Wellbeing for All
Global Mental Health and the Church-Mission Community
A new paradigm to guide and goad us

Global Mental Health and Trauma Network, Lausanne Movement
29 November 2018, 8:00-9:30 EST

Kelly O'Donnell, PsyD and Michèle Lewis O'Donnell, PsyD
Consulting Psychologists, Member Care Associates, Inc.
MCAresources@gmail.com   http://membercareassociates.org
(c) 2018 Kelly and Michele O'Donnell—see the notes under the slides too

--Image: Detail from the cover of *Global Member Care: Crossing Sectors for Serving Humanity* (2013) William Carey Library.

Purpose

This webinar focuses on Global Mental Health (GMH) and its relevance for the Church-Mission Community (CMC)—and vice versa. Foundational for our discussion is exploring how *"we are His workmanship, created in Christ Jesus for good works, which God ordained beforehand so that we would walk in them."* Eph. 2:10

We overview GMH and its influence as a new paradigm, a growing movement, and a core part of the world community's major efforts to realize sustainable development and wellbeing for all. We then highlight 10 areas for GMH-CMC engagement.

GMH-CMC engagement is a major strategic and largely overlooked opportunity for "**mental health _as_ mission**" (mhM). Many among the hundreds of million people currently suffering from mental, neurological, or substance use conditions reside in low-resource countries--including being part of people groups and/or in settings of conflict/calamity with limited or no access to both the Christian message and effective treatments.

What are we waiting for?!

Opening remarks by UN Secretary-General António Guterres at the UN General Assembly's High-level Meeting on Sustaining Peace, 24 April 2018
"We must recognize that in some fundamental ways, our world is going backwards. More countries are experiencing violent conflict than at any time in nearly three decades. Record numbers of civilians are being killed or injured by explosive weapons in urban areas. Record numbers of people are on the move, displaced by violence, war and persecution. We see horrific violations of human rights, and rising nationalism, racism and xenophobia. Inequalities are increasing; whole regions, countries and communities can find themselves isolated from progress and left behind by growth. Women and girls face discrimination of all kinds. These are all indications that we need greater unity and courage – to ease the fears of the people we serve; to set the world on track to a better future; and to lay the foundations of sustainable peace and development."

**Wellbeing for All
GMH Overview**

*To say "Your side of the global boat is sinking"... is crazy.
We are all on the same precarious, perilous, and precious global boat.*

--Palestinian refugees (IDPs)...in Syria.
130M+people in need of humanitarian assistance.
65M+ people internally or internationally displaced.
--And the list of "globe-ails" goes on and on...
"Globe-ails" is a term we use to encapsulate the many major problems--ails--affecting the people-planet nexus, including our yearnings-groanings for the full restoration of creation.
--See: --Doomsday: Next Stop, Global Dis-Integration? ([Global Integration Update](), June 2017)

Syria (and Lebanon) – complex recent history of civil war: the **Palestinians** given refuge are **twice refugees in the current Syrian civil war.**
Article: **The Palestinians Fleeing Syria Are Among the Most Vulnerable Refugees** (Dec. 4, 2015, thenation.com)
Their special legal status leaves them stateless, even after decades of exile, and without the same rights as other refugees.
By [Mai Abu Moghli]() and [Nael Bitarie]()   link:https://www.thenation.com/article/the-palestinians-fleeing-syria-are-among-the-most-vulnerable-refugees/

History in Syria: several waves of Palestinian refugees since 1948 (by 2011, more than 560,000 refugees living in Syria). Also, there is a large Iraqi refugee population.

"**Mental health** affects and is affected by many crucial issues pertinent to global development and quality of life, including poverty, food security, trauma, conflict, interpersonal violence, terrorism, gender equality, education, human security, natural disasters, and climate change.

