



Broadcast Transcript

Broadcast: Child and Adolescent Mental Illness: Care with Grace and Hope- Part 1

Guest(s): Dr. Matthew Stanford

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Dr. James Dobson: Well, hello everyone. I'm James Dobson, and you're listening to Family Talk, a listener supported ministry. In fact, thank you so much for being part of that support for James Dobson Family Institute.

Roger Marsh: Hello, everyone and welcome to Family Talk, a listener supported division of the Dr. James Dobson Family Institute. I'm Roger Marsh. Did you know that May is Mental Health Awareness Month? Well, today's broadcast addresses an important piece of the mental health crisis that is too often overlooked in our culture, and that is mental illness in children and adolescents. Our guest today here on Family Talk has done extensive research on this topic and works actively in clinical practice and leads a highly regarded treatment center.

We're anxious to hear his insights and wisdom, and I'm sure you will be enlightened as well. Dr. Matthew Stanford is CEO of the Hope and Healing Center and Institute in Houston, Texas. He's also an adjunct professor of psychiatry at the Baylor College of Medicine and Houston Methodist Hospital Institute for Academic Medicine. Dr. Stanford earned his doctorate in behavioral neuroscience at Baylor University. Matt's research has been featured in *The New York Times*, *USA Today*, *Christianity Today*, and *US News and World Report*.

He is a respected author and a member of the American Association of Christian Counselors. Today, Dr. Tim Clinton and Dr. Matthew Stanford will be discussing Matt's latest book called *Grace for the Children: Finding Hope in the Midst of Child and Adolescent Mental Illness*. Dr. Tim Clinton, of course, is our co-host here at Family Talk. He's also the president of the American Association of Christian Counselors. We hope that you and someone, you know will benefit from today's important conversation.

Dr. Tim Clinton: Dr. Stanford, you quote from Psalm 139:23 which says, "Search me, O God, know my heart, test me, know my anxious thoughts and lead me in the way everlasting." You write "God not only knows child's thoughts, but also their heart." While He celebrates a child's joys, He also feels their pain and frustration. That's so well put. Dr. Stanford, Matt, thank you for joining us.

Dr. Matthew Stanford: Thanks for having me.

Dr. Tim Clinton: Matt, as we get started, I think this is one of the most important subjects I think we'll do all year, and that is mental health, the church, and our kids. Matt, prior to the pandemic and everything we've been through, we had a mental health crisis in our country. I think most mental health experts would agree. We don't have a crisis now. We have a mental health disaster. Matt, what are you seeing in terms of mental health in our country and the church?

Dr. Matthew Stanford: No, absolutely. I mean, prior to the pandemic, we already had a mess. And just about a month ago, a study came out, a national survey of parents, of teens that was done by the University of Michigan Medical School found that 50% of parents of teens reported that their teen now has either a worsening or a new mental healthcare problem as a result of the pandemic. The numbers that we're seeing are just really... They're almost unbelievable. We're seeing increases in substance abuse, increases in depression and anxiety, particularly again in teen girls that are being affected the most, academic failure.

I mean, it's more than just your child doesn't like to do this on Zoom or online. We hear a lot of that right now that the children aren't doing well because of that. But the reality is a lot of that is related to the fact these children are isolated. They have no social connection anymore, and frankly, they're going into depression or anxiety issues and nobody's really picking up on it. And the mental health fallout from this pandemic is going to be years in the future.

You mentioned the church and you and I both agree that really the church has not only a significant role to play in this, but really may be the answer to the mental health crisis that we're dealing with.

Dr. Tim Clinton: Matt, I guess in some ways, we love to think our kids are immune to the dark world that we live in and the insanity and everything else that's going on around us, but they're not. Matt, stress in our kids, Archibald Hart, whom we both love, a pioneer in the Christian counseling world, a psychologist who wrote a lot on stress in our kids said he believed that we're seeing now children as young as five years of age developing ulcers and more. What's happening to us, Matt, and our kids really? There's a lot of factors that are feeding this.

