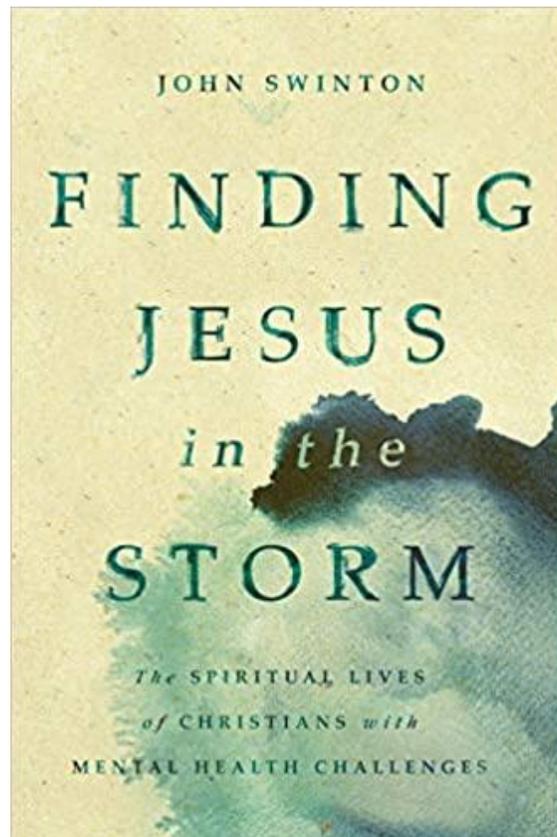




Disability Concerns Book Club  
Finding Jesus in the Storm:  
The spiritual lives of Christians with mental health challenges

By John Swinton

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William B Eerdmans Publishing Company

Grand Rapids, Michigan, 2020



*Finding Jesus in the Storm* is a call for the church to be an epicenter of compassion for those experiencing depression, schizophrenia, bipolar disorder, and related difficulties. That means breaking free of the assumptions that often accompany these diagnoses, allowing for the possibility that people living within unconventional states of mental health might experience God in unique ways that are real and perhaps even revelatory. In each chapter, Swinton gives voice to those experiencing the mental health challenges in question, so readers can see firsthand what God’s healing looks like in a variety of circumstances. The result is a book about people instead of symptoms, description instead of diagnosis, and life giving hope for everyone in the midst of the storm.

(Review from [Eerdmans Publishers](#))

### Schedule of Book Club

Week	Date	Focus	
<b>Week 1</b>	February 2	The Art of Description	Intro and Chapter 1
<b>Week 2</b>	February 9	Redescribing Diagnosis	Chapters 2 and 3
<b>Week 3</b>	February 16	Redescribing Depression	Chapters 4 and 5
<b>Week 4</b>	February 23	Hearing Voices	Chapters 6, 7, and 8
<b>Week 5</b>	March 2	Redescribing Bipolar Disorder	Chapters 9 and 10
<b>Week 6</b>	March 9	Conclusion, Forward action	Conclusion



## **A note about using this book club resource**

We are so happy that this resource is being used by your book club! As the Disability Concerns ministry of the CRC/RCA, we hope that you have rich, “thick” conversations about this book. We would love to hear from you if you used this resource.

When developing this resource, the hope is that this book club will include people who are living with a diagnosis and people who are not. By sitting together, delving into this book and participating in discussions, the goal would be to expand our community of support. Active listening, giving space for all voices, being quick to listen and slow to speak will help build trust and common ground to move forward towards better understanding of one another.

*Please take a few minutes to offer comments/feedback here:*

[\*Finding Jesus in the Storm: Feedback Form\*](#)



## **Group Guidelines**

**Showing respect for one another is important. The conversations that will arise through this book club can be very personal and painful.**

1. Confidentiality and respect of every group member is vital.
2. Every member in the group is important. We will give space for everyone to share. We will demonstrate our compassion and support by active listening.
3. Every group member can choose to what degree they would like to participate. We realize part of the journey can be a silent listener. When you are ready to speak, we are ready to listen.
4. We are here to support one another on this journey.
5. All discussions held in this group will remain in the group.