…mental ill health [contributes] significantly to the total global burden of disease. Anxiety and depression for example, respectively affect an estimated 264 million and 322 million people and contribute to an estimated 3.4% and 7.5% of all years lived with disability. Depression is the single largest contributor to global disability. (WHO, 2017a)" [note: estimates vary]

O'Donnell and Eaton, 2017
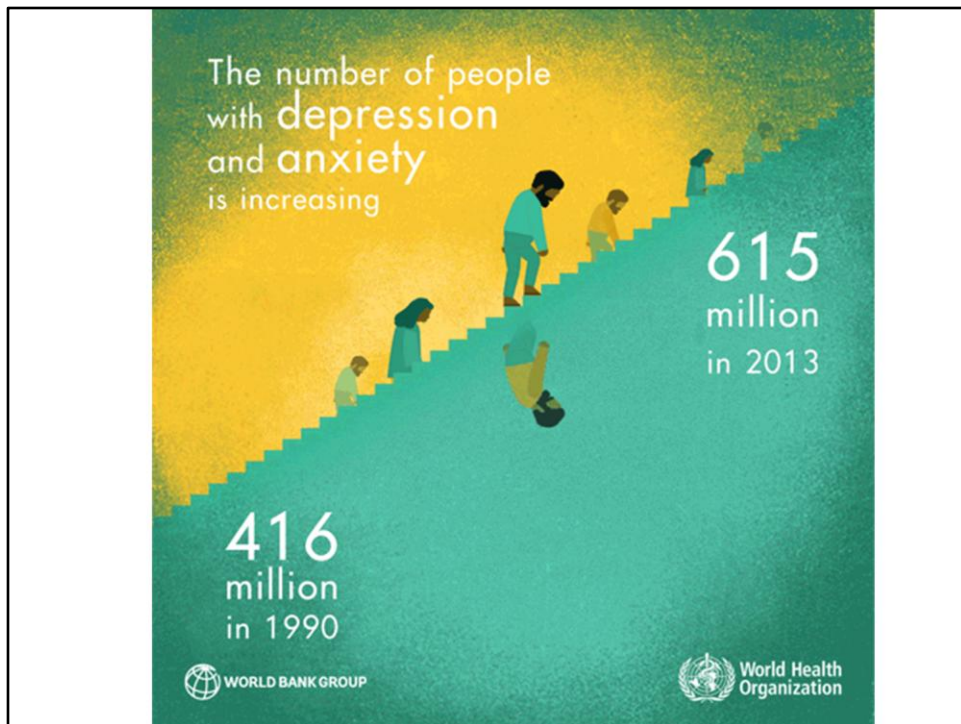
Note: estimates and definitions of anxiety and depression vary—over time, cultures, and ways of assessment.
Source: WHO Campaign (launched Oct 2016) for **World Health Day 2017-Depression**—**"Let's Talk"**

- "Despite the fact that there are hundreds of millions of people experiencing a mental, neurological, or substance use condition, the attention paid to these conditions has been scant historically. Even in high income countries only 35-50% of the people with severe mental disorders receive treatment, and in low income countries the vast majority, typically 76-85%, receive little or no effective care (WHO, 2013, p. 8). In sub-Saharan Africa, governments spend only around 1% of their health budgets on mental health, a number that is very similar to the proportion of international development assistance for health dedicated to mental health (Gilbert, Patel, Farmer, and Lu, 2015)

- **Further, the extreme neglect, human rights abuse, and social exclusion of people with mental illness means that they could be seen as the epitome of people who are "left behind."**

- In addition, "people with these disorders are often subjected to social isolation, poor quality of life and increased mortality. These disorders are the cause of staggering economic and social costs." (WHO Department of Mental Health, *The Bare Facts*)."

O'Donnell and Eaton, 2017

Global Mental Health

"Mental Health *as* Mission" (mhM)

"GMH is an international, interdisciplinary, culturally-relevant, and multi-sectoral domain which promotes human **well being**, the right to health, and equity in health ***for all***. It encourages healthy behaviors and lifestyles; is committed to preventing and treating mental, neurological, and substance use conditions (MNS) especially for vulnerable populations (e.g., in settings of poverty, conflict, calamity, and trauma) and in low- and middle-income countries; and seeks to improve policies and programs, professional practices and research, advocacy and awareness, and social and environmental factors that affect health and well being."

Based on our definition in:

Global Mental Health: Sharing and Synthesizing Knowledge for Sustainable Development
Global Mental Health (September 2016)

--GMH shaped by public health, human rights, clinical science, and cultural anthropology.

--It is not simply something that concerns specialists--"psychology-psychiatry, psychotherapy, and psychopharmacology."

