

An abstract watercolor background featuring large, overlapping washes of color in shades of purple, blue, green, yellow, and orange. The edges of the colors are soft and blended. Two white silhouettes are visible: one of a person's head and shoulders in profile, facing left, positioned in the upper right; and another of a person's head and shoulders in profile, facing right, positioned in the lower left.

# *Called to care*

Thoughts for  
congregations

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This guide is intended for informational purposes only, with the understanding that no one should rely upon this information as the basis for medical decisions. Anyone requiring medical or other health care should consult a health care professional. Any actions based on the information provided are entirely the responsibility of the user and any health care professionals who are involved in such actions.

If you or someone you know is struggling with depression or mental illness and needs assistance, Lifeline can be contacted on 13 11 14. A list of good referral options is provided on pages 19–23.



The Uniting Church in Australia  
**QUEENSLAND SYNOD**



# *Theological introduction*

It has been estimated that around 45 per cent of Australians—almost half of us—will have a mental health disorder at some time in our lives<sup>1</sup>, most commonly depression or anxiety.

Many people who experience such problems will feel a sense of shame or inadequacy, reflecting the stigma so often attached to mental illness.

That's a lot of shame and far too much stigma.

In the face of this great need, Christians are called to act. Our response must be born from generosity, not fear; drawn from the grace we have received through our Lord Jesus Christ, the love of God and the communion of the Holy Spirit. (2 Corinthians 13:13)

The roots of mental disorders lie deep within us, in our genetic inheritance and our early experience. We are all broken people; but we in the church are broken people who are being restored through the good news of Jesus Christ, who has identified with us in every way.

*We can act with grace rather than shame. We can welcome one another as Christ has welcomed us. (see Ephesians 4.32)*

*We are bathed in the love of God, so we can act out of love rather than fear. (1 John 4.18)*

*We are united in the communion created by the Spirit, where there is no stigma and all are equal. (Galatians 3.28)*

The local congregation should be a safe and welcoming place for the healing of wounded people, where they are accepted as they are and find others who will walk with them on their journey. In tandem with other community facilities and mental health professionals, church communities can make a positive difference to those living with mental illness and the families and friends who support them.

## **Rev Dr Paul Walton**

Rev Dr Paul Walton is a Minister of the Word in the Uniting Church in Australia. He originally trained in medicine and spent some years as a psychiatric registrar. A few years ago Paul experienced a moderately severe depressive illness. God brought healing into his life through his loving family, supportive congregation and skilled treatment. Visit Paul's blog at [terce.wordpress.com](http://terce.wordpress.com)

<sup>1</sup> Mental Health Council of Australia, Statistics on Mental Health, Fact Sheet, webpage accessed 19 May 2015, [mhaustralia.org/sites/default/files/imported/component/rsfiles/factsheets/statistics\\_on\\_mental\\_health.pdf](http://mhaustralia.org/sites/default/files/imported/component/rsfiles/factsheets/statistics_on_mental_health.pdf)



# *Understanding mental health*

Mental health encompasses our emotional, psychological and social wellbeing. It affects our feelings, thoughts and actions, and determines how we handle stress, relate to other people and make decisions and choices.

Nearly half of all Australians, inside and outside the Christian community, will experience mental health problems at some stage in their lives,<sup>2</sup> yet the challenges faced by those living with mental illness and their supporters are rarely discussed openly in the church.

## Fast facts

- Mental illness refers to a group of disorders that are longer lasting and cause significant distress and disruption to life; affecting how a person thinks, feels and acts.<sup>3</sup>
- Mental illnesses include depression, bipolar disorder, anxiety and personality disorders.
- Some mental illnesses involve the experience of psychosis (where a person loses touch with reality) and some do not.<sup>4</sup>
- Most people with mental health issues who receive appropriate treatment and support recover well and are able to lead fulfilling lives in the community; however only about half of those affected actually receive treatment.<sup>5</sup>

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<sup>2</sup> Sane Australia, 2014, Mental Illness: Dispelling the Myths, Factsheet 6.

<sup>3</sup> Headspace, 2014, what is mental health?, webpage accessed 13 May 2015, [headspace.org.au/is-it-just-me/find-information/what-is-mental-health](http://headspace.org.au/is-it-just-me/find-information/what-is-mental-health).

<sup>4</sup> Mental Illness Fellowship of Australia, 2008, Frequently asked questions about mental illness, Factsheet.