**Please consider reading these guidelines with your group every time a new member joins.**



## Week 1 - Intro and Chapter 1

### Introduction

#### 1. Thick Descriptions

John Swinton notes that: “The purpose of this book is to provide readers with rich, deep, and *thick description* of the spiritual experiences of Christians living with mental health challenges. (Introduction, p.3)

**Our society can often minimize the experiences of people living with mental health challenges and overlook the important place all people have in our faith communities as a result. What do you hope to gain as we give space in this study for exploring the thick descriptions we often give little time for?**

#### 2. Mental Health as a Journey

Anchored in Swinton’s writing is the importance of hope. While there is a great deal of conversation about uncertainty, darkness and loneliness in the chapters, he notes: “The key thing about a journey is that we are always heading towards somewhere or something, not nowhere or nothing...Thinking of mental health challenges as a journey reminds us to hold on to the kind of destination we might want to reach”. (p. 5)



**Where are you on this journey? What support do you hope to gain as we travel beside one another for a short time on our individual journeys?**

### **3. Life in all its fullness:**

Life in all its fullness is life with God - a God who accompanies us on a complex journey within which we live in a startling light of the resurrection but remain intensely aware that Jesus's cry from the cross, "My God, my God, why have you forsaken me?" still resonates throughout creation."

(Introduction, p.3)

**After contemplating this thought, what are your own feelings on this? How do you move forward in your faith when God feels very separate from you?**

## **Chapter 1 - Redescribing the World of "Mental Illness"**

### **1. The need for description:**

"Without a description there can be no intentional action. There is thus a dynamic interaction between describing something and the impact the description has on our responses to the things described." (p.13)

(ponder the Thin descriptions Swinton challenges - pg. 14/15 - stigma, DSM, biology (conversations continue pp. 16-37)



**What challenges have you seen or what challenges have you encountered in these areas?**

## **2.Ontology vs. Epistemology**

“Descriptions may not have ontological impact, but they do have epistemological power - meaning they shape and form the ways in which we come to know and respond to things in the world (p. 13) Diagnosis have an epistemology but no ontology. They are pencil sketches of human experiences that are frequently being erased and altered. (p.25)

**Think about times in your life when the experience of being erased and altered is an apt description. What did this feel like? What was your experience in coming to terms with this action?**

*(see appendix for further description of ontology and epistemology)*

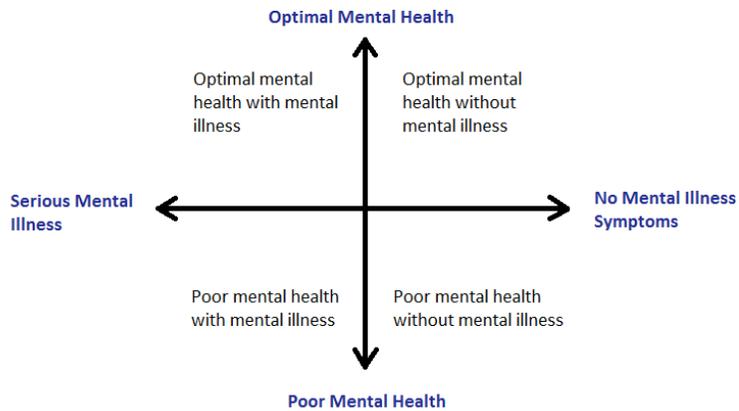
### ***Final note on this section:***

*Thoughts and ideas expressed in the introduction and first chapter are woven throughout the rest of the book. Definitions noted in these first 2 sections are provided at the end of this guide as a resource to return to as you move forward in this book club discussion.*



## A helpful diagram to understand the continuum of mental health

[\*\(This resource can be found on the City of Toronto Website under Mental Health in our workplace - quick facts\)\*](#)



## Notes

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## Week 2 - Chapter 2 & 3

### Chapter 2 - Resurrecting Phenomenology

#### 1. Faith and Mental health

**What has been your experience in faith circles with people's response to the conversation around mental health?**

Swinton discusses the importance of using a phenomenological (*see appendix for definition*) approach. "To negotiate the territory effectively, we need a guide who is not functioning at a high level but is walking with us on the ground, noticing firsthand the entails, the bumps, curves, turns, and hedges, that make the journey of mental health interesting, difficult, and complex.... We can more adequately capture the fullness of people's mental health experiences as they are lived out within the lives of real, meaning-seeking humans." (p. 41)

**Why do you think this is important and do you feel we as a faith community are doing an adequate job in this area?**

### Chapter 3 - Taking our Meds Faithfully

#### 1. Reflecting on the experiences of receiving a diagnosis

Swinton introduced 2 people's perspectives: Brian vs. Mary:

"Brian's diagnosis of bipolar disorder helps him make sense of experiences that sometimes feel quite random. Randomness leads to anxiety and fear."  
(p.56)



Mary states: "Sure it makes you feel better and it reduces my anxiety because I can blame everything on this label... but it does mean you are kind of stunted and you can't kind of grow." (p.57)

**Take time to explore both sides of the conversation with others.**

- **How could you support someone walking through this stage,**
- **What support would you want from others if this is your journey?**

## **2. People's Response to Diagnosis**

Consider the story of Allen who has been given the diagnosis of schizophrenia. (pp.57-60)

Swinton notes: "The shift in the woman's attitude from friendliness to fear is indicative of spoken and unspoken connotations that accompany the name 'schizophrenia'.... There is tremendous power in looking beyond diagnoses and simply recognizing someone for who he or she is.