--Note: personally, 2009 is the year we began to intentionally connect with the young GMH movement. It would be accurate to say that the initial GMH "movement" was significantly shaped via the launching of: The Lancet's GMH Special Issue (2007),   the formation of the Movement for Global Mental Health (2008), and the mhGAP Program by the World Health Organization (2008). There were plenty of precursors and other influences as well. And the were concerns and detractors from the start about a perceived over emphasis on Western concepts for mental ill health, psychiatry, and pharmacology.

--For a helpful critique of GMH, see Kirmayer and Peterson's introductory article in the special issue on GMH in the Journal of Trans-Cultural Psychiatry (December 2014, this article is open access).

Wellbeing for All
GMH-CMC
Ten Areas of Engagement

*Therefore every scribe who has become a disciple of the kingdom of heaven
is like a head of a household, who brings out of his treasure things new and old.*
Matthew 13:51

--We now review 10 focal points of GMH-CMC engagement along with 10 axioms that reflect each focal point....
--The image is an entrance to the UN Geneva. Just outside of the UN (facing it) is a sculpture commemorating land mine victims.

GMH-CMC Engagement 1
There is a mental health pandemic
A bitter truth is better than a sweet lie.

OUT OF THE SHADOWS:
Making Mental Health a Global Development Priority

WORLD BANK GROUP

World Health Organization

- There is a pandemic of mental ill health—estimates vary, but hundreds of millions--**people**
- 25% lifetime prevalence. 15-25% shorter life spans than general population
- Depression and dementia are major/growing contributors to the global burden of disease.
- Massive social and economic costs of not investing in prevention and care.

Logo from the conference in Washington DC, April 2016.

GMH-CMC Engagement 2
Mental health affects us all
Who is hurting—hiding--helping?
Who **doesn't** know someone with a mental health condition?

Film trailer:
https://www.youtube.com/watch?v=Y8Tbiciyzq0
Film website:
http://hiddenpicturesthemovie.com/

GMH-CMC Engagement 3

There is no health without mental health

WHO Mental Health Action Plan 2013-2020

Vision:

"A world in which mental health is valued, promoted, and protected, mental disorders are prevented and persons affected by these disorders are able to exercise the full range of human rights and to access high-quality, culturally appropriate health and social care in a timely way to promote recovery, all in order to attain the highest possible level of health and participate fully in society and at work free from stigmatization and discrimination."

"[The Mental Health Action Plan] takes a comprehensive and multisectoral approach, through coordinated services from the health and social sectors, with an emphasis on promotion, prevention, treatment, rehabilitation, care and recovery. …The action plan has, at its core, the globally accepted principle that there is "no health without mental health." (Mental Health Action Plan 2013-2020, World Health Organization, WHO, 2013, p. 6)

Four Objectives
Mental Health Action Plan

- Strengthen effective leadership and governance for mental health.
- Provide comprehensive, integrated and responsive mental health and social care services in community-based settings.
- Implement strategies for promotion and prevention in mental health.
- Strengthen information systems, evidence and research for mental health.

Two MH Resources—WHO
Psychological First Aid (2011)
mhGAP Humanitarian Intervention Guide (2015)
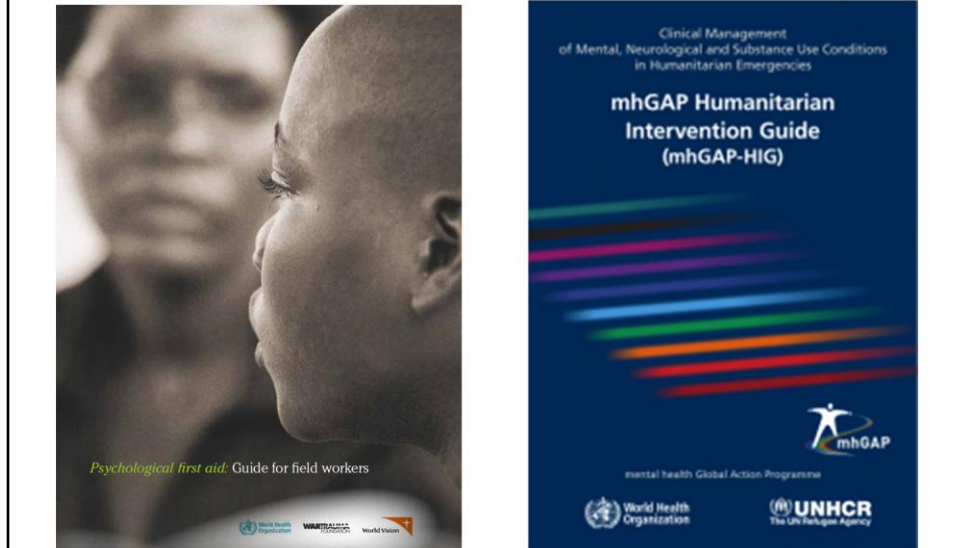
Psychological First Aid: Guide for Field Workers (WHO, World Vision, War Trauma Foundation, 2011) is the most widely used resource for helping front-line workers to provide psychosocial support to people and communities affected by distressing events.