<sup>5</sup> Sane Australia, 2014, Facts and Figures about mental illness, Factsheet 13.



## Stigma

Mental illness is heavily stigmatised in our culture and often defined by old superstitions. People fear mental illness and marginalise sufferers in a way not done to those affected by other forms of disease. We tend to treat mental illness as a source of entertainment and humour, or the subject of fear and disdain. We forget that mental disorders are illnesses with biological and environmental causes just like many other diseases.<sup>6</sup>

Within the church, we add our own layers of stigma. From the earliest days of Christianity the church helped shape social attitudes and responses towards those who are affected. While much has changed over the centuries, some historical myths and misunderstandings about mental illness persist, contributing to ongoing stigma within the Christian community. These myths include:

- Mental illness is spiritual in nature and reflects a spiritual weakness or lack of faith.
- Mental illness is caused by demonic possession.
- Mental illness is meted out as punishment for sin.
- Mental illness doesn't happen to 'good people like us'.

In the face of this, who would want to speak up if it means being treated like a second-class citizen, or being told that the solution is simply to have more faith and to pray harder?

Many people with mental health issues have had unfortunate experiences of church. As a result, they remain silent or simply stay away.

Churches can play an important role in recovery and support by providing a safe space to talk about mental health, and by nurturing relationships which reflect understanding and acceptance of all.

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<sup>6</sup> Helen Lee, 2013, Overcoming Mental Illness' Stigma in the Church: An Interview with Amy Simpson, Patheos Hosting the Conversation on Faith, webpage accessed 13 May 2015, [patheos.com/blogs/christandpopculture/2013/04/overcoming-mental-illness-stigma-in-the-church-an-interview-with-amy-simpson/](http://patheos.com/blogs/christandpopculture/2013/04/overcoming-mental-illness-stigma-in-the-church-an-interview-with-amy-simpson/)



Congregation in focus:

## *The Gap Uniting Church*

The Gap Uniting Church linked up with A Nouwen Network several years ago when we became aware that problems associated with mental health were impacting on the lives of members of our congregation and local community. Some people were caring for relatives with a serious mental illness, while others were living with depression and grief after the death of a loved one. One family was confronted by the suicide of a young relative.

A Nouwen Network was established to encourage and support people within and across faith communities whose lives are affected by mental health issues. The network nurtures understanding, acceptance and respect through the development of communities within which opportunities for genuine friendship can be established and maintained.

Our local group hosts four lunches each year at a local café. Some people come for a meal, others just for coffee and a chat.

Recognising the need to increase understanding about mental illness and the devastating effects that the diagnosis can have on a person and on their family and friends, we organised an information evening at the church. This included presentations from two general practitioners and a pharmacist about diagnosis and treatment, from a social worker about the anxiety, loss, grief, stigma and social isolation experienced by family members, and the personal journey of a member of the congregation.

We also organised a special morning tea to which we invited those caring for someone with mental health issues.

Planning is in progress to continue and extend these activities in the future.





# How your church can help

“Many factors contribute to recovery, including access to good clinical treatment, a safe home, strong relationships and financial security. Many factors can stop recovery or impede progress, such as discrimination, prejudice, and lack of understanding ... We need to shift our culture to one of understanding, hope and optimism which recognises people’s capabilities and contribution.”<sup>7</sup>

Other factors highlighted by people as helpful include being believed in, and being listened to and feeling understood.<sup>8</sup>

## Value people with mental health issues

Try to see the person first, rather than the illness.

Pay attention to the words you use. Avoid stigmatising language and encourage others to do the same. Use terms like “people with mental illnesses” rather than “the mentally ill”, “crazy”, “psycho”, “mental” and so on.

Remember that people with mental health problems have a great deal to offer by sharing their experiences and by participating in community work, religious groups and religious services.

## Challenge stigma

Talk openly about the mental health needs of the whole community. This develops understanding of the issues and dispels notions of “them and us”. Accepting and welcoming people with mental health issues into the church community sends a powerful message to those who might otherwise react with fear or mistrust.

Organise training or discussion groups to raise awareness and confront myths and stereotypes. Insights from mental health professionals, mental health service users and other agencies can help challenge stigma and discrimination.

Faith leaders can model openness and resilience by encouraging their congregations to cultivate mental, physical, and spiritual well-being and by being open to seeking timely help for themselves if needed.