**How can we, as people within a faith community, find ways to support an individual who has been given a medical diagnosis to connect to their God-given value and worth?**

## **3. Medication from a Spiritual Perspective**

The story of Monica discusses her challenge in committing to a take medication, feeling this would make her a "chronic mental health patient." Her friend offers this thought as she struggles with the decision: "If you really



believe God is in everything, if you really believe that, then you have to know that God is in the medicine too.” (p. 65)

**Do you believe, as Swinton notes that “ medication and faith do not belong to two different realms and that God can work through the medicine?”**

### **Final thoughts:**

*Swinton challenges us with the concept of lazy theodicy. Lazy theology is “choosing to point the finger of “evil” at some of the most vulnerable people in our society rather than taking the time to work through the complexities of living with a mental health challenge.” (p.67).*

- ***Have you noticed lazy theodicy within your community?***
- ***What are some practical steps you can do within your church community to eliminate lazy theodicy?***

### **Notes**

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## Week 3 - Chapter 4 & 5

### Chapter 4 - Lament and Joy

#### 1. A discussion on Joy

Swinton notes that our Western culture is often on a quest for happiness. However, in our Christian faith walk, we recognize joy as a spiritual gift vs. happiness. On page 80 there is an excellent conversation on joy that your group can read together. (What Exactly is Joy? 1st and 2nd paragraph). To sum up the paragraph: "Joy is an act of resistance against all the forces of despair." He goes on to note that "Jesus is our joy and inhabits our suffering in hopeful ways."

**The reality is that people living with depression will find they are losing joy and hope. Allow space to reflect on this as a community. Sit with the thought of losing joy, losing the presence of Jesus in your life.**

- **As someone journeying alongside someone living with depression, what forms of support can be offered?**
- **As someone living with depression, what forms of support would you want to receive?**

### Chapter 5 - Finding God in the Darkness

#### 1. Authenticity in our Churches

Swinton presents a communal perspective of a well-known Bible story - Mark 12: 1-12, the man who is paralyzed lowered down from the roof to see Jesus.



The focus for Swinton rests on the friends who help the man. If someone has lost their hope, their ability to connect to God, Swinton suggests that “worship holds open the possibility of God... holding it open for others is the task of Christian friendship. Previous to this discussion on Mark 12 (p.89), Swinton discusses the need for lament in service. He challenges the charismatic church, encouraging a deeper level of authenticity to be developed, one that includes lament. (pp. 85-87)

- **What has been your own personal experience in church?**
- **Do you feel the church perpetuates this idea of un-authentic worship?**
- **Could you relate to moments in church where you were faking happiness, as that was the expectation of the service?**
- **Have you noticed this or felt that this might be happening for other church members?**

**Take time to offer ideas for services that could be more inclusive, more authentic.**

*(Note: there are examples of verses of lament later in the chapter for reference)*

## **2. The presence and absence of God**

**Have one person read Psalm 139:7-12 (p.111)**

**Have another person read Psalm 13:1-3 (p. 111)**



More than likely we can all relate to times when we have felt both of these Psalms playing out within our own lives. Swinton talks about this as the creative tension that is God, the reality that we have to trust him even in the darkness when we cannot feel him or hear him. For many people, there are times of great darkness depending on life situations. For someone living with depression, the reality of the absence of God can be very long-lasting and exhausting. As Swinton notes, “some aspects of depression are deeply spiritual. (p. 111)

- **What do you think Swinton means when he says “living faithfully means learning to live well with unanswered questions.**
- **What does this mean specifically for you?**
- **How do we find hope in the darkness?**

## Final Thoughts

*Consider writing your own lament (and perhaps sharing it with the group.)*

## Notes

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***Before jumping into this section, did anyone have the opportunity to write a lament that they would like to share with the group?***

## **Week 4 - Chapters 6, 7, and 8**

### **Chapter 7**

#### **1. How schizophrenia and faith coexist**

Chapter 6 introduces us to the spectrum that is schizophrenia, noting the many variables that occur within this diagnosis (see p. 125-6). However, hearing voices is noted as fairly common amongst people with this diagnosis.