Training manuals for intervention Guides
2.0 General version, portable electronic copy available

GMH-CMC Engagement 4

There is no sustainable development without mental health
Transforming Our World: The 2030 Agenda for Sustainable Development (Sept. 2015)

"Today we are also taking a decision of great historic significance. We resolve to build a better future for all people, including the millions who have been denied the chance to lead decent, dignified and rewarding lives and to achieve their full human potential. We can be the first generation to succeed in ending poverty; just as we may be the last to have a chance of saving the planet…" (paragraph 50)

The five overlapping themes in the SDGs: People-Peace-Prosperity-Planet-Partnership

--How is the CMC connecting and contributing to the SDGs?
--How can the SDGs support the purpose and work of the CMC?
--Will the SDGs morph into the Sustainable *Survival* Goals? See: Global Integration Updates (Member Care Associates) Doomsday? Next Stop, Global Dis-Integration (June 2017) and Faith-Based Partners in Transformation (August 2015)

SDGs

- **Goal 1 End poverty in all its forms everywhere**
- **Goal 2** End hunger, achieve food security and improved nutrition and promote sustainable agriculture

- **Goal 3 Ensure healthy lives and promote well-being for all at all ages**

- **Goal 4** Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all
- **Goal 5** Achieve gender equality and empower all women and girls
- **Goal 6** Ensure availability and sustainable management of water and sanitation for all
- **Goal 7** Ensure access to affordable, reliable, sustainable and modern energy for all
- **Goal 8** Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all
- **Goal 9** Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation
- **Goal 10** Reduce inequality within and among countries
- **Goal 11** Make cities and human settlements inclusive, safe, resilient and sustainable
- **Goal 12** Ensure sustainable consumption and production patterns
- **Goal 13** Take urgent action to combat climate change and its impacts
- **Goal 14** Conserve and sustainably use the oceans, seas and marine resources for sustainable development
- **Goal 15** Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss
- **Goal 16 Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels**

- **Goal 17 Strengthen the means of implementation and revitalize the global partnership for sustainable development**

We are aware that there are different perspectives about the United Nations. It has many strengths and weaknesses, accomplishments and failures. In spite of its shortcomings, we are convinced of its critical importance in our world along with the huge opportunities--and moral responsibilities--that are before us all via the sustainable development Agenda.

We encourage you to carefully review the Agenda, noting especially its core which consists of 17 goals and 169 targets. It is a plan of action that involves five overlapping areas: People, Planet, Prosperity, Peace, and Partnerships.

Sustainable Development Goal 3

"Ensure healthy lives and promote wellbeing for all at all ages."

There are three "Targets" under Goal 3 that have important implications for not just mental health but overall health and sustainable development themselves (the SDGs have 169 Targets):

- By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment **and promote mental health and well-being** (3.4)

- Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol (3.5)

- Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all (3.8).

Note from *CORE Member Care* weblog, 16 December 2015
http://coremembercare.blogspot.com

--We also want to mention the need to address global injustices and global inequities related to the current global governance systems--a central issue which relates to but is not sufficiently addressed by **SDG 10: "Reduce inequality within and between countries."** For example with regards to health, consider this perspective: "Power asymmetry and global social norms limit the range of choice and constrain action on health inequity; these limitations are reinforced by systemic global governance dysfunctions and require vigilance across all policy arenas....Global governance for health must be rooted in commitments to global solidarity and shared responsibility; sustainable and healthy development for all requires a global economic and political system that serves a global community of healthy people on a healthy planet. " (The Lancet-University of Oslo Commission on Global Governance for Health, *The Lancet*, Feb. 2014, p. 5)

Seven key recommendations of the Lancet Commission

--1. Reframe mental health within the Sustainable Development Goal Framework Mental wellbeing is a universal attribute, and we need to think beyond just treating mental illness. Integrate mental health into development work across sectors, not just health services.

