struggle that those with mental dis-order face. The thesis so far has tried portraying mental illness as objectively as possible, without the inclusion of stigma in order to give light to show just how much stigma adds to the struggle. There are personal struggles with mental dis-order, and this must be affirmed.

However, as Eiesland portrayed a Disabled God, the mentally ill also do not have a High Priest that is unable to sympathize in every way, but rather one that is present in all of humanity’s weaknesses (Hebrews 4:15, NASB). Throughout the Gospels it is clear to see that Christ displays behavior that is characteristic of some mental disorder. One such disorder that Christ often displays characteristics of is depression. He first displays these characteristics when

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<sup>223</sup> Ibid, 73.



Lazarus dies, and as Mary grieves Jesus, too, becomes deeply troubled and weeps; all these occur as Jesus is moved in spirit (John 11:32-35, NASB). Another time when Jesus expresses deep depression and distress is in the Garden of Gethsemane. The Scriptures say that Jesus “began to be very distressed and troubled,” and He tells His disciples “My soul is deeply grieved to the point of death” (Mark 14:33-34, NASB). Even as Jesus prays to the Father, the distress does *not* leave Him, but rather the Scriptures testify to Him returning twice to pray and plead for the cup to be taken from Him. And lastly, when hanging upon the cross in deep physical and emotional agony, Christ cries out “‘*Eli, Eli, lama sabachthani?*’ that is “My God, My God, why have You forsaken Me?”” (Matthew 27:46, NASB). Jesus then κράξας φωνῆ μεγάλης, or having shrieked in a loud voice,<sup>224</sup> yields up His spirit. These instances undoubtedly show the Lord experiencing mental distress, revealing the Disabled God as Emmanuel-- present among humanity, in a body like humanity’s, with a brain like humanity’s.

Thus the mentally ill are not sinful nor is their soul sick. Mental dis-order is inherently part of humanity. Therefore, as a person is sanctified so is their mental illness, just as the rest of their personhood is. This then paints mental illness in a completely different light than what has been traditionally thought. No longer a catalyst for sin, mental illness can now be thought of as a redeemable quality of humanity, just as human emotions, rationality, and souls are redeemable. However, this is not to say that mental illness is inherently bad at first before the process of redemption in humanity. Rather, in cohesion of the redemption of the flesh, again, not a totally depraved flesh, but rather a flesh that is inclined to sin due to the human inclination to sin, mental illness is redeemed as the human person is set in right relationship with God. In other words, all humanity is touched and affected by sin, but as the work of Christ through His Spirit

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<sup>224</sup> Translation is mine.

redeems humanity, so all aspects of humanity is redeemed. It is in this redemption that mental illness is not cast out of humanity as is sin and evil, but rather it remains as a positive quality of human life. Therefore, the sin that touches mental illness and those with it begin the process of redemption, in which the parts of mental illness that are touched by such things are restored. One such example would be stigma; it is stigma and prejudice that is diminished in redemption, cast out of personhood, in order to see clearly the value that those with mental illness have. It is not those with mental illness that are in need of “deliverance” then, but rather it is society that needs deliverance from its stigma against the mentally ill. The stigmatic thoughts society has against those with mental illness are evil, and will and ought to be cast out, but not the mental illness itself because mental illness is not inherently sinful, just the parts of it which evil has marred. Instead, with this lens of redemption mental illness ought to be viewed as a unique gifting, a part of humanity that enables instead of disables.

It now is helpful to look at a few examples of how mental illness may be viewed redemptively to God’s first intention to clarify “uniquely gifted.”<sup>225</sup> Generally speaking, “psychiatric studies have noted characteristics common to both exceptional creative production and mental illness.”<sup>226</sup> One such link is found in attention-deficit hyperactivity disorder, or ADHD. Research has consistently shown that high creativity achievement is linked to low-latent inhibition, which means high creativity achievement is caused by an overcoming of the filtration system of irrelevant stimuli, and thus causing one to focus more on such content.<sup>227</sup> Whereas

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<sup>225</sup> For the sake of this undergraduate thesis only a few examples will be given, but it is emplarly enough to argue for this terminology.

<sup>226</sup> Ashley Warner, “Creativity and the Self: A Self Psychological Approach to Art and Healing.” *Clinical Social Work Journal; New York* 41, no. 1 (March 2013), 73.

