

## I. Introduction

A. This is a copy of a painting by Vincent Van Gough – the 19<sup>th</sup> century post-impressionist painter famous for many things: his brush strokes, his use of green and the fact that he cut off his own ear.

B. This particular painting – [the Raising of Lazarus](#) – is noteworthy because:

1. of his heavy use of yellow (which he used to represent God’s divine love)
2. And the fact that he painted his own face on Lazarus.

C. If you only know a bit about Van Gough, you may not know that he was a Christ-follower.

1. At one time his fervor for God was so intense he became a missionary to poor coal miners in Belgium and studied to become a pastor.

2. But his relationship with God and – perhaps more to the point – his relationship with the church, was complicated. In this painting, [Starry Night](#), (which you could buy for \$100M dollars!) we know that he used deep indigo to represent the infinite nature of God, and yellow in the stars to represent the love of God in heaven. We also see that every building in the village is lit up with God’s love and light... except the church.

D. Van Gough was mad at the church – which he thought was full of hypocrites trying to act respectable. And chose to spend his time as he thought Christ would, with peasants and prostitutes.

E. Let me be among the first to say, the church (you and me) are guilty of hypocrisy and of doing things that drive others away. God forgive us. But as you may also know – one of the only things many know about Van Gough – is that his view of things was not always accurate because of the mental illness from which he suffered.

F. Van Gough was quite open about this. Indeed, his faith was part of what led him to be open about his illness and suffering. And his artwork suggests, much of the time he saw his struggles through the light of hope. But not always. He suffered from deep melancholy and depression.

II. If I was going to pick a prayer for Van Gough – something to voice his concern - I think it would be Psalm 13 – one of the many prayers of David in which he cries out to God in despair and anger.

**A. How long, LORD? Will you forget me forever? How long will you hide your face from me?**

**B. How long must I wrestle with my thoughts and day after day have sorrow in my heart? How long will my enemy triumph over me?**

**C. Look on me and answer, LORD my God. Give light to my eyes, or I will sleep in death, and my enemy will say, “I have overcome him,” and my foes will rejoice when I fall.**

**D. But I trust in your unfailing love; my heart rejoices in your salvation. I will sing the LORD’s praise, for he has been good to me.**

III. Since I opened talking about Van Gough – and his use of color. Let me say, Psalm 13 is grey.

A. It is a classic lament Psalm – that is, one in which the writer says: “I’m hurting,” or “The bad guys are winning,” and YOU DO NOT CARE!”

B. It seems very appropriate today – during a week in which it started to feel like we were starting to take a few steps forward with COVID, and then we take ten steps back because of racism.

1. A few weeks ago it was Ahmaud Abrey’s death

2. This week it is George Floyd

3. And we realize – we will defeat the COVID virus – but racism? How long?.

C. Which is David’s question. He repeats the question four times: How long? How long? How long? How long? How long do I have to suffer?

**D. How long, LORD? Will you forget me forever? How long will you hide your face from me?**

E. This is an existential cry. David feels alone in this crisis. In the Psalm right before this – Psalm 12 – he complains that his friends have left him. Here he complains that God has also gone AWOL. He does not sense God’s love or see any goodness in his plan. The skies have gone black. If David were Van Gogh, he would not be painting the heavens with indigo or yellow – this Psalm suggests he might use black. Which is what Dr. Ryken said was his experience as well. As he moved through his depression, he doubted that God loved him or that his prayers would be answered.

F. As I said, we are not sure exactly what the backdrop to this Psalm is. David was the king, so we can assume he had mad haters.

1. Whoever is in charge has critics – it doesn’t matter if it’s a governor, the Director of the WHO or a President. Any president. It doesn’t matter if it’s Reagan, Bush (41), Clinton, Bush (43), Obama or Trump. If you are leading something you will be criticized.

2. A few years ago, Sheri and I stopped in the newly re-opened Lincoln Presidential museum in Springfield. Lincoln! He makes everyone’s list as a great president if not the greatest. So, I was shocked at the level of attacks he endured. At one point in the museum you walk through this passage where you hear the attacks being made against him. I was shocked. But that is what it feels like to be President (or king).