--2. Establish mental health care as a pillar of Universal Health Coverage Ensure that there is parity in investment and prioritisation for mental health care, and address gaps in accessibility and quality of services, with care being available at primary level.

--3. Use public policies to protect mental health Promote mental health and prevent illness by implementing targeted public health strategies at key stages in the life course, including in maternal and infant health, education and suicide.

--4. Listen to and engage people with lived experience Facilitate meaningful participation at all stages of development and implementation of services. Strengthen the advocacy voice of people affected to hold governments accountable.

--5. Invest far, far more in mental health Increase dedicated mental health funds to 5-10% of national or agency health budgets, and include mental health in funds for research and implementation in other sectors.

--6. Use research to guide innovation and implementation Invest in research, and make use of new evidence for service reform and improving population wellbeing - from neurosciences to implementation science.

--7. Strengthen monitoring and accountability Follow through on commitments to meet key development targets. Ensure mental health indicators are present in national health information systems and programme evaluation.
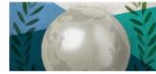
Cape Town Declaration (2011)

Pan African Network of People with Psychosocial Disabilities

- "We recognise that people with psychosocial disabilities have been viewed in bad ways, with derogatory words being used to describe us such as mentally disturbed, having unsound minds, idiots, lunatics, imbeciles and many other hurtful labels We are people first!

- We have potentials, abilities, talents and each of us can make a great contribution to the world. We in the past, presently and in the future, have, do and will continue to make great contributions if barriers are removed....

- For as long as others decide for us, we do not have rights. No one can speak for us. We want to speak for ourselves.

- We want to be embraced with respect and love....

- We wish for a better world in which all people are treated equally, a world where human rights belong to everyone. We invite you to walk beside us. We know where we want to go".

Note: It could be very instructive to see in which areas this Cape Town Declaration October 2011) connects with the Cape Town Commitment (2010) by the Lausanne Movement at its Third Congress (October 2010) as well as the Declaration on Care and Counsel as Mission (2011) which emerged from discussions during this Third Congress.

18

GMH-CMC Engagement 6
Do task shifting and task sharing
(and stop protecting your professional turf)

SUNDAR (beautiful)
Vikram Patel

Simplify message
UNpack treatments (core components)
Deliver where people are
Affordable and available human resources
Reallocation of specialists

See:
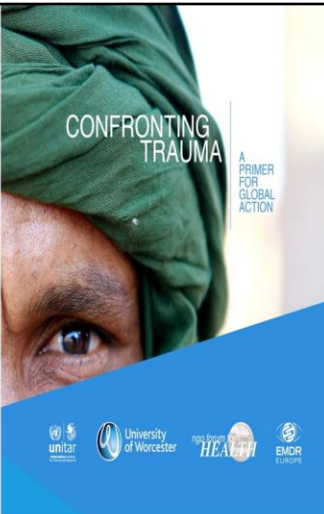-- Mental Health for All and Involving All, TedTalk (September 2012) Vikram Patel

Trauma:
prevention and treatment
multiple sectors

Video:
Living Peace: The Story of Abby and Kyalu
Trauma and treatment in Democratic Republic of Congo, Promundo
(watch the overview here)

GMH work in and from Geneva

GMH-CMC Engagement 7
Scale up GMH
all government--all society—all settings
primary health care—universal health care
'from global-political declarations to community action-impact'

For a overview and critique of GMH (as of 2014) See Kirmayer and Pedersen (October 2014): Toward a New Architecture for GMH, *Transcultural Psychiatry* (https://journals.sagepub.com/doi/abs/10.1177/1363461514557202). Abstract:

