

Guide for a Clergy Leave of Absence for Mental Health Reasons

Sustainable patterns of work and rest are essential in ministry and are most helpful when openly and regularly discussed between pastor and council. The ideal relationship between a pastor and council is framed by a spirit of hospitality towards each other. A pastor intends to use God's gifts so that a congregation may flourish, and a Council intends to provide a context within which a pastor may flourish. When each seeks the well-being of the other, a framework for conversations which are gracious, candid and ongoing is in place. This can produce a pattern of mutuality in which concern for one another's well-being is a visible expression of being a Christian community. It can also encourage addressing concerns before they spiral into crisis.

Success and longevity in ministry do not safeguard a pastor from burnout, clinical depression or other forms of mental illness. Compassion fatigue, significant losses of many kinds (both personal and congregational), stress in ministry or other life stressors can create the need for a leave of absence for reasons of mental health. Mental illness is a real illness from which people can recover. (See Suggested Resources for definitions of mental health and mental illness.)

When the pastor experiences significant stress or a crisis in mental health that impacts his/her participation in ministry, it may be necessary to consider a leave of absence. This brief guide is meant to help pastors and church councils in navigating a path of healing and health.

For the pastor:

1. If you think you need help, be evaluated by a health professional and follow treatment. If a leave of absence is necessary, seek a written recommendation from a health care professional.
2. Connect with your Regional Pastor as a support and as an advocate alongside you in your conversations with your church council.
3. Present to your church council a written recommendation for a leave of absence. Remember you are in control of what you share with others. Be specific with a few, more general with a larger group—whatever feels appropriate for your situation. You might consider inviting your advocate to be present as well.
4. Seek professional help in processing and reflecting on your situation so that you can gain insight and make healing and healthy changes. Be patient with yourself. Healing takes time.
5. Be relieved of pastoral responsibilities for a time per the advice of a health care professional and with agreement from the church council. With the professional, create a timeline for when you return to work or the pace at which you return to your responsibilities. Review the timeline monthly/bimonthly with the possibility of revising on an as needed basis based on assessment with the professional. involve your advocate in this process.
6. Be proactive about the kind of support you need. Make certain the support suits you and your family's needs. Be open to assistance in identifying your needs. Identify caring and supportive people you trust.
7. Silence about a mental health situation fosters stigma and gossip. Appropriate transparency communicates trust, invites compassion, and signals to the congregation that their own mental health concerns may be addressed in the faith community.

For the Council:

1. Be proactive. If you notice signs of depression or signs of stress in your pastor, approach him or her in a supportive and caring manner.
2. Take the advice and recommendation of a professional seriously. A Leave of Absence may be necessary to facilitate healing apart from the stress of ministry. Trust the pastor's request for what he or she needs to regain stability.
3. The Regional Pastor will be an important resource to assist in the conversations between council and the pastor. Decide on a plan of communication between council and the pastor.
4. Council is responsible for approving the Leave of Absence (per C.O. art. 16). Contact the Pension Office so appropriate arrangements can be made.
5. Current information about the relevant health care insurance plan policies will be needed in order to ensure that appropriate remuneration can be in place, and relevant protocols observed.
6. Be flexible with the timeline for returning to responsibilities and follow the written recommendations of the health care professional. Healing and recovery may not occur in a definite timeline. Returning too soon may hinder healing and recovery, delay a full return, or lead to a relapse. Follow the health professional's recommendation back to work plan.
7. Pastoral care is important. Let the pastor and family guide you as to what they need. The need for emotional space varies and must be respected. It may be tempting to prescribe what should be done and when, but the details for an arrangement need to be worked out with the pastor and the pastor's health care providers.
8. Communicate with the congregation in language that is approved by the pastor. Communicate to the congregation ways they can be supportive. Include ways that are suggested and agreeable to the pastor and family. For congregational understanding and awareness, enlist the help of the Regional Pastor or a mental health professional as needed.
9. Maintain confidentiality to ensure safety and trust.
10. In the case of a lengthy leave of absence, consider approaching Classis for assistance in filling your pulpit.

This guide does not address all the needs that arise including congregational education and aftercare for the pastor following the leave. Please see Suggested Resources for additional ideas.

Suggested Resources for Clergy Mental Health Care

Definition of mental health: a state of well being. Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. Source: http://www.who.int/features/factfiles/mental_health/en/

Definition of mental illness: A mental illness is a condition that impacts a person's thinking, feeling or mood and may affect his or her ability to relate to others and function on a daily basis. Each person will have different experiences, even people with the same diagnosis. Recovery, including meaningful roles in social life, school and work, is possible, especially when you start treatment early and play a strong role in your own recovery process. Source: <https://www.nami.org/Learn-More/Mental-Health-Conditions>

Webinar: [A Conversation about Mental Health and Ministry](#) In this webinar, Brett Ullman shares his story and gives insight into where his help came from and how churches and leaders can provide support for those affected by mental health issues.

Article: [The Cost of Not Caring for Your Pastor](#). Provides helpful suggestions for ways congregation and care for the pastor in the overall ministry.

Simpson, Amy. *Troubled Minds* (IVP Books, 2013). Drawing on surveys, clinical research, and her family's personal experience with mental illness, Simpson offers suggestions on how the church can be the body of Christ when persons and families are walking the path of mental illness. Her father was a pastor and her mother experienced schizophrenia.

Albers, Meller, and Thurber, eds., *Ministry with Persons with Mental Illness and Their Families* (Fortress Press, 2012). Eighteen psychiatrists and pastoral theologians come together in an interdisciplinary, collaborative effort to ensure accuracy of information concerning the medical dimensions of mental illness, interpret these illnesses from a faith perspective, and make suggestions relative to effective ministry.

Van Essen, Larry. *This Poison Called Depression* (InspiringVoices, 2013). In this frank, informative, and inspirational personal story, Larry Van Essen tells about the major depression that he experienced as both a teenage caregiver of his mother and his own encounters with major depression as a pastor.

Gregg Schroeder, Susan. *In the Shadow of God's Wings: Grace in the Midst of Depression* (Upper Room Books, 2008). Taking readers on her own personal journey into depression, she describes what happened to her while she served as a church pastor.

Hart, Archibald. *Coping with Depression in the Ministry and Other Helping Professions* (Word Books, 1984).

Brochure: Clergy Self-Care: How Clergy and Congregations Can Prevent Burnout and Support Healthy Living. Available from [Mental Health Ministries](#).

Website: Pine Rest Christian Mental Health Services – pinerest.org. Under the tab, "Mental Health Info," find a comprehensive list of topics, such as anger, depression, grief. This accessible web site includes articles, videos, blogs, as well as the Pine Rest *Insight Magazine*.