3. So it might be that the “enemy” David is talking about here are his critics. Those coming for his throne. Or it could be death, or the evil in this world. We don’t know specifically.

G. What we know is that we get a cry of despair and anger that speaks to his “no one understands me” loneliness.

H. And this is the experience often suffered by those with mental illness - depression, or schizophrenia or bi-polar illness, psychosis, whatever.

**I. How long must I wrestle with my thoughts and day after day have sorrow in my heart? How long will my enemy triumph over me?**

J. One of the books I read as I was preparing for this series is titled, *Wrestling with my Thoughts: A Doctor with Severe Mental Illness Discovers Strength*. It was written by Sharon Hastings, a woman who fell into a deep depression during her third year of medical school.

1. In the first sermon we looked at Elijah – who likely had a situational depression. Dr. Ryken’s testimony suggests that this was his story as well. A number of significant things went wrong for him at the same time – both personally and professionally - and he was overwhelmed – couldn’t sleep, became very sad. Felt smothered with despair.

2. I have not suffered this kind of depression – but I have been told that it is awful. However, I want to note that he recovered. And not everyone does. There is mental stress that seems to emerge out of our circumstance and there are mental illnesses that are more organic or genetic. It is not always easy to tell which is which – but I want to note that not everyone gets better.

3. The woman who wrote, *Wrestling with My Thoughts*, had everything going for her when everything began to unravel.

4. She ended up spending ten years in and out of hospitals and inpatient treatment facilities, undergoing lots of different kinds of treatments – prayer, counseling, an array of drugs and electric shock among them. Some worked – at least for a while. Many did not. It was an ongoing battle. She writes the book as a doctor explaining the illness, as a patient describing her thoughts and experiences during various seasons in her life, and she also writes as a Christ-follower, wrestling with God’s plan, His goodness.

K. I mention her story – which is not an easy read

1. She undergoes numerous different diagnoses - everything from an eating disorder and depression to bi-polar illness and schizophrenia

2. She faces other health challenges. She attempts suicide.

3. Several times she is treated by her former classmates – but they do not acknowledge her as a former classmate. She can’t tell if they have forgotten her or are just embarrassed for her. It makes her feel invisible and devalued. She knows they would be responding differently if she had cancer.

4. The book ends with a positive trajectory. They eventually establish that she has a rare type of schizophrenia and come up with a treatment plan that helps a lot.

a) She is able to graduate from medical school – although she is not allowed to practice

b) She dates and marries.

5. I mention her story to highlight two things – one I will end with, one I will mention here. one is that her form of mental illness is not something she was able to move past.

a) She prayed for healing – but the Lord did not (at least as of the writing of the book) choose to heal her.

b) She is on a handful of meds and in ongoing counseling – and with the support she has from her husband, her friends, her church and her therapist, she manages her condition.

6. I want to be clear, some people find that as their situation changes – or as they learn to think differently about what is going on around and inside them – they get better. Some do not.<sup>1</sup>

a) In this Psalm, David does. Like many other Psalms, he pours out his heart, he laments, he brings his anger at God to God, and then he ends up in a better spot.

b) Men and women, God delights in our prayers – and sometimes he answers them exactly as we hope. Not always.

c) I believe that if we had the perfect knowledge that He does that we would always choose the answer he gives us. I believe He loves us and does what is best for us. It's often hard to see – not only because our insight is limited, but because we so seldom factor in eternity.

7. Some of you are struggling right now and it sure seems as though God is not answering your prayer. That is what David is claiming. That is what Dr. Ryken felt. But they hung in there and in their situation got to verse 5 – where things resolve – pretty quickly.

8. It doesn't always happen that way. Sometimes we get stuck at verse 4 for a long time. But verse 5 is coming. Hang in there.

IV. Back to Psalm 13 – where David is still venting. V 3: Look on me and answer, LORD my God. Give light to my eyes, or I will sleep in death, and my enemy will say, “I have overcome him,” and my foes will rejoice when I fall.