"Current efforts in global mental health (GMH) aim to address the inequities in mental health between low-income and high-income countries, as well as vulnerable populations within wealthy nations (e.g., indigenous peoples, refugees, urban poor). The main strategies promoted by the World Health Organization (WHO) and other allies have been focused on developing, implementing, and evaluating evidence-based practices that can be scaled up through task-shifting and other methods to improve access to services or interventions and reduce the global treatment gap for mental disorders. Recent debates on global mental health have raised questions about the goals and consequences of current approaches. Some of these critiques emphasize the difficulties and potential dangers of applying Western categories, concepts, and interventions given the ways that culture shapes illness experience. The concern is that in the urgency to address disparities in global health, interventions that are not locally relevant and culturally consonant will be exported with negative effects including inappropriate diagnoses and interventions, increased stigma, and poor health outcomes. More fundamentally, exclusive attention to mental disorders identified by psychiatric nosologies may shift attention from social structural determinants of health that are among the root causes of global health disparities. This paper addresses these critiques and suggests how the GMH movement can respond through appropriate modes of community-based practice and ongoing research, while continuing to work for greater equity and social justice in access to effective, socially relevant, culturally safe and appropriate mental health care on a global scale."
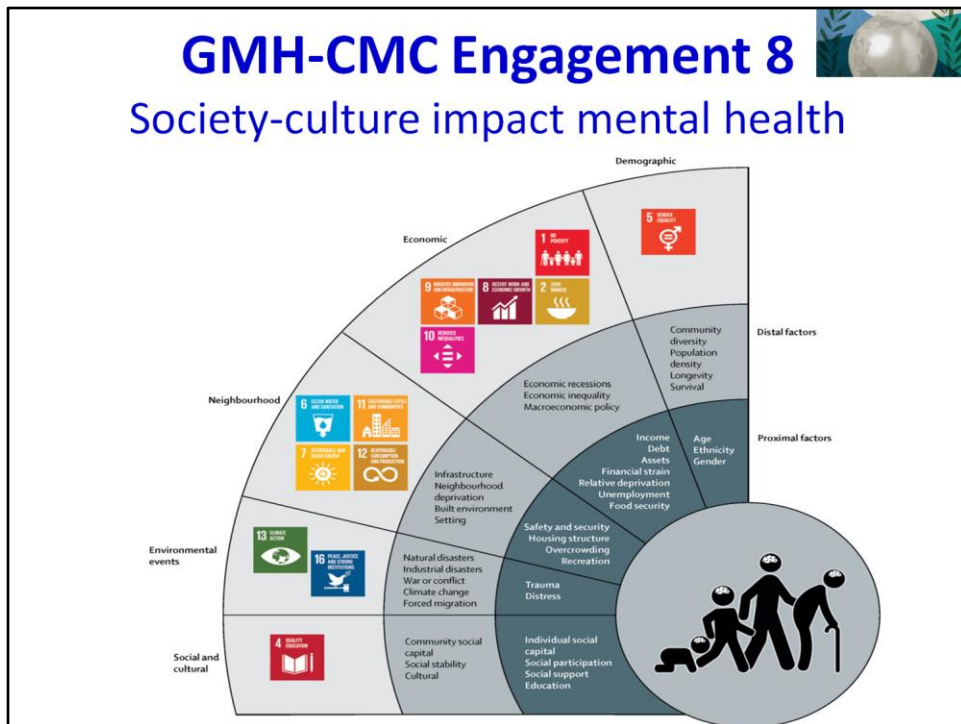
Reference:
[Social determinants of mental disorders and sustainable development goals: A systematic review of reviews](). Lund at al (1 April 2018*) The Lancet*

Social Determinants of Health

"Because mental disorders are so strongly socially determined, the global burden of these disorders is unlikely to be relieved by improved access to mental health treatments alone. In the words of the final report of the WHO Commission on the social determinants of health in 2008: "Why treat people only to send them back to the conditions that made them sick in the first place?"

Social determinants of mental disorders and sustainable development goals: A systematic review of reviews. Lund at al (1 April 2018*) Lancet*

- **Idioms of Distress--** the socio-cultural understanding of mental ill health

- **Diagnostic shifts**—continuum of severity (distress, disability, duration) vs being a "disorder or a disease", and the socio-cultural context for mental ill health

GMH-CMC Engagement 9
Be Global Citizens

Embracing our common identity, belonging, and responsibilities as humans (not global homogeneity)
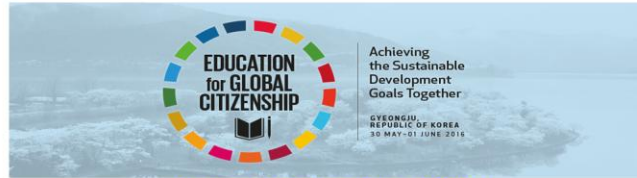
Gyeongju Action Plan (2016)
"Education for Global Citizenship: Achieving the SDGs Together"