- **How did you understand how people's faith supported them when they were hearing voices?**
- **How did you feel it challenged people's faith?**
- **Swinton notes "remember that theology is a human creation with the primary goal of helping people to love God and glorify God forever"(p.132). As the body of Christ, what is our role in supporting our friends with schizophrenia in their faith? Or As someone living with schizophrenia, what can someone in your faith community do to support your faith walk?**

#### **2. Cultural Injustice**

As we expand our capacity to embrace other cultures and identities within our faith communities, we are broadening our understanding of other cultural perspectives related to mental health diagnosis. In this chapter,



Swinton offers a number of different cultural perspectives on hearing voices. Clearly, Western society represents a very negative outlook on diagnosis that other countries do not. Swinton presents Miranda Fricker's idea of *Testimonial injustice*: Testimonial injustice occurs when an individual's statements and interpretations are given significantly reduced levels of credibility because of the listeners prejudice toward the social group to which the speaker belongs" (p.146).

- **How have you seen this realized within your own faith community?**
- **If you have an example of an experience related to how the mental health of an individual has been supported in a different ethnic background than Northern European, would you feel comfortable sharing this with the group?**
- **What other injustices can you name for people living with schizophrenia and what steps could you take to change this?**

### **3. Loneliness**

We read the painful statement from Alice on her spiritual journey: Alice discusses the voices she heard - that of an imaginary friend she named Anne and the strong undercurrent of God, one who was supporting her throughout her life. When she no longer hears the voice of Anne, how do we understand the voice of God that she also heard "It's pretty difficult to defend yourself when your testimony is so profoundly spiritually discredited" (p.154) Take a moment to reflect and lament this statement. Alice reminds us



of our ability to quickly judge and dismiss without taking steps to value and understand individuals. Her story underlines the significant loneliness felt not only in losing the voice she held dear, but also in a lack of a faith community to support her.

**Swinton challenges us with the notion of creation care and how our primary responsibility as children of God is to care for the earth and its people. (Genesis 2:15)**

- **What does this mean for you?**
- **How do we show love in a practical way? How would you want to receive love from fellow believers? What would this look like?**

### **Final thoughts**

*Swinton is naming some very clear areas of dissonance within our church body. Take time to share with the group how this is challenging your own personal theology.*

### **Notes:**

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## Week 5 - Chapter 9 & 10

### Chapter 9 - Bipolar Faith

#### 1. *Spirituality within a bipolar experience*

Swinton introduces us to Jackson, a person who shares his experience of living with bipolar and the challenges that are presented in regards to his spiritual journey. He notes " I still suffer from having my spiritual beliefs follow my moods... It's difficult to hold on to God in the midst of that sometimes. (p. 168)

- **Think about your own faith journey - how do you relate to this statement?**
- **How do we recognize this very real challenge that Jackson identifies as we support others in our community in their walk with God?**

### Chapter 10 - Bipolar Disorder and the Nature of Suffering

#### 1. *Understanding Epistemic Innocence*

Explore the notion of Epistemic Innocence : Some delusions defuse negative emotions and protect one from low self-esteem by "motivated delusions ...: and help devoid or deal with loss of self-esteem or negative emotions: that is: the unconventional believes that when adopted, deliver a significant epistemic benefit, a benefit unattainable where the delusion is not adopted.

**There is a tension in this conversation. Can we work to understand individuals that live out their relationship with God in the space of what the health care system would consider a delusion? Swinton cites that people living with a delusion with a religious content are often disconnected both from psychiatric care and faith communities. What is our role in this? What are your thoughts on this?**

#### 2. *Epistemic Justice*

We are presented with a different way of supporting someone that many would consider having religious delusions. Foggie suggests entering into a



very “other” relationship - where you shift from your perspective on faith to a posture of listening and entering into the other person’s world to understand their world view. “She urges chaplains (and everyone!) to cross over into the experience of the patient and to listen carefully. Once chaplains are in such a position of innocent listening, they will begin to hear properly. Only when they hear properly can their task as spiritual guides begin.” p. 184

- **Do you recall a time when you either**
  - **Took the time to listen from the other person’s perspective and in so doing were able to make a deeper connection and better help them as a result?**
  - **Were heard by another person who took the time to listen and sit in your perspective for a time before responding?**
- **How do you envision ways in which you could teach others in your faith community about epistemic justice? Are there ways in which this idea could be used in different areas of your church community?**

### ***Final thoughts***

*Swinton journeys through a discussion on demonic forces and how this idea of demons has been unfairly associated specifically to people with mental health challenges. At the root of his conversation is how we, the church, responds to our neighbours - and that it should always be from a stance of love. He notes that life is “complex and messy.” Have you encountered disheartening experiences (either personally or observing another’s experience) of what Swinton terms a “negative spiritual diagnosis”? Consider discussing this with your group.*

### **Notes**





## Week 6 - Concluding thoughts and Forward action

### Conclusion

1. Read the first paragraph on p. 206 in the group starting with: Health is therefore not an idea, a concept...

Swinton continues (p. 208) If the church is to become an antipathogen that understands and responds differently to mental health challenges, we need to be formed differently.