<sup>227</sup> Indla Reddy, Jateen Ukrani, Vishal Indla, and Varsha Ukrani. “Creativity and Psychopathology: Two Sides of the Same Coin?” *Indian Journal of Psychiatry; Mysore* 60, no. 2 (June 2018), 170.

individuals with an average latent inhibition will only concentrate on one task, those with ADHD will concentrate more so on the irrelevant stimuli rather than the task at hand. Thus, as the individual with ADHD strives to focus on the subject, they also naturally give attention to the stimuli surrounding them as well causing a more creative approach to the task they were focusing on to begin with. In other words, those with ADHD have a unique gifting, in that they are naturally inclined to give attention to details that others without such gift overlook, and therefore, this can give them a more creative edge.

Not only this, but it is said that mood disorders and schizophrenia are said to be linked to creativity as well. “A study of 1000 creators have provided consistent evidence for elevated rates of bipolar disorder in samples of famous individuals,” as is to be recalled the case of the famously gifted Vincent van Gogh discussed in the previous chapter.<sup>228</sup> In one case study at the highly prestigious University of Iowa Writer’s Workshop it was found that from the thirty participants that forty-three percent of them met criteria for bipolar spectrum disorders.<sup>229</sup> There seems to be a clear link between creative thought and the bipolar spectrum, one that perhaps is linked to the consistent change in emotion towards life that can creatively explore and depict the different aspects of life suddenly for clearer “big picture” perspectives. In addition, schizophrenia is also proven to be linked to creativity as well. Schizophrenic thoughts are more likely to be different, original, and new, and in its very nature schizophrenia sets a predisposition in individuals to satisfy such creative thinking in order to distinguish oneself as original.<sup>230</sup> Such

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<sup>228</sup> Ibid, 171.

<sup>229</sup> Ibid.

<sup>230</sup> Ibid.

positive traits that result from this disposition are “unusual perceptual experiences, thin mental boundaries between self and other, impulsive nonconformity and magical beliefs.”<sup>231</sup>

The difference between the two is that bipolar creativity seems to produce “normal” creativity depicting lived experiences and emotional realities, whereas schizophrenia depicts more of a “genius” creativity that is revolutionary and completely different.<sup>232</sup> However, these dis-orders are similar in that the divergent thinking, unusual associations, and manifold, or manic, thoughts found in both are all palpable characteristics of creativity as well.<sup>233</sup> Therefore, the very ontology of both dis-orders is creative. Another interesting commonality is found between the two as well: not only was the individual with the dis-order more inclined to creativity, but so were immediate family members as well.<sup>234</sup> Therefore, it is to be noted that those with these dis-orders are more inclined to creativity, but they are also gifted in spurring creativity on in other individuals as well. This portrays a unique gifting of hyper-creativity and stimulation of creativity in others around them.

Lastly, obsessive-compulsive disorder, or OCD, also has its links beyond commonly defined mental distress as well. As discussed in the last chapter, Martin Luther most likely had OCD as seen in his journal entries and biographies through his religious scrupulosity. This compulsion to be scrupulous with religious thought and dogma can be seen as a subspecies as

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<sup>231</sup> Ibid.

<sup>232</sup> E. Thys, B. Sabbe, and M. De Hert. “Creativity and Psychiatric Illness: The Search for a Missing Link - An Historical Context for Current Research.” *Psychopathology; Basel* 46, no. 3 (April 2013), 138.

<sup>233</sup> Ibid, 144.

<sup>234</sup> Reddy, “Creativity and Psychopathology: Two Sides of the Same Coin?” 173.

OCD, and not a rare one at that.<sup>235</sup> It is clear to see several Reformed theologians expressing such a dis-order in their obsessive religiosity;<sup>236</sup> however, it is this scrupulosity that may be considered as an integral stage in the Protestant conversion experience.<sup>237</sup> In modern day obsessive scrupulosity it is often considered a means to a spiritual end, one where obsessive thought turns into compulsive behavior, but for a beneficial spiritual end. Thus, it could be said of OCD that obsessive scrupulosity in religious circles, and in other facets of life as well, spur on growth and development in a hyper-disciplined, uniquely gifted manner.

There is much to be said about the wide range of spectrum mental dis-orders, however, it is to be understood that mental illness can be viewed as a unique gifting in that it bestows upon individuals certain attributes that produce positive and in most cases beneficial outcomes. Therefore, mental illness is to be considered a unique gifting in this model of theology because of the very essence of what they produce in people, things such as attention to detail, profound creativity, and scrupulosity leading to personal growth. Ontologically, mental illness is no longer a dis-order to those with it, but rather a unique gift that can be harvested as such and used in such a manner. Although, this perspective of mental illness will take time to adapt to in order to use such means of cognition as the unique gifting they are. There are inherent difficulties in doing so, however the largest challenge to those with these unique giftings is stigma and the social norm rejection of any deviant behavior or cognition.