"In addition to literacy and numeracy, education must advance the cause of global citizenship which: **promotes integrated development of the whole person emotionally, ethically, intellectually, physically, socially, and spiritually**; imbued with an understanding of our roles, rights and responsibilities for the common good in service to humanity and the advancement of a culture of peace, non-violence, freedom, justice, and equality..."empowers learners to assume active roles to face and resolve global challenges and to become proactive contributors to a more peaceful, tolerant, inclusive, and secure world" [UNESCO 2014]; nurtures a sense of solidarity and empathy in order to end poverty, protect the planet, ensure human rights, and foster prosperous and fulfilling lives for all....We commit to...An education that teaches conflict resolution, a deep appreciation for diversity, ethical reasoning, gender equality, human rights and responsibilities, interdependence, multilingual and multicultural competence, social justice, sustainable development, and values." (pages 1,2) [bold font added for emphasis]

GMH-CMC Engagement 10
Promote Faith-Based Involvement
Mental Health as Mission (mhM)
In the towers and the trenches…and everything in-between

Perspectives:
Faith-Based Involvement
Mental Health as Mission

"In parts of Africa where bandits and warlords shoot or rape anything that moves, you often find that the only groups still operating are Doctors Without Borders and religious aid workers: crazy doctors and crazy Christians. In the town of Rutshuru in war-ravaged Congo, I found starving children, raped widows and shellshocked survivors. And there was a determined Catholic nun from Poland, serenely running a church clinic…and brave souls like her are increasingly representative of religious conservatives. We can disagree sharply with their politics, but to mock them underscores our own ignorance and prejudice."

- **Source:**
  Evangelicals a Liberal Can Love
  Nicholas Kristof, *New York Times* (3 February 2008)

- **See also:**
  Some Myths about Faith-Based Humanitarian Aid
  Wilfred Mlay, *Humanitarian Exchange 27* (July 2004, pp. 48-51)

Perspectives:
Faith-Based People-Organizations

"We believe that a variety of people must be at the "global tables" in order to help shape and influence agendas, policies, and action in the "global trenches." That includes people from all countries, sectors, and faith backgrounds, who are informed and skilled, and dedicated to the common good. "

"Religion and faith, as we know, have a central place for most people in our world—including many "persons and communities of concern," staff, organizations, governments, and donors. Faith-based people are thus often mainstream contributors and partners--and not marginal players-- when it comes to the efforts to transform the world. The emphasis on **personal** transformation (including virtue and moral integrity) is often an important added contribution from the faith-based sector."

Note: faith is often the _core_ part of one's life/identity and not simply a _component_ of one's life/identity.

See:
-- Faith-Based Partners in Transformation, *Global Integration Update* (August 2015)
--Partnerships Engagement for the Sustainable Development Goals

On 4 June 2015, PHAP hosted a special online consultation event on "***Faith and religion in humanitarian action: Improving cooperation and effectiveness***" in support of the World Humanitarian Summit. [Dr. Alistair Ager, https://phap.org/civicrm/event/info?id=292 at phap.org]
See also summary publication (phap.org):
Faith and religion in humanitarian action
Summary report of the online consultation event organized on 4 June 2015 by PHAP

***A Faith-Sensitive Approach in Humanitarian Response: Guidance on Mental Health and Psychosocial Programming* (2018, LWF and IRW)** excerpt from **Forward:**

"We hope [this resource] will be a useful tool across all sectors of humanitarian response. Psychosocial support is a logical entry point for looking at faith identity, but precisely because it takes an inter-sectoral approach, it enables this tool to provide insights on how to take faith identity seriously across all sectors.

Faith finds common ground with human rights in a people-centred approach which affirms the dignity of each and every person. It is our hope that this guidance will, in a modest way, help that to become more of a reality."

Wellbeing for All
Global Integration

A <u>framework</u>
for actively and responsibly engaging in our world
—locally through globally--for God's glory:

--by connecting relationally and contributing relevantly
--on behalf of human wellbeing and the issues facing humanity,
--in light of our integrity, commitments, and core values
(e.g., ethical, humanitarian, human rights, faith-based).