A. David is desperate. He is pleading – almost threatening. God, if you don't show up my enemies are going to win, and people like me, who say you answer prayer, are going to look bad. Is that what you want?

B. Perhaps you been there? Maybe you are there right now? Maybe you are asking, “How long Lord?”

C. Perhaps it's not over mental illness but job loss. Or an estranged child. The seemingly intractable racial problems we cannot seem to move past. You are sick with grief.

D. Maybe it's over a chronic illness that you would like him to lift and he has not.

E. My point today – make that the Psalm's point – is that we can and should bring our frustration to God. Pour it out. Do not hold back. You do not need to sanitize it. God is not offended when we bring our honest questions - or heated complaints - to Him. These actually confirm our desire for a relationship with him. Our angst, anger and confusion should push us to dig our heels in and continue to bombard the throne of grace with our requests.

F. Too often today we turn anywhere but God.

*I.* Could be binge watching Netflix or some other form of what I'll call mindless entertainment – and I am not against TV. We have one. I am not against some entertainment – but it's dessert on the day not the main course.

2. So, we might seek to avoid our problems via TV or alcohol or some other form of escape.

G. But I am saying, go to God first. Bring him your unedited hurt. Jesus did – on the cross He cries out, “My God, My God why have you forsaken me?”

H. In David’s case, he seems to exhaust his fear and move to a good place. V5: **But I trust in your unfailing love; my heart rejoices in your salvation. I will sing the LORD’s praise, for he has been good to me.**

V. In the previous two sermons – and the ancillary events that have been part of this series (the interviews and the concert) – a handful of points have been developed.

A. I briefly defined **mental illness as a wide range of disorders that impact our mood, thinking and behavior**. Examples include: depression, anxiety, schizophrenia, eating disorders and addictive behaviors.

**B. Mental illness is more common than we acknowledge**

1. By most accounts, one in five adults struggle at some point with their mental well-being. Which means, about 1 billion people.

2. Many believe the problem is bigger than our current systems can handle. Or they argue that we do not have a system, we have a jump cut of approaches and treatment plans that are hard for anyone to navigate – let alone someone whose thoughts betray them.<sup>2</sup>

3. And that was before COVID. There are several data points<sup>3</sup> suggesting that since the pandemic mental health issues have spiked. Those struggling with stress and anxiety – or bi-polar disorder or various forms of schizophrenia – are facing harder circumstances with less support.

4. LEAD – a Lake County group - reports that the levels of despair, anxiety, fear and even loneliness coming into their hot line over the last few weeks has spiked. That is likely given that some fear factors have risen, during a time of isolation.

5. By the way, let me remind you that I have not only used stats to make this point, I have also used examples.

a) This is why I shared about my grandfather

b) This is why we asked Dr. Ryken to share his story

c) And this is why I have noted some of the biblical figures who appear to have had mental health challenges of various levels: Saul, Elijah, Nebuchadnezzar, Herod, Naomi, Jeremiah, Jonah and others.

d) And I could name lots more. Luther and Spurgeon both talked openly about their mental distress. Since the suicide of the son, Rick and Kay Warren have spoken openly about mental health issues in the church.