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<sup>7</sup> UnitingCare Australia, 2013, Comprehensive Mental Health Support for a Decent Life, Position Statement 2013, accessed 13 May 2015, [unitingcare.org.au](http://unitingcare.org.au)

<sup>8</sup> Mental Health Foundation, Recovery, webpage accessed 13 May 2015, [mentalhealth.org.uk/help-information/mental-health-a-z/r/recovery/](http://mentalhealth.org.uk/help-information/mental-health-a-z/r/recovery/)



## Link people with appropriate services

Some people with mental health issues, particularly those from Indigenous or minority ethnic communities, face barriers to accessing mental health services. For some, faith communities may be a first point of contact and can act as a link and referral system to formal mental health services and other community supports.

## Offer friendship

Faith communities are an important source of friendship, belonging and support. Fostering mutual trust and respect is fundamental and will assist in offering informal neighbourly care, openness and genuine friendship to people who may be vulnerable.

## Offer emotional and practical support

The church can act as a sanctuary. Some people with mental health problems find that the church is the one place they can go where they are treated the same as everyone else and accepted for who they are.

The church setting presents opportunities to offer practical and emotional support for people with mental health issues and their families. This might include making pastoral visits, providing respite for families by sitting with people experiencing mental health problems, having information readily available about local support agencies, and facilitating social gatherings.

Churches can contribute to mental wellbeing and help reduce social exclusion through activities such as youth groups, older people's groups and playgroups.

Be alert to the signs of mental distress, but do not attempt to diagnose or treat the problem. Know where and how to guide people towards professional help, self-help groups and other sources of support.





# *Easy ideas for church groups*

## Church council/Property committee

Provide well-located noticeboards or wall-mounted A4 frames specifically for the ongoing display of posters and other information from mental health organisations such as Lifeline, Beyondblue, PANDA (Post & Antenatal Depression Association) and COPMI (Children of Parents with a Mental Illness). This encourages people to seek help, challenges stigma and discrimination, and reduces social exclusion.

## Church office

Display a list of contact details for local mental health supports such as GROW and Arafmi. Keep a copy of this booklet close to the telephone.

## Worship and prayer

Ensure that specific prayers of petition and thanksgiving related to mental health issues are included regularly.

Offer special services on mental health themes or related issues, for example Mental Health Day of Prayer, National White Wreath Day, Missing Persons Week, Blue Knot Day, Mental Health Week, and a Blue Christmas service.

## Outreach

Contact the mental health groups and respite centres within the local community and find out what support would be helpful. What activities might the church community become involved with, or help to establish, such as a community garden, op shop, drop-in centre, regular social barbeque, art and craft group?



## Pastoral care

Offer some educational input on mental health-related topics throughout the year. This can be presented to the pastoral care group or be open to the whole congregation and local community.

Ensure that there is ongoing support for individuals with mental health issues and their families.

Send cards and flowers to those who are unwell as you would for other illnesses. Phone and visit people who are in a psychiatric hospital as well as those who are unwell at home.

Continue to support people who are bereaved by suicide, and those who survive a suicide attempt.

Note that multilingual resources are available e.g. [health.qld.gov.au/metrosouthmentalhealth/qtmhc/multilingual.asp](https://health.qld.gov.au/metrosouthmentalhealth/qtmhc/multilingual.asp)

## Advocacy

Get involved in tackling the systemic problems that entrench disadvantage. More people with mental illnesses are in prison than in psychiatric hospital. Programs for people with mental illnesses tend to be underfunded and axed quickly when budgets need to be cut. Many homeless people have chronic mental illnesses. Housing and jobs are critical to the recovery process. Encourage members of your community to help find jobs and provide housing options for people with mental illnesses.

## Youth

Organise training or discussion groups for young people and their families to raise awareness and dispel myths about mental health issues such as self-harm, schizophrenia and eating disorders. Invite speakers from a local mental health service such as Headspace.

Conduct a fundraiser for Kids Helpline or a similar youth service and/or participate in a fundraising event within the local community.



# Making a difference

## Welcoming, Inclusive, Supportive and Engaged (WISE)<sup>9</sup>

Sometimes people with mental health issues feel cut off from God and excluded from their faith community. It is our Christian calling to communicate that God loves all of us equally, even when we do not feel the love of the Holy Spirit in our lives. People with mental health issues have gifts to be offered, and we want everyone to feel fully welcomed, included, supported and engaged in the life, work and leadership of the church.<sup>10</sup>

Create a **welcoming** environment:

- Offer educational opportunities to help your congregation understand mental health issues.
- Work actively to reduce stigma.
- Examine your own attitudes and preconceived notions.
- Talk about mental health issues and provide a safe environment for people to share their stories.