- **How can we, the Christian congregation (p. 207), live this out? Take time to review the seven pillars of healing and offer a sentence of what this looks like for you:**

- **Cultural healing means**

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- **Liturgical healing means**

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- **Biblical healing means**

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- **Theological healing means**

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- **Epistemic healing means**
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- **Testimonial healing means**
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- **Relational healing means**
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### **Forward Action**

#### **Envisioning the church tomorrow (as we are the church!)**

After journeying together for 6 weeks, how can we encourage one another on the individual journeys we are about to embark on? Going around the group, take time to offer words of encouragement/thankfulness for the space they have held, for the insights they have offered. Consider ways to encourage one another on their specific individual journey.

#### ***Final thoughts (from John Swinton, p. 215)***

*“There is a tremendous power and beauty in the suggestion that the church is called to be a specialist in human kindness. Small acts of kindness, tenderness, and thoughtfulness bring healing. **It’s really not that complicated.**”*

#### **Notes**

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## Appendix: Some important terms

### Thick descriptions:

“Rich, deep, and thick descriptions of the spiritual experiences of Christians living with mental health challenges.” (p.2)

### What is Phenomenology?

Basically, phenomenology studies the structure of various types of experience ranging from perception, thought, memory, imagination, emotion, desire, and volition to bodily awareness, embodied action, and social activity, including linguistic activity. The structure of these forms of experience typically involves what Husserl called “intentionality”, that is, the directedness of experience toward things in the world, the property of consciousness that it is a consciousness of or about something. According to classical Husserlian phenomenology, our experience is directed toward—represents or “intends”—things only *through* particular concepts, thoughts, ideas, images, etc. These make up the meaning or content of a given experience, and are distinct from the things they present or mean.

<https://plato.stanford.edu/entries/phenomenology/#WhatPhen>

### What is hermeneutics?

The study of the methodological principles of interpretation (as of the Bible)



## Ontology

is the branch of **philosophy** that studies concepts such as **existence**, **being**, **becoming**, and **reality**. It includes the questions of how entities are grouped into **basic categories** and which of these entities exist on the most fundamental level. Ontology is traditionally listed as a part of the major branch of philosophy known as **metaphysics**.

<https://en.wikipedia.org/wiki/Ontology>

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## Epistemology

Epistemologists study the nature of knowledge, epistemic **justification**, the **rationality** of **belief**, and various related issues. Epistemology is considered one of the four main branches of philosophy, along with **ethics**, **logic**, and **metaphysics**.<sup>[1]</sup>

Debates in epistemology are generally clustered around four core areas:<sup>[2][3][4]</sup>

1. The **philosophical analysis** of the nature of knowledge and the conditions required for a belief to constitute knowledge, such as **truth** and **justification**
2. Potential sources of knowledge and justified belief, such as **perception**, **reason**, **memory**, and **testimony**
3. The structure of a body of knowledge or justified belief, including whether all justified beliefs must be derived from justified **foundational beliefs** or whether justification requires only a **coherent set of beliefs**
4. **Philosophical skepticism**, which questions the possibility of knowledge, and related problems, such as whether skepticism poses a threat to our ordinary knowledge claims and whether it is possible to refute skeptical arguments



In these debates and others, epistemology aims to answer questions such as "What do we know?", "What does it mean to say that we know something?", "What makes justified beliefs justified?", and "How do we know that we know?"

<https://en.wikipedia.org/wiki/Epistemology>

## **Some additional resources to supplement this conversation:**

### ***A conversation with John Swinton:***

[The Sanctuary Mental Health Podcast: In Conversation with John Swinton](#)

### ***On Lament:***

*This is a wonderful toolkit that the RCA developed about lament:*

[Lament Toolkit: Understanding and Practicing Biblical Lament](#)

*In addition, these are some excellent articles on lament that can be found on the CRC [Network](#)*

[Psalm 88: A Psalm for Realists Not Optimists](#)

[A Time to Weep: Voicing Lament Through the Psalms](#)

[Building a Worship Vocabulary of Lament](#)