See: **Global Integration: Staying Current and Relevant**
(see the excerpts below this slide with some of our concerns and convictions)

Global Integration: Staying Current and Relevant (Nov 2018)
Here are two of the eight points:

"3. Global Integration recognizes that our globalizing world community must prioritize wellbeing for all people, lasting peace, justice, prosperity, and the enduring protection of the planet. As Christians, our global involvement includes the central mandate (duty—desire–delight) to share the good news and our good works with all people and all people groups. Further, we see the foundation that underlies GI's emphasis on "common ground for the common good" as being the historical person of Jesus Christ. We thus also acknowledge the underlying reality of God and His redemptive purposes in Jesus Christ in dealing with the undermining reality of evil and human sin (see Faith-Based Foundations—Christian Worldview, 2015)."

"5. Global integration is not about instigating and imposing a system of global governance, neutralizing national sovereignty, and ushering in an authoritarian world order. Rather it is about fostering cooperation and good governance at all levels, from the local to the global. Nor is global integration about pushing for human homogeneity, cultural conformity, or ethical relativism. Rather it is about embracing our common humanity, prizing our rich variations, and engendering responsible lifestyles. Global integration is a framework to help us invest ourselves in fellow humans in every sphere of influence in which we live."

Seven Directional Commitments
Engaging our World as *Global Integrators*

Well-Being for All: Mental Health Professionals and the SDGs
(*Journal of Psychology and Christianity*, Spring 2017)

Commitment 1. We commit to diligently pursue our own journeys of personal and professional growth—to grow deeply as we go broadly.

Commitment 2. We commit to integrate the inseparable areas of our character (resilient virtue) and competency (relevant skills) with compassion (resonant love).

Commitment 3. We commit to go into new areas of learning and work: crossing sectors, cultures, disciplines, and comfort zones.

Commitment 4. We commit to embrace our duty to work in difficult settings, including those permeated by conflict, calamity, corruption, and poverty as those in great need are often in places of great risk.

Commitment 5. We commit to have clear ethical commitments and standards that guide our work, respecting the dignity and worth of all people.

Commitment 6. We commit to working with others to promote wellbeing and sustainable development, building the future we want--being the people we need.

Commitment 7. We commit to base our work on the practice of fervently loving other people—agape. This type of love is the foundational motive and the ultimate measure of our GI work.

Matthew 13: 51-52

"Have you understood all these things?" They said to Him, "Yes."And Jesus said to them, "Therefore every scribe who has become a disciple of the kingdom of heaven is like a head of a household, who brings out of his treasure things new and old."

Wellbeing for All
Global Mental Health and the Church-Mission Community
A new paradigm to guide and goad us
"We are His workmanship, created in Christ Jesus for good works, which God ordained beforehand so that we would walk in them."
Ephesians 2:10

Kelly and Michele O'Donnell, Member Care Associates, Inc.
mcaresources@gmail.com   www.membercareassociates.org

 --Dr. Michèle Lewis O'Donnell and **Dr. Kelly O'Donnell** are consulting psychologists based in Geneva. Respectively they are the COO and CEO of Member Care Associates, Inc (MCA), an NGO focusing on the wellbeing and effectiveness of staff and their organizations. Their multi-sectoral emphases for consultation, training, and writing include: personnel development, Global Mental Health, and integrity/anti-corruption. Kelly and Michèle are International Affiliates of the American Psychological Association and Representatives of the World Federation for Mental Health to the United Nations. Their publications include over 70 articles and five books in the member care and mental health fields (see recent publications) as well as ongoing *Member Care Updates* and *Global Integration Updates* (archived on the MCA website). They did their doctoral training in clinical psychology and theology at Rosemead School of Psychology, Biola University, USA and have two wonderful adult daughters, Erin and Ashling, raised in five countries. MCAresources@gmail.com

--Purpose: This webinar focuses on Global Mental Health (GMH) and its relevance for the Church-Mission Community (CMC)—and vice versa. Foundational for our discussion is exploring how *"we are His workmanship, created in Christ Jesus for good works, which God ordained beforehand so that we would walk in them"* (Ephesians 2:10). We also want to note that the context for this verse is not simply our doing good works, but rather humanity's and all of our utter need for God's grace via the historic person of Jesus Christ in light of our being dead in our sins and the world being under the power of the Evil One ("the prince of the power of the air").

--May God's grace guide and equip you as you earnestly seek to walk in the good works of Jesus Christ. "Grace be with all those who love our Lord Jesus Christ with incorruptible love" (Ephesians 6:24).

Kelly and Michèle