**Include** people with mental health issues in the life, work and leadership of your congregation:

- Include people with mental health issues and their families in public prayers and talk about mental health during the sermon.
- Conduct a Luke14 Inclusive Church workshop.<sup>11</sup> See page 18.
- Encourage and support people with mental health issues to serve on committees, join groups or activities of the church and to take on leadership roles within the congregation.
- Commit to the Mental Health Day of Prayer on the Sunday following 10 October, World Mental Health Day.

9 Interfaith Network on Mental Illness, 2014, Checklist for Faith Communities, webpage accessed 14 May 2015, [inmi.us/data/Checklist4FaithCommunities.pdf](http://inmi.us/data/Checklist4FaithCommunities.pdf)

10 First Congregational Church of Boulder, Colorado, 2015, A WISE Congregation for Mental Health, webpage accessed 14 May 2015, [firstcong.net/directory/109078/140023](http://firstcong.net/directory/109078/140023)

11 Luke14 is an activity of CBM. Go to [cbm.org.au/content/our-work/luke14#VWVO1xqUc3Q](http://cbm.org.au/content/our-work/luke14#VWVO1xqUc3Q)

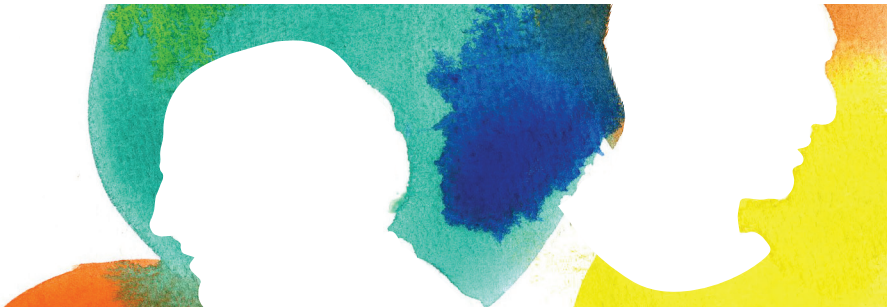


**Support** people in your congregation who have mental health issues and their families:

- Reach out to people experiencing mental illness and their families in the same way you would to those who have physical illnesses: send a carefully chosen card, and offer to bring a meal when someone returns home from hospital.
- Ask church members to offer companionship and compassion to people on the road to recovery. Offer a ride to church or to a local support group. Listen without judgement.
- Start a mental health spiritual support group in your congregation; see A Nouwen Network on page 20 of this booklet.

**Engage** with other organisations:

- Invite groups who deal with mental illness, addictions and trauma to use your facilities at nominal cost or for free.
- Engage in conversations with other organisations and churches about opportunities for shared mission, ministry and advocacy.
- Volunteer at local mental health services.





## *One person's story*

As a patrol minister, I regularly visit with people living on properties and in rural communities. Some of the people I visit suffer from a mental illness although this is seldom immediately obvious and might only be revealed during further contact. When visiting, I try and take an approach that will be appropriate and helpful regardless of people's circumstances. In many respects it's as simple, and yet as profound, as seeking to be a good neighbour as advocated by Jesus. In addition to this, visiting people on their properties and in their homes is equivalent to entering onto holy ground and requires a "shoes off" approach. The person and their property deserve the utmost respect.

Since I usually don't know whether the person I am visiting is experiencing the strain and stresses of rural living, mental illness, or something else, I try and offer them my time and, where appropriate, empathy; and I try to listen more than I speak. This approach is helpful whatever the situation. Choosing not to make judgements about another person's lifestyle choices is particularly important as judgement can stifle responding with grace. When making return visits, or offering assistance to people, I try not to assume that I know what's best for them. Allowing the person to set the agenda means that they are the one in charge which, in some circumstances, may be the only power and control they are able to exercise that day. Over time, I've learnt that I don't always have to fix things, and in many cases, the feedback I receive from people is that less has definitely been more.

If I sense that something is not quite right, I do ask the "Are you okay?" question and am prepared for the time and attention for further listening, especially if the answer is "No." With the exception of very rare occasions, when it appears that a person's safety may be at risk, observing confidentiality builds trust and opens the way for more meaningful help and ministry into the future. Prayerfully debriefing with God as I'm driving away from one property places people and situations into God's hands and prepares me to move on further along the road.