This challenge was also presented to those that were uniquely gifted in Scripture as well, often with results that lead to defamation of character and even death. The prophets were

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<sup>235</sup> Paul Cefalu, "The Doubting Disease: Religious Scrupulosity and Obsessive-Compulsive Disorder in Historical Context." *Journal of Medical Humanities* 31, no. 2 (June 2010): 114.

<sup>236</sup> As exemplified in the earlier discussion of Martin Luther in the third chapter.

<sup>237</sup> *Ibid*, 115.

regarded as madmen, and those that spoke in tongues were considered to be drunk. If society would have listened to the people of God, speaking on behalf of God, imagine the lasting impacts. Similarly, imagine the impact if those with mental illness, or now considered those with unique giftings, were also received with validation and respect for the individuals they are.

Although this outlook upon mental illness as a unique gift is controversial and possibly egregiously offensive to some, the intent of this terminology is to enact social change in and outside the Church to see the value uniquely gifted individuals inherently possess. They are ontologically deviant from the norm, but deviance does not equate to sin or wickedness, as reflected in the radically deviant life of Christ. Those with mental illness are redeemed as any other human is in relationship with God, but their mental illness may remain since it is essentially influential to their character and personhood. Just as human rationality, affection, cognition, and phenomenology must be redeemed, mental illness must also be freed from the binds of sin. But, this does not equate mental illness to sin; instead, the ministry of redemption enacted by Christ and progressed by His Spirit reveals the unique gift found in mental illness given to those who are abled enough to utilize the gift, and to glorify God with the gift.

This redemption process occurs on an individual basis as the person is conformed to the image of Christ in her or his journey of faith. As their relationship with God progresses, so their true personhood emerges, that which God first intended for, and in this process mental illness remains as it is discovered instead to be occupied as a unique gift. The only regression these individuals may face is societal rejection and stigma, and thus, this thesis calls for enacted inclusivity, especially in the Church, as to liberate the uniquely gifted to worship and fellowship in the community of the faithful saints.

## PRACTICES FOR ECCLESIASTICAL INCLUSIVITY

In his seminal work *Mental Health and the Church*, counseling psychologist Stephen Grcevich states, “Our willingness to examine ways that we can make our church gatherings more welcoming to those with...mental health disabilities is a good barometer of the extent to which we value them and recognize them as fellow image bearers of God.”<sup>238</sup> With many different perspectives of mental illness given, and whether or not the proposed perspective is accepted, the call for inclusivity for those with mental disorder within and outside the Church is a present and necessary endeavor to value those with mental illness. These issues must not only reach the laity and the members of the laity that have mental illness, but also the clergy and the members of the clergy with mental illness. Stigma must decrease, if not diminish entirely, for this quest to come close to practice, and practical methods to implement in praxis for understanding and including those with mental disorder must follow. To do so, there must first be a recognition of the issues at hand, and an active acknowledgement from the Church that such issues exist. Following, there must be information and education provided for both the mentally “abled” and “dis-abled” to begin reconstruction. This reconstruction process includes practical methods of inclusion and affirmation of the marginalized people. All of these things practiced in a faithful community will then result in a healthy environment for all to worship freely.<sup>239</sup>

The first step to reconciliation and integration of those with mental illness into ecclesiastical circles is to first affirm these issues’ existence. There is a tendency in faith-communities to deny the existence of mental illness, and as discussed thoroughly thus far, mental

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<sup>238</sup> Stephen Grcevich, *Mental Health and the Church*, (Grand Rapids, MI: Zondervan, 2018), 45.

<sup>239</sup> Notice I said that these things are to be practiced in a faithful community, but I did not offer and form of measurement of the community. This model of inclusion will work in any size of congregation so long as the leadership of the church is understanding of and in favor of promoting such ministry within the church.

illnesses are often stigmatized greatly within church walls. The best way to counter this stigmatization in order to jumpstart inclusivity is through education. Cross-sectional studies have consistently shown that members of society who have more knowledge of the dis-orders, even if they themselves do not have such dis-orders, are less likely to endorse stigmatizing attitudes.<sup>240</sup> In a recent controlled pilot investigation in Nicaragua, a country that is notorious for mental health struggles in adolescents, it was noted that simple education of what mental illness is and how to better care for it decreased stigma, increased healthier life choices, advanced coping mechanisms, and lowered stress levels of those interviewed.<sup>241</sup> Additionally, these changes are most greatly found in attitudes toward those with more severe disorders such as schizophrenia.<sup>242</sup>

Therefore, in order to create a more inclusive environment for those with mental illness within the Church is first to educate both the clergy and the laity. This education may come in several different forms. Beyond this thesis there are a few resources that pastors and administrators can reference, even though mental illness in regard to ecclesiastical communities is presently coming of age in the realm of literature and research. For those in the clergy, it is suggested to read materials such as Stephen Grcevich's *Mental Health and the Church*, a short and yet immensely helpful book that not only gives an overview of mental disorders, but also a model of inclusivity as well. This model Grcevich offers is one integrated within this thesis' model. Another resource for clergy members is *Grace for the Afflicted: A Clinical and Biblical Perspective on Mental Illness* written by another clinical psychologist, Matthew S. Stanford.<sup>243</sup>

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<sup>240</sup> Paul E. Holmes, et. al., "Changing Attitudes About Schizophrenia," *Schizophrenia Bulletin* 25, no. 3, (January 1999), 447.