Dr. Matthew Stanford: Oh, absolutely. Really anxiety is the foundation of a lot, if not the majority of the mental health issues that we're seeing in children. I mean, they've been tracking anxiety in... And usually they use older adolescents and high school or freshmen in college as kind of a marker, and they've been tracking that since the '30s. What you find today is that your kind of older adolescent or freshmen in college has the level of anxiety of what you would see in inmates in the '40s and '50s.

These children are at really almost clinically meaningful levels of anxiety on a daily basis, and where that comes from is they are just absolutely overwhelmed with information. They're absolutely overwhelmed with daily decisions they have to make in relationship to their image and their connections and things with social media. But at the same time, they are being taught less and less how to deal with stress and how to be resilient in those situations.

Our children, because of the society we live in, really almost it doesn't matter what economic level you're at, they have things at their fingertips no matter what they want. It's instantaneous gratification. They don't deal well with stress. They're not resilient. And part of that is also the fact that our adults aren't resilient. Our adults are falling apart. It's stress. We don't know how to interact. We don't know how to conversation. Social media has pulled children apart from everyone even more.

You have the semblance of intimacy and connection, but you don't actually have the opportunity to vent and discuss and reason things through. When our children are presented with stress, they fall apart. He's absolutely right when we're seeing five-year-old children that are struggling with significant anxiety issues because they don't have models to show them how to deal with it, and they're being exposed to problems that five-year-olds in the past would never have been exposed to before.

Dr. Tim Clinton: Matt, if you're a parent and then you have what some people would call an extra effort child or a special needs child, you realize that your family is probably a little more different than maybe those around you. Certainly, maybe those in church around you. And you've got some added responsibility, maybe added burden. And I use that word carefully in a way that I hope people understand is packed full of love. There's just though a lot of extra going into taking care of my family and parenting our family.

And a lot of those families begin to realize that the people in the world around them don't really understand what it's like in their home. Let's talk about some of the more common issues that you see in those types of families. I know in your book, *Grace for the Children: Finding Hope in the Midst of Child and Adolescent Mental Illness*, you talk about categories, impulsivity, autism, and we'll talk about the spectrum. You talked about disruptive behavior disorders, depression, anxiety disorders, eating disorders, and more.

Matt, what are some of the most common disorders that you see and what are some of the statistics, so we can get a measure on this?

Dr. Matthew Stanford: Well, in children and adolescents, you're looking at one out of every five children or adolescents are going to struggle with a mental health problem in a given year.

Dr. Tim Clinton: That's a lot of families.

Dr. Matthew Stanford: That's enormous number of families. A really probably more disturbing statistic is that a majority of those children and adolescents with mental health problems will never receive any treatment. In the US today, the majority of people, adults or children, don't receive treatment. And that's pretty disturbing. I think one of the things people have to understand is that half of all chronic mental health conditions are in place by 14 years old.

Dr. Tim Clinton: That's worth repeating because people need to hear this.

Dr. Matthew Stanford: Half of all chronic mental health conditions, so conditions that are going to be troublesome for the duration of a person's life, they are in place by 14 years old and 75% by 24 years old. In the US today, the average period of time that goes by between the onset of symptoms and first treatment for the people who are lucky enough to get treatment is 11 years. It almost sounds like you're just making up numbers. I mean, try to imagine any other medical condition that you could wait 11 years to get treatment for.

We have children and adolescents out there struggling with depression, anxiety disorders, eating disorders, bipolar disorder. What are the problems in these families? We did a study a few years ago looking at specifically families in faith communities and what kind of issues they were struggling with. I think what you would expect would be on the top and that is significant financial problems, because mental health issues are expensive to get treatment for, because the reimbursements from insurance are much less generous than they are for physical illnesses.