**Rev Graham Slaughter**  
Leichhardt Patrol  
Presbytery of the Downs

# *Conversations about mental health*

Conversations about mental health, whether public or private, can be difficult—especially in a religious context. As in all listening, it is important to treat people with respect, to establish trust, to be calm and responsive, and to recognise that others may not want to talk. Remember that touch is not necessarily reassuring, even when it is intended to be so.

Most importantly, any disclosures about suicidal feelings must be taken seriously; see pages 19–23 for referral services.

## Helpful hints

- Take time to talk with a person who has let you know they are living with mental health issues. Listening itself can be healing.
- Remember to ask the person how they are: “Are you OK?” is an acceptable question.
- Remember that up to 70 per cent of communication is non-verbal, so talk calmly, keep an open posture, respect personal space and be sensitive as to whether eye contact is helpful or not.
- Always respect confidentiality and don’t share conversations or even the fact that the person has mental health issues unless they have given permission to do so.
- Remember to share about God’s unconditional love for them as well as your own care and concern.
- Offer (but don’t insist) to pray with the person. Remember to pray for them at other times, but never suggest that the person themselves pray harder.
- Treat people with mental illness and their families with compassion, not condescension. Most don’t want pity, just understanding and support.
- Remember that medication is commonly and helpfully used to control mental health symptoms. Someone with depression using antidepressants is no different to someone with diabetes using insulin.
- Encourage the person to sleep well, eat well and exercise if they can.



- Ask what you can do to help, and offer practical support where appropriate.
- Be clear about your own boundaries, and about what you are prepared to do and what you are not prepared to do.
- Look after yourself and seek support if you need it.
- Educate yourself about mental health issues and learn to identify individuals who need more than spiritual counselling, and refer them to appropriate mental health professionals.
- If you suspect a person is at risk of suicide or self-harm, encourage them to seek help immediately. Lifeline can be contacted on 13 11 14 and there is a list of good referral options on pages 19–23.

## What should I do?

- If you know that someone has experienced mental health difficulties in the past, you might talk with them about what action they would like to be taken when and if problems occur again; for example, contacting a family member or close friend, encouraging them to take their medication, or accompanying them to see their doctor.
- If someone is distressed, ask them how you can help and what they would find useful; for example, someone to talk to, time on their own, a specific person contacted.
- If someone is agitated, step back and give them physical space, avoiding holding or touching. Invite them to go into a safe, private area to express their emotions, let off steam or calm down.
- If someone is in crisis, contact the person of their choice if possible and offer to accompany them. Otherwise, contact Lifeline on 13 11 14 or another agency listed on pages 19–23.
- If someone doesn't respond to your invitations, be aware that the person might not be able to respond to you right now, or ever. Unless they ask you not to, keep phoning, sending emails or cards. Doing this says "You are not alone; you are not forgotten" and is the greatest embodiment of the faithful God.



## Take care of yourself

When you are supporting someone with mental health issues, it is important that you look after your own health as well. If you are struggling, it may help to talk to someone in a similar situation.

Lifeline<sup>12</sup> offers the following advice for carers and supporters.

**Take breaks:** Recognise your limits! No one can be a carer all the time. Make sure you get out of the house and continue doing activities you enjoy. Is there a relative, friend or community member who would be willing to share the role of carer or provide regular respite?

**Health:** Maintaining good health is the best way to withstand stress. This includes:

- **Regular exercise.** Exercise can be as simple as walking, gardening, dancing, yoga, or anything that provides a gentle workout.
- **Regular relaxation.** Listening to music, meditating or reading are simple ways of relaxing.
- **Diet.** Regular nutritious meals will help maintain energy levels and keep you physically and mentally well.
- **Sleep.** Make sure you get enough sleep every day. Lack of sleep reduces your ability to cope.

**Support:** Having a friend or someone you trust to talk to, without fear of judgement, is important. Sharing your experiences provides comfort and strength, and reduces feelings of isolation. Talk to a Lifeline telephone counsellor 13 11 14 or contact your local ARAFMI for information and support (see resource list on pages 19–23).

## Setting healthy boundaries

“When you identify the need to set a boundary, do it clearly, calmly, firmly, respectfully, and in as few words as possible. Do not justify, get angry, or apologise for the boundary you are setting. You are not responsible for the other person’s reaction to the boundary you are setting. You are only responsible for communicating your boundary in a respectful manner.”<sup>13</sup>

Personal boundaries are like a property line, defining where you end and others begin. They are individual to each person and are determined by the amount of physical and emotional space you allow between yourself and others.