<sup>241</sup> Arun V. Ravindran, et. al, "Evaluating the Benefits of a Youth Mental Health Curriculum for Students in Nicaragua: A Parallel-Group, Controlled Pilot Investigation," *Global Mental Health* 5 (January 25, 2018).

<sup>242</sup> Paul E. Holmes, et. al., "Changing Attitudes About Schizophrenia," 454.

<sup>243</sup> Matthew S. Stanford, *Grace for the Afflicted*, (Colorado Springs, CO: 2008).



This resource offers more in-depth information behind each disorder, giving reason for them, treatment for them, and a biblical perspective of each. Not only does this resource help in the education process of clergy, it would also aid in pastoral references to other types of counselors for those with mental illness that approach clergy for help.

Additionally, pastors and other church administrators can follow Rick and Kathy Warren’s strategic, educative “Hope for Mental Health Ministry” plan that offers tools and other resources for ministers administering programs of education for their congregations and ministries.<sup>244</sup> On her website, Kathy Warren gives a plethora of materials, from books to podcasts to educational curriculum, in order to equip pastors with the necessary tools for ministering to those with mental illness, the families of those with mental illness, and the rest of the laity that are in community with these groups of people. Another great resource is the “Pathways to Promise” that is intended for “faith leaders, interested laity, people with mental illness and their families, friends and supporters and mental health professionals interested in working with the faith community.”<sup>245</sup> Not only does this faith-based organization offer more information and tools for understanding mental health, but it also offers a network of resources that clergy and lay members can take advantage of in order to better serve the population of those with mental illness.

Beyond these materials of reading, clergy can also become members to the NAMI FaithNet from the National Alliance of Mental Illness.<sup>246</sup> This is another network of friends,

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<sup>244</sup> Rick and Kathy Warren, “Hope for Mental Health Ministry,” *Kathy Warren*, 2018. <http://kaywarren.com/mentalhealthandthechurch/>

<sup>245</sup> Pathways to Promise. “Home.” *Pathways to Promise - Bridging Faith, Culture, and Mental Health*, 2018, [www.pathways2promise.org/organizations-networks/](http://www.pathways2promise.org/organizations-networks/).

<sup>246</sup> National Alliance on Mental Illness, “NAMI FaithNet,” *NAMI: National Alliance on Mental Illness*, 2018, [www.nami.org/NAMIFaithnet](http://www.nami.org/NAMIFaithnet).

clergy, and congregations striving to encourage the vital role of spirituality in the lives of those with or those living with individuals with mental illness.<sup>247</sup> Clergy and laity are invited to participate in awareness events and can host support groups. FaithNet connects individuals with resources such as Rick and Kay Warren, mentioned previously, and with the APA Faith Booklet as well. The APA Faith Booklet is published by the American Psychiatric Association, also the publisher of the DSM, and recognizes that spiritual practices are key aspects to the road of redeeming mental illness.<sup>248</sup> This booklet is specifically designed to educate church leaders how to best serve those with mental illness by explaining how to give referral options for treatment and counseling, distinguish between spiritual and mental health issues, and include those with mental health issues in ministry.

The resources given aid in fulfilling the call for church members and clergy to educate themselves in the area of mental health to break stigmatic barriers and open practicing communities of faith for inclusivity. From these resources this thesis will provide succinct, though not comprehensive, means of inclusion for those with mental illness. Avenues of inclusion that are presented are communication, community-based teamwork, creation of healthy environments, and encouraging and promoting those with mental illness to take part in both ministry and ministering. This model is culminating, that as Church leaders and members achieve the preliminary steps, they are able to achieve those that follow more smoothly and effectively.

Thus, after education for pastors, leaders, and lay persons, the next step to inclusivity is through communication. This step is the process of relaying education and information to the

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<sup>247</sup> Ibid.