6. So, I started by defining mental illness and then noting that it is a more common than we acknowledge

**C. I said we need to remove the stigma.**

1. One of the reasons mental health is as big an issue as it is, is because it is hidden.

- a) There is personal denial. I talked a bit about this in the Blindspots series.
  - b) And there is also family denial or family secrecy because of the shame and stigma that accompanies Mental Illness.
2. Last week I got a letter from a former student who was listening online. She shared something I did not know – that she grew up with a Mom who suffered from Bi-polar illness.
3. Also last week a good friend told me more of his story.
- a) I knew most of it – and I knew most of the details of a dark chapter in his life. But I did not know all of it, because some of it contained mental health matters that he did not want to talk about.
  - b) In hindsight I can't believe I missed it. And I apologized for the miss. But my point is, the shame around mental health matters drives much of it underground and makes a bad situation worse.
4. I have sometimes wondered what would happen if everyone would just share their story. If everyone would own their struggles.
- a) If people would share – not in a large group setting, but with their small group or a good friend, with someone – the abuse going on in their family or that they are not sleeping or they are self-medicating with alcohol or have developed an addiction to other drugs or gambling or porn or whatever.
  - b) I am not looking for this kind of honesty in front of a large group – but friends. Your small group.
  - c) My prayer is that there are people who know your story – all of it, and in front of whom you do not know shame but grace.
5. By the way, let me call a time out here and say, if someone you know somehow moves into this space
- a) They fall into a depression
  - b) Or their child is diagnosed as suffering from schizophrenia.
  - c) Or they confide to an unhealthy addiction – you need to move towards them not away.
  - d) This doesn't mean you need to fix things, or offer advice. It may mean you need to help make sure they get help. It may mean you just sit with them in the pain and awkwardness.
  - e) A Mom who went through a child's diagnosis of a mental illness offered this counsel, "Don't judge a situation that at first seems odd, just let that person be themselves and love them unconditionally. Greet them, sit with them and pray with them. Listen. When in doubt, bring them a casserole.
6. Mental health struggles would be part of what comes into the light so that the stigma would go away. Breaking the silence is a first step in creating the kind of environment where hope can be found.
- D. There are points I have not developed because of lack of time.

1. **God has left us a path** – a set of practices such as prayer, silence and meditation – that often help. Not quick fixes, but tools that, if followed, help us move forward. A growing number of people lack the psychological and spiritual hygiene needed to navigate life, and I think this is one of the reasons we see such a drop in resilience.
2. **Trials can be a good thing.** For many people, the real secret to a great prayer life is not discipline it's desperation.
3. **Christians can suffer from Mental Illness** – I am so thankful for Dr. Ryken sharing his story. I also thought about having Dr. Mouw, who served as President of a seminary – share his story of being an alcoholic.
4. I am especially thankful for their openness because too often, well-meaning Christians say hurtful things like: if you would just pray, or if you would have enough faith, this will get better.<sup>4</sup>

VI. I am going to end by addressing three different groups.

A. First – let me make a general comment to **Everyone:**

1. I want to say to everyone – we need to consider the possibility that our understanding of things – of our situations, of ourselves – might be off.
2. Some of you know you are struggling – and to you I want to say, there is help. But a big first step is accepting that you need it.
3. Others are less aware. Indeed, given our fallen, sinful nature, it is very hard to see ourselves accurately even when our minds are working well. We put up lots of defenses against that.
4. The gap between who we think we are and who we actually are is one definition of mental health.
  - a) If I say to you that I am a married 59 year old with three grown sons and a bad golf swing, you would think: OK
  - b) If I claimed to be the best athlete around you would wince.
  - c) If I claimed to be the best athlete in the room, you would wince.
  - d) If I claimed to be the greatest athlete ever you would be trying to figure out if I was making a joke or was seriously deluded.
5. Let me note that it takes a lot of leaning into grace over time – a lot of being amazed at how good God's love is – before any of us start to see ourselves as we are.
6. But I am talking about something else. If people who love you say, I think you are off here. I think you have a problem. I do not think you are seeing things accurately – you need to listen.
7. And by the way, money or power makes this hard. If you have money, the number of people who will tell you the truth just went down. And it's often only your spouse, which sets up a bad dynamic.
  - a) I have talked about this before – but early in our marriage Sheri said to me, “You are not treating me well, but there is no one close enough to you other than me to see it. You need better friends because I do not want to be the one to tell you to raise your game.”

8. Discussions about self-awareness can take us down a lot of paths. I simply want to note that as a pastor I see a lot of denial out there – and I see a lot of self-medicating by people in denial – who I think have some mental health challenges.

9. If someone who cares for you suggests your view on things may be off, you might want to give them the benefit of the doubt. Because if your view of things was off, you likely wouldn't know it.

10. And if you do not have the kind of friends who could tell you – the 2 AM friends who know what is going on – you need them.

11.