<sup>12</sup> Lifeline, 2010, Tool kit: Carers of people with mental illness, website accessed 28 May 2015, [lifeline.org.au/Get-Help/Self-Help-Tools/Tool-Kits/Tool-Kits](http://lifeline.org.au/Get-Help/Self-Help-Tools/Tool-Kits/Tool-Kits)

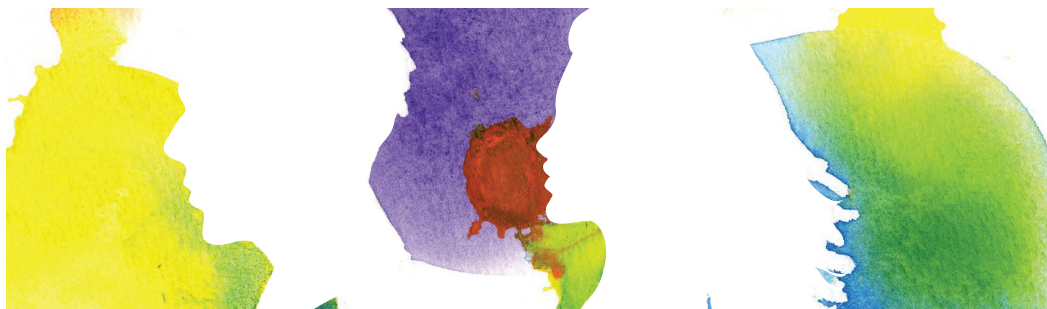
<sup>13</sup> Terri Cole, 2012, How to Create Healthy Boundaries. Positively Positive, webpage accessed 29 May 2015, [positivelypositive.com/2012/06/29/how-to-create-healthy-boundaries](http://positivelypositive.com/2012/06/29/how-to-create-healthy-boundaries)

Know your own limits: consider what you can tolerate and accept and what makes you feel uncomfortable or stressed. Two key feelings are red flags that we're letting go of our boundaries: discomfort and resentment. Ask yourself what is causing that feeling—what is it about this situation, interaction or the person's expectation that is bothering me?<sup>14</sup>

Community boundaries are important. What conventions of behaviour are important to your church community? Examples might include listening while the preacher talks, only singing while hymns are sung, and being clean.

If someone with mental health issues gets upset and shouts loudly during the sermon, it is reasonable to ask the person to come outside, and to explain the boundaries around this behaviour. You may need to wait until the person has calmed down.

The community should not feel guilty about setting boundaries and asking members to adhere to them. Ignoring boundaries is not helpful to individuals or communities in the long run.



14 Margarita Tartakovsky, 2013, 10 Ways to Build and Preserve Better Boundaries, PsychCentral, webpage accessed 29 May 2015, [psychcentral.com/lib/10-ways-to-build-and-preserve-better-boundaries](http://psychcentral.com/lib/10-ways-to-build-and-preserve-better-boundaries)



# *Training opportunities*

**Luke14** is a CBM Australia initiative equipping churches to be places of welcome and belonging for people and families living with disability and mental health issues. They provide a range of resources and interactive workshops to equip churches with practical ideas, skills and strategies for inclusion. Workshops are run in your venue. Luke14 provides the workshop facilitator, teaching and course materials.

“Mental Health Unwrapped: Resourcing the Church to Support Mental Wellness” is a half-day workshop about how Christian communities can provide pastoral care and support for people experiencing mental illness.

Contact 1800 678 069 [cbm.org.au/content/our-work/luke14](http://cbm.org.au/content/our-work/luke14)  
or [luke14@cbm.org.au](mailto:luke14@cbm.org.au)

**Mental Health First Aid Training** teaches people how to identify and help others with mental health problems. A number of organisations provide this training, including:

- **Mental Health First Aid International** ([mhfa.com.au](http://mhfa.com.au))
- **Wesley Lifeforce** ([wesleymission.org.au](http://wesleymission.org.au))
- **The Salvation Army** ([salvos.org.au](http://salvos.org.au))

# Resources and support

## General

**Lifeline** provides telephone (24/7) and online (7 pm–4 am AEST) counselling for anyone experiencing depression and anxiety, domestic and family violence, family and relationship problems, financial problems, loneliness and isolation, grief or loss, panic attacks, problem gambling, recovering from a natural disaster, self-harm, stress, substance abuse and addiction, and suicide bereavement. Call 13 11 14 or visit [lifeline.org.au](https://lifeline.org.au)