<sup>248</sup> American Psychiatric Association, *Mental Health: A Guide for Faith Leaders*, (Washington D.C.: American Psychiatric Association, 2016).

general population. It is suggested that pastors and teachers take the information they have gleaned from their own personal study and implement it into sermons and other avenues of influential communication. As communication of mental illness increases from the pulpit, the attitude of the Church in regard to those with mental dis-orders will positively change.<sup>249</sup> Then, as the attitude of the congregation evolves into more of an open minded optimism, it is possible for ideas such as the one presented in the fourth chapter to be exchanged throughout the church, beginning with the pastor or church leaders. Not only can church leaders relay these messages through sermons, but they can also communicate them through their pastoral influence and outside service events such as small groups, devotionals, bulletins, materials offered on welcome desks, social media, and even post-service conversations.<sup>250</sup> It is also encouraged that those in church leadership, not only pastors but office holders such as teachers, evangelists, and other such leaders, who are brave enough to share their own struggles and victories with mental illness would do so publicly to give testimonies. There is much influence to be had of shepherds leading their flocks through personal testimony.

Moving forward from educated communication not only from the pulpit but also from other church leaders and church resources like informational material and social media, the next step to a more inclusive church is through community-based teamwork. As church leadership educates itself, and as the education begins to disperse to the lay congregation, the next step is formulating a strategic network of people presently involved with the ministry and life of the church to implement a more inclusive atmosphere of the church. This atmosphere of inclusion comes again from the relaying of education through the multiple avenues previously mentioned;

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<sup>249</sup> Grcevich, *Mental Health and the Church*, 103.

<sup>250</sup> *Ibid*, 104-106.

however, it is important that more people throughout the church do this as well to immerse the congregation in the message of inclusion and education to decrease stigma. This team can include the church leadership in the faith community if resources and funds are slim.

However, if the church is larger or if they have more appropriations and resources available, then a more detailed and strategic team can be formed. Such a team can be made from congregants present in the life of the church, such as lay members that are professionally mental health care providers, advocates, professionals, therapists, and social workers.<sup>251</sup> If these professionals are not members of the church, then they may be hired to help in the formulation of inclusive strategies and educational programs if the church has the appropriations. These professionals can offer more education to the rest of the congregation, and they can also offer more ideas to leaders in order to implement programs within ministries to create a more inviting atmosphere for those with mental illness and their families. In addition to professionals, wise laypersons are also recommended for this team. Those that have been through mental illness, continue to live with mental illness, and family members of those with mental illness can provide understanding and support for those with mental dis-orders, their families, and the rest of the church.<sup>252</sup>

The activities of this strategic team are both the normal activities of the church that they serve and also in the promotion of mental illness related ministries and activities if possible. First of all, if the team is simply comprised of church leaders, then they may have influence in the areas they serve. For example, if the team members are in worship ministries, then they may implement inclusivity within the songs by which they lead praise and lament worship

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<sup>251</sup> Ibid, 93-94.

<sup>252</sup> Warren, "Hope for Mental Health Ministry," *Kathy Warren*, 2018.  
<http://kaywarren.com/mentalhealthandthechurch/>

experiences; furthermore, they may choose songs that include language of mental health related problems and achievements. In addition, if the members of the team are involved with administration then they may include materials for education on informational tables located in welcome centers and church informational booths. And if the members of the strategic team are simply altar servers, then they might choose scriptures to read that include language of mental health issues that are mentioned in passages such as the Psalms.<sup>253</sup>

However, if there are appropriations, resources, or even professionals that are available, then there may be extra activities and events offered for education and inclusion. One such activity could be the implementation of a support group hosted at the church. This group could be started from the curriculums found from Kay Warren’s website, NAMI’s FaithNet, Fresh Hope Mental Health Support Groups, Celebrate Recovery, and Grace Alliance.<sup>254</sup> Such groups can be led by mental health professionals, or even normal lay persons with proper training offered through each organization. The interesting aspect of such groups is the incorporation of the world outside of the church in such an event. Not only does this offer a necessary and pressing resource for those who are in need of mental health education and support, but it is itself a form of apologetic to a community that is marginalized and in need of the Church’s loving care. When those outside of the Church see the participation in and the promotion of such a stigmatized community within a faith-based setting, it sets an atmosphere of inclusion and

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<sup>253</sup> Eric L. Johnson, *Foundations for Soul Care: A Christian Psychology Proposal* (Downers Grove, IL: InterVarsity Press, 2007), 416-417.