And so, a lot of insurances just don't even cover mental health, so a lot of it comes out of pocket. You have significant financial struggles in these families. You have significant conflict and relational breakdown. You also then have a say, if we're dealing with a child or adolescent, a child or adolescent that has to be cared for more so than a child or adolescent who has more typical behaviors or mental health issues. You may have a family member that has to step out of the workplace to care for that child, to be present with that child, or homeschool that child.

And then you can add in academic issues. I mean, we're looking at pretty significant issues that really kind of begin to tear at the fabric of the family. And again, as you said, people outside of that, people who haven't experienced that don't fully appreciate kind of almost a bomb-like effect that these mental health problems have on the family. It's not just the child or adolescent we're talking about. It's the entire family.

Dr. Tim Clinton: These families go through a lot of emotion, Matt, inside the home because of all this effort and responsibility. And at the same time, they perceive they're being looked down upon or... You understand what I'm saying. "Here comes that family with that child."

Dr. Matthew Stanford: Right. Well, I would have to say that they're right. They are being looked down upon, and they're being judged and it's unfortunate. And I see it every day. People at the church don't know their backstory. They don't know necessarily what their child is struggling with or what they've gone through or what treatments they've done or not done, and they just assume it's some type of behavior problem. If they just parented him better or they spanked him more or whatever the cliché of the day is, things would be better. And if I'm being perfectly honest, I mean, churches are not receptive.

Churches are not prepared for things that go outside of a very rigid structure on Sunday morning. We have the service we have to get through and this hierarchy of things we have to do and nothing is going to affect that. A child shows up and that child is not displaying typical behaviors and we have a problem with that. We put the problem back on the parents. What I find is that families, they usually start out with something like they try to go to church and then the child acts out or the child is not received well. And then one parent will go and one parent will stay home.

And they'll do that for a while, which is exhausting in its own right, and then they can't even worship together as a family. And then ultimately, they drift away from the church altogether because most churches, unfortunately, they have very little to offer a family that has a child that has any type of disability or a mental health problem. Now, physical disabilities and even autism, which is a neurodevelopmental issue, churches are much more open and receptive to today. But what we have when we think of mental health problems, we think of more of like a hidden disability.

They're not quite as receptive and usually no thought is given to that until the family shows up. And that's far too late. I have a story just like you probably have a million of a family that showed up at a church and literally was met at the door with their child that was already kind of displaying some behavioral issues. And they literally told the family, "We don't have anything for you here. You should go to a different church." That was the first time they ever went there.

Jesus loves you and we have to be prepared to reach out to those that are most distressed, that are most broken, not just those that follow our kind of pattern of behavior.

Dr. Tim Clinton: Matt, my dad served for nearly 60 years as a pastor in Central Pennsylvania. We love the church. I know you love the church. We have a real burden to see mental health addressed within the church. This conversation isn't a beat down on the churches.

Dr. Matthew Stanford: Not at all.

Dr. Tim Clinton: This is a conversation that says, "Hey, let's open our doors and let's go in a new direction here." You're listening to Family Talk, a division of the James Dobson Family Institute. I'm Dr. Tim Clinton, your host, and our special guest today is Dr. Matthew Stanford. He is the author of the book, *Grace for the Children: Finding Hope in the Midst of Child and Adolescent Mental Illness*, and a fascinating conversation. Dr. Stanford, I want to come back to your story in your book about a mildly autistic child with ADHD named Charlie. He came to the church. He had behavioral problems in Sunday School.

I think he bit a Sunday School teacher. The children's minister saw behavioral problems as willful disobedience rather than a neurodevelopmental disorder. In other words, they didn't understand Charlie, and they weren't attuned to Charlie. Here we have a boy and a family who are trying to bring their child to church. They've got some issues, some challenges. How do we embrace them in our church community?

Dr. Matthew Stanford: Well, I think what we have to do as a body of believers, we have to have these conversations before individuals with children that have these issues ever show up. We have to be prepared to offer them something before they show up. Once Charlie