**Lifeline Toolkits** [lifeline.org.au/Get-Help/Self-Help-Tools/Tool-Kits/Tool-Kits](https://lifeline.org.au/Get-Help/Self-Help-Tools/Tool-Kits/Tool-Kits)

**Suicide Call Back Service** provides telephone (24/7) and online (24/7) counselling for people 15 years and over who are suicidal, caring for someone who is suicidal, bereaved by suicide, and health professionals supporting people affected by suicide. Call 1300 659 467 or visit [suicidecallbackservice.org.au](https://suicidecallbackservice.org.au)

**Beyondblue** provides telephone (24/7) and online (3 pm–12 am AEST) counselling for those experiencing depression, anxiety, grief or loss, self-harm and self-injury, and mental health conditions associated with pregnancy and early parenthood. Call 1300 224 636 or visit [beyondblue.org.au](https://beyondblue.org.au)

**SANE** Australia provides information about mental illness, treatments, and where to go for help. The website hosts a support forum for those with lived experience of mental illness and their carers. Call 1800 187 263 (9 am–5 pm AEST weekdays) or visit [sane.org](https://sane.org)

**Healthdirect Australia** provides telephone (24/7) health advice by registered nurses, an after-hours GP helpline, and a 'Find a Health Service' tool on its website. Call 1800 022 222 or visit [healthdirect.gov.au](https://healthdirect.gov.au)

**mindhealthconnect** website hosts mental health resources and content from leading health-focused organisations in Australia, including online programs, fact sheets, audio and video, and online communities. Visit [mindhealthconnect.org.au](https://mindhealthconnect.org.au)

**Grow** is a community-based organisation that helps people recover from mental illness through a program of mutual support and personal development. Call 07 3394 4344 or visit [grow.org.au](https://grow.org.au)

**A Nouwen Network** brings together people from diverse church communities who seek to support those whose lives are affected by mental illness. They provide resources on the theme of mental illness ministry, prayer and spirituality. Visit [nouwen-network.com](http://nouwen-network.com)

**UnitingCare Community** provides services across Queensland, such as Lifeline 24-hour telephone crisis support, suicide intervention and community recovery, as well as family relationships and mediation, counselling, domestic violence support, disability support, out-of-home care and other intensive family support. Phone 3250 1900 or visit [uccommunity.org.au](http://uccommunity.org.au)

**Wesley Mission Brisbane** supports youth and families, people living with a disability, people who are unemployed, isolated and mentally ill. Phone 1800 493 7539 or visit [wmb.org.au](http://wmb.org.au)

## Children, adolescents and young adults

**headspace** provides in-person counselling and advice for people 12–25 years on health, education, employment and other services, and alcohol and other drug services. Call 03 9027 0100 or visit [headspace.org.au](http://headspace.org.au)

**ehespace** provides telephone (9 am–1 pm AEST daily) and online (9 am–1 am AEST) counselling on a broad range of issues by qualified youth mental health professionals for people 12–25 years. Call 1800 650 890 or visit [ehespace.org.au](http://ehespace.org.au)

**Kids Helpline** provides telephone (24/7) and online (7 days a week) counselling for people 5–25 years. Call 1800 55 1800 or visit [kidshelp.com.au](http://kidshelp.com.au)

**ReachOut.com** provides practical tools, forums and information for people under 25 years on a range of mental health topics. Visit [au.reachout.com](http://au.reachout.com)

**MindMatters** provides resources to support Australian secondary schools in promoting and protecting the mental health of members of the school community. Visit [mindmatters.edu.au](http://mindmatters.edu.au)

## Men

**MensLine** Australia provides telephone (24/7) and online counselling and referral specifically for men. Call 1300 78 99 78 or visit [mensline.org.au](http://mensline.org.au)

**Men's Sheds** are friendly environments that cater for men of all interests, ages and cultures. Visit [mensshed.org](http://mensshed.org) or call 1300 550 009.