B. Second: **Those caring for someone struggling with mental illness.**

1. I want to say to those of you who are living with someone who has a mental illness – whether they have recognized it or not; whether they are getting help or not, whether they are stable or not – you almost certainly need more support.

2. One of the lines that jumped out at me in my reading was, “Mental illness happens to families.” And I thought, that is right.

3. And, this is where 21<sup>st</sup> century American life is so weak. This is where the absence of community is so obvious. This is why all the things Bellah and Putnam have written about are so scary.

4. This is why we desperately need to work hard to be a good friend so we have good friends.

5. This is why we push small groups.

6. You can always call your campus pastor and ask to talk. We are also considering starting a support group for you. If you go to our web site and click on the Get Help button at the top, it will take you to a place where you can sign up. If we get enough takers we will launch that – and if not we will get back to you with other options.

C. Finally, let me say something **to the church at large.**

1. To all of us collectively. We need to do a better job of loving and caring for those who are impacted by mental illness.

2. Studies consistently show that when people are in mental distress, the place they are most likely to turn is the church.

3. I think this is a good thing from many reasons: first, because the church is more likely to take a holistic approach than other groups – one that recognizes that we need medical, social, and spiritual care.<sup>5</sup>

4. The Bible is full of the “one another” admonitions. We are told to:

- a) Love one another (John 13:4)
- b) Be devoted to one another (Romans 12:10)
- c) Honor one another (Romans 12:10)
- d) Accept one another (Romans 15:7)
- e) Admonish one another (Romans 15:14)
- f) Forgive one another (Eph. 4:2)
- g) Care for one another (1 Corinthians 12:25)

- h) Serve one another (Galatians 5:13)
- i) Bear one another's burdens (Galatians 6:2)
- j) Comfort one another (1 Thessalonians 4:18)

5. We do a great job in many areas. This past week we – you – provided 35,000 pounds of food for 360 families in Highwood; we have people staffing a justice ministry and have a housing program and cancer (and divorce and grief) support groups.

6. There are many ways in which we step up. But we do not do nearly as well on this front.

- a) Churches are one of the places that people with mental health issues turn, but we often come up short.

7. Earlier I said there were two reasons I had cited the book, *Struggling with My Thoughts* – the first was because her mental illness was chronic. And I wanted to note that not everyone has Elijah or Dr. Ryken's experience of making a full recovery.

8. The second is because in the book she is cared for by an aunt who does not give up on her, and also by her church – that she walks away from for some time. But by in large they did not give up on her.

9. As a church we – and that means you – need to find ways to love and care for those people in your life who struggle with mental illness.

10. I am not sure what this might mean for you. I am not asking you to fix anyone. You may – however – need to be a friend to someone. May we be that kind of community.

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<sup>1</sup> The medical community classifies mental health illnesses in various ways. As a general rule, the term “acute” is used to describe mental distress caused by situations and from which people may recover; and severe (or chronic) for mental illness that is more likely to be genetic and long lasting.

<sup>2</sup> One of the claims that is made is that part of the problem is that we do not have a “system” of care in place. We have disjointed treatment options.

<sup>3</sup> Jean Twenge, “New study shows staggering effect of coronavirus pandemic on America’s mental Health.” *The Conversation*, May 7, 2020 12:59pm EDT

<sup>4</sup> I would not only argue that Christians can suffer from mental illness because I know those who do, or because of the examples we see in the Bible and history. I would also note that, if you believe in total depravity – i.e., that sin has impacted every area of our life – then it makes sense that our brains have been touched.

<sup>5</sup> Over time, our cultures approach to mental illness has moved from a family/faith approach, to one that was mostly therapeutic. In recent years it has moved more towards one that is more pharmacological. I am in favor of all approaches, but believe a holistic approach is best. And, I favor the church because when it is operating as it should, it provides: 1) a hope that transcends circumstances, 2) a holistic view of humans, 3) accessibility and 4) a supportive community. This view is supported by others (Allen Frances, “The Lure of ‘Cool’ Brain Research is Stifling Psychotherapy. *Aeon*, 3.17.20)