<sup>254</sup> “Fresh Hope for Mental Health Online Meetings,” Accessed November 13, 2018, <http://www.freshhopemeeting.com/>; “Starting a Group | Celebrate Recovery - A Christ Centred Recovery Program | Celebrate Recovery - A Christ Centred Recovery Program,” Accessed November 13, 2018, <http://www.celebraterecovery.ca/about-cr/starting-a-group/>; “Family Grace,” Grace Alliance, Accessed November 13, 2018. <https://mentalhealthgracealliance.org/family-grace-groups/>.

justice. Thus, not only does the implementation of mental health education, awareness, and promotion increase the health of the Church between its congregants, but they also provides a powerful apologetic to the world that the Church stands and fights for the marginalized, oppressed, and stigmatized individuals in society.

This activity of the Church then sets a standard of inclusion that promotes a healthy environment in and outside of Church walls, and therefore opens the possibility of reaching certain communities that were once closed off from the faith. Education, communication, and this network of team building then promotes this next step of inclusivity, which is creating a safe environment for those with mental dis-orders to worship and exist in the Church. This environment is cultivated by the factors previously mentioned, but it does necessarily call for deeper action as well. Not only is education, communication, and communal awareness and participation necessary, but at times it is also necessary to activate change within the Church to create a more inviting atmosphere. Just as the American with Disabilities Act calls for structural provisions such as elevators and ramps for those with physical disabilities to easily gain access and mobility within buildings across the nation,<sup>255</sup> so too do mental dis-abilities sometimes require physical adaptations to accommodate such dis-orders. Although those with mental dis-orders may cause physical or audible disruptions in traditional and non-traditional worship settings, if the Church will not accommodate these individuals then it is simply shaming those who should be attending Church for inclusion and help.<sup>256</sup> Instead, through conversation and an appropriate review of congregational needs the Church should seek the best avenues possible within means for inclusion and accommodation of those with mental illness.

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<sup>255</sup> Department of Justice, “2010 ADA Standards for Accessible Design,” Accessed November 13, 2018, <https://www.ada.gov/regs2010/2010ADASTandards/2010ADASTandards.htm>.

<sup>256</sup> Grcevich, *Mental Health and the Church*, 141.

Although the task of accommodation in order to create a more inviting and safe environment for worship and fellowship of those with mental illness seems overwhelming, the implementation of such adaptations is not as overwhelming as it may seem. Grcevich outlines five ways in which the Church might better serve this population through accommodation and simple changes. The first way in which the Church might better accommodate toward a more welcoming environment is through the process of rewriting unwritten codes of conduct that most churches adhere to.<sup>257</sup> An example is the expected silence and calm behavior through times of worship, prayer, sermons, and other forms of liturgy. This unwritten expectation is immersed in tradition, has scriptural support, and even has empirical evidence, that those listening to discourses of faith or discussions including biblical rhetoric and language are more psychologically attuned to focus, a phenomena considered high executive functioning.<sup>258</sup> However, when an individual that has a significant deficit in executive functionality walks into an atmosphere of people that are much more high-functioning in this area, these individuals are more inclined to have physical or verbal outbursts. There are two proposed solutions to navigate these outbursts then. First of all, such outbursts are created from an overstimulating event, such as loud music mixed with commotion from movement and gathered crowds. So, the first solution would be to decrease the amounts of stimulants in services.<sup>259</sup> However, this can be tricky to do so because church liturgy is traditional and necessary in some congregations. The second proposed solution therefore is to create an atmosphere that is accepting of such outbursts, leading either from the pulpit in acceptance from leadership, or from the congregation setting a standard by example, that such outbursts are not disruptive, but rather an act of worship by the individual.

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<sup>257</sup> Ibid, 140.

<sup>258</sup> Ibid, 141.

<sup>259</sup> Ibid, 142.

Instead of taking offense to the outburst, the community is to receive the outburst as an outpouring of the individual's personality, an individual they receive as their one of their own.

The second means of accommodation that Grcevich entertains is the overcoming of sensory processing differences between those with and without mental illness in the same worship service. Such dis-orders linked with sensory processing differences are those on the autism, ADHD, and anxiety spectrums. To better accommodate the sensory difficulties these individuals face such factors as lighting, flooring, window treatments, wall colors, fragrances, and sounds must be taken into consideration. Fluorescent lighting is found to expedite sensory issues in these individuals, and can be very distracting and even harmful for the individual during a worship service; therefore, traditional lighting such as lamps and recessed soft lighting can create a much more soothing environment.<sup>260</sup> It must also be noted that lighting such as concert lighting, quickly flashing beams, and colored lighting that bounces back and forth throughout the pews is such activity that can send such individuals into a whirlwind of dis-order. Additionally, in the aspect of ministry that considers sound quality, such as praise time, it is important to note that those with sensory input deficiencies can also find it difficult to exist and flourish in an environment with loud noise and disruptive cacophony.<sup>261</sup> Therefore, it may also be taken into consideration how volume may be appropriately adjusted in certain areas of worship for those with such dis-abilities to attend comfortably in an environment that is friendly to their sensory difficulties.