**The Shed Online** is an online social community for men. It is a place to socialise, network, make friends, share skills, and feel confident to discuss anything. Visit [theshedonline.org.au](http://theshedonline.org.au)

## Women

**The Country Women's Association of Australia** provides community service, support networks, welfare, educational opportunities and social opportunities. Visit [cwaa.org.au](http://cwaa.org.au)

## Carers

**Carers Australia National Carer Counselling Program** provides short-term counselling services (telephone, email and Skype) for carers. Call 1800 242 636 or visit [carersaustralia.com.au/how-we-work/national-programs](http://carersaustralia.com.au/how-we-work/national-programs)

**Arafmi** (Association of Relatives and Friends of the Mentally Ill) Queensland provides information and support for carers. Call the 24-hour telephone support line 07 3254 1881 or 1800 351 881 or visit [arafmiqld.org](http://arafmiqld.org)

## Veterans

**At Ease website** provides mental health information for the veteran and defence communities: online tools to help maintain mental health and wellbeing, resources for GPs and health professionals treating veterans with common mental health conditions, and advice on how to help those at risk of suicide. Visit [at-ease.dva.gov.au](http://at-ease.dva.gov.au)

**Veterans and Veterans Families Counselling Service** is a confidential telephone counselling service (24/7) for veterans and their families for war and service-related mental health conditions such as post-traumatic stress disorder (PTSD), anxiety, depression, sleep disturbance and anger. Call 1800 011 046 or visit [vvcs.gov.au](http://vvcs.gov.au)

## Rural

**Rural Financial Counsellors** provide free financial counselling to primary producers, fishers and small rural businesses. Some provide referral to mental health services. Call 1800 686 175 or visit [agriculture.gov.au/ag-farm-food/drought/assistance/social-community-support-services](http://agriculture.gov.au/ag-farm-food/drought/assistance/social-community-support-services) for a map and contact details of rural financial counselling services.

## Aboriginal and Torres Strait Islander people

Aboriginal Medical Services (AMSs) provide culturally appropriate health services to Aboriginal and Torres Strait Islander people. Visit [healthinfolnet.ecu.edu.au](http://healthinfolnet.ecu.edu.au)

## People of diverse sex, genders and sexualities

**Qlife** provides telephone (5.30 pm–10.30 pm AEST daily) and online (5.30 pm–10.30 pm AEST daily) counselling for Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) people of all ages. Call 1800 184 527 or visit [qlife.org.au](http://qlife.org.au)

## People experiencing or at risk of homelessness

**Homelessness Australia** provides an information and referral service for people experiencing or at risk of homelessness. Call 02 6247 7744 or visit [homelessnessaustralia.org.au](http://homelessnessaustralia.org.au)

## Alcohol and/or drug use

**Counselling Online** provides telephone (24/7) and online counselling for people using alcohol and other drugs, and their family and friends. Call 1800 888 236 or visit [counsellingonline.org.au](http://counsellingonline.org.au)

## Domestic and family violence, and sexual assault

**1800RESPECT** National Sexual Assault, Domestic Family Violence Counselling Service provides telephone (24/7) and online counselling (24/7), and information and resources about sexual assault and family or domestic violence. Call 1800RESPECT (1800 737 732) or visit [1800respect.org.au](http://1800respect.org.au)



## People from culturally and linguistically diverse backgrounds

**Mental Health in Multicultural Australia (MHiMA)** provides a national focus for advice and support to providers and governments on mental health and suicide prevention for people from culturally and linguistically diverse (CALD) backgrounds. Call (02) 9840 3333 or visit [mhima.org.au](http://mhima.org.au)

**Queensland Transcultural Mental Health Centre** provides state-wide information, referral, resources and clinical consultation services. Call 07 3167 8333 or 1899 188 189 (outside the Brisbane metropolitan area) or visit [health.qld.gov.au/metrosouthmentalhealth/qtmhc](http://health.qld.gov.au/metrosouthmentalhealth/qtmhc)

**Queensland Program of Assistance to Survivors of Torture and Trauma (QPASST)** provides flexible and culturally sensitive services addressing the physical, psychological and social needs of people who have been tortured or have suffered refugee-related trauma prior to migrating to Australia. Call 07 3391 6677 or visit [qpastt.org.au](http://qpastt.org.au)

## Suicide postvention services

**Standby Response Service** is a community-based program that provides a coordinated response of support and assistance for people who have been bereaved through suicide. Call 07 5442 4277 or visit [unitedsynergies.com.au/program/standby-response-service](http://unitedsynergies.com.au/program/standby-response-service)

## Congregations

**Uniting Church in Australia**, Queensland Synod provides mental health resources for congregations. Visit [ucaqlld.com.au/social-responsibility/key-social-justice-areas/mental-health](http://ucaqlld.com.au/social-responsibility/key-social-justice-areas/mental-health)



[ucaqld.com.au](http://ucaqld.com.au)



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