From here, the Church's next aspect of practical inclusion would be to those individuals with social communication deficits. Naturally, the Church is a social hub, in that one of the top

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<sup>260</sup> Ibid, 154.

<sup>261</sup> Ibid, 156.



reasons given for people attending church was to fulfill the desire for community.<sup>262</sup> However, social interaction is difficult for those with social communication difficulties, found to play a part in many mental illnesses. Thus, proposed solutions include intentionally small discipleship and focus group settings, education on stigma and bullying in the lives of children with and without mental illness, and a call to the Church for deeper relationships that see past the “otherness” in people in order to see the individual as human.<sup>263</sup> These integrations may also overcome social isolation that is often perpetuated by stigma of mental illness, the fourth step in Grcevich’s model of inclusive environments. Instead of forcing those with debilitating social communication deficits and isolation to come to church, perhaps it would be more beneficial to bring church to them in the form of a small group or simply church-made friends acting upon the faith.

Lastly, in order to create a more welcoming and inclusive environment for those with mental illness is to acknowledge and listen to past church experiences. Many people with mental illness or with family members with mental illness that seek community within the church unfortunately are turned away or are hurt by the church’s means of so-called “acceptance.”<sup>264</sup> Therefore, in order to reverse such hurt it is necessary for church leaders and members to listen to and acknowledge such hurts done to those affected by mental illness. The road to healing is validation of such abuses, and a genuine desire to understand where those affected by such disorders come from. Then, once these grievances are heard and understood, it is healthy and proper

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<sup>262</sup> Ibid, 162.

<sup>263</sup> Ibid, 163-164.

<sup>264</sup> Stanford, *Grace for the Afflicted*.

for the new church family to embrace those individuals and reverse such hurt by stopping the cycle of wrongdoing.

In all these practices for inclusion, it must be noted that the goal of such occasions is to achieve not only a welcoming church environment, but also to promote the participation of those with mental illness in ministry. As argued in the fourth chapter, mental illness is an aspect of a person's being, or personhood, and therefore is in the process of redemption as is the rest of the individual's personality. Thus, as it is redeemed, mental illnesses can rather be seen as unique giftings. Because of such a perspective, it must be so that those with these unique personality traits can be included not only in the reception of ministry, but also in the participation of ministry. Those with such unique gifts, like creativity and fine attentions to detail, can truly benefit local church ministry, especially in its outreach to the large portion of the population in and outside the Church that has mental illness. Thus, this model of inclusivity not only drives the need for accommodation to those of mental illness, but it also promotes the inclusion of the uniquely gifted in ministries everywhere. This is, therefore, the kingdom of God and the body of Christ: members of the body in healthy relationship to one another, working in and for the ministry of the Holy Spirit.

## CONCLUSION

Though thorough research has gone into this thesis to conclude important perspectives of mental illness toward an inclusive ecclesiology, research of mental illness in the realm of science, psychology, and philosophy is coming of age. There is yet much to be done in the field of abnormal psychology, and thus the elusive and nearly indefinite nature of spectrum mental dis-order continues. However, this does not discredit the experience of those with mental illness, nor the need for a theology of mental illness to create an inviting atmosphere in the Church for these individuals.

In my own experience of mental illness, I saw the Church reject both my oldest brother's and my struggle with OCD. There was never, quite a place to discuss our own struggles with most in the faith, struggles that most lay members and clergy are very unfamiliar with. And though my brother and I fought many instances of stigma and prejudice along with the normal battle of perfectionism and irritating compulsions, I saw something very special that OCD gave us. For my brother, it was incomparable talent in music through percussion instruments. His obsession with perfection made him practice for hours and hours increasing his skill and stamina, and his related bipolar dis-order often allowed for some of the most creative pieces to accompany the bands he was a part of. For my own self, OCD's need for perfection aids my love for academia, constantly pushing me to find the perfect words for essays, motivating me to read exactly what is assigned, and driving me to make grades that have achieved numerous academic awards. In both cases, we are now serving the Church with such abilities and gifts. My brother has found a faithful community that affirms him as a person with mental illness who, not only can receive ministry, but now can add to the church's worship ministry and other outreach

ministries as well. For myself, I am still trying to find my own place in the church as a future vocational minister with mental illness; however, my OCD has been greatly appreciated in the realm of Christian academia, even if unknowingly done so.

All this to say, the Church's existence in a now postmodern society includes the need for narrative, understanding for those narratives, and the need for change in behavior towards that of inclusion.<sup>265</sup> The first three chapters of this thesis built on the background of the narrative. What is known and theorized about mental illness from psychologists, counselors, medical professionals, researchers, and philosophers was the first item to be discussed in order to give understanding that mental illness is elusive and hard to define, but also a more common event than most acknowledge. There are very specific attributes of each dis-order, but they seem to appear in many different people at many different stages of life, therefore giving a sense of normalization to the activity and experience of mental illness, while also acknowledging each dis-orders own challenges. From here, a discussion of personhood in relation to the *Imago Dei* was then necessary to validate that those with dis-abilities in fact are created in the image of God and such dis-abilities are not caused or perpetuated by sin. This notion is very much applicable to those with mental illness because of the dis-orders' inherent effect on human personhood and character. Lastly, a discussion of those with unique giftings and mental illness throughout history was constructed to show the similarities of such gifted people in Scripture with those of mental illness in history. Their impact upon the world was not widely received at first, but ultimately they changed their immediate community, and the greater world for the rest of time.

Through these three overviews, the thesis culminated to communicate that those with mental illness do experience their dis-abilities in different ways from each other with similar

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<sup>265</sup> Yoon Shin, "James K A Smith and the Possibility of a Postmodern Christian Epistemology: A Constructive Proposal," PhD diss., The University of Aberdeen, 2018.

character traits, that their mental dis-orders are in fact made in the image of God with the ability to have a relationship with God not in despite of such experiences but through them, and that mental illness may instead be viewed as a unique gifting as it is redeemed in the person in the process of salvific redemption that all parts of human personhood are processed through when a person is lead to salvation. Not only is this a liberating perspective of mental illness that denies notions of stigma and defeats the possibility of prejudice, but it also gives light into viewing mental illness in a more positive manner for the individual experiencing it and those around her or him to celebrate such experiences and attributes. Those with mental illness therefore have the capability of a relationship with God and God's church to glorify the Lord in the very manner by which they were made.

After such an argument is made, the thesis then focused upon the Church in a practical sense, in the call for education for the Church to be more understanding and validating to those with mental illness. The notion of postmodern narrative experience is integrated within this model through the use of sharing narratives for the goal of understanding and integration. The stories of such individuals with these unique characteristics can receive ministry and participate in ministry with the very gifts that they are given, including their unique gifting that mental illness offers. As the church begins to evolve in their manner of inclusion for these people as members and ministers, the more opportunities that these individuals have to express their gifts and serve the Lord in a faithful community.

Even though this concept and perspective of mental illness may not be received well by some, the call for a change in attitude towards those with mental illness is a necessity the Church can no longer ignore. This change in perspective is not only for those without mental illness or without close proximity to those with mental dis-orders, but also for those *with* mental illness

and those with close proximities to those with the dis-orders. The thesis of mental illness as unique gifting might be radically different for those without close proximity to mental illness, but with a radical perspective there can be a possibility for negative attitudes to diminish, even if in a small quantity. For those with a close proximity to mental illness, this thesis can be liberating not to ignore the struggles we face, but rather to embrace the beneficial aspects of mental illness to focus positively on the strengths that mental illness may offer in the redemptive process as Christians.

This thesis offers a different perspective on mental illness for those in the faith community to embrace and adapt to the needs of specific ecumenical circles. However, this is merely the tip of the iceberg in research for a theology of mental illness. The time constraint on this thesis means further research is required for a more comprehensive understanding of mental illness. Further research areas include specified theologies to individual disorders instead of a generalized whole. In addition, furthered research from this thesis can also lead to more specific models of inclusion for those specific needs that each mental illness offers. As more and more research unfolds in the realm of abnormal psychology and postmodern philosophy, then a more conclusive and informed theology of mental illness can be made. This thesis is preliminary work in the field of mental health, theology, and ecclesiology.<sup>266</sup>

In the end, the most important aspect of this thesis is the call for inclusivity in churches across the nation. Though the proposed perspective of mental illness may be denied, the need for compassion towards individuals and families affected by mental illness in the Church is a need that can truly no longer be ignored or overlooked. As the Church begins to defeat such negative

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<sup>266</sup> I do understand that other theologies of mental health are presently in the world, such is the case of Marcia Webb's *Toward a Theology of Psychological Disorder*. However, I only found such material late in my research and I was unable to integrate her perspective into this paper. For future reference, I will try to incorporate her understanding if this thesis pushes me into further research of my own.

attitudes towards mental illness by including and accommodating for these individuals in the life of the church and ministry, then a powerful message to the world will be spoken, and the kingdom of God will be reflected all the more greatly in faithful ecumenical circles. Thus, the opportunity for reconciliation and redemption is offered, and a compelling Gospel is given to a population of the world that desperately needs the compassion of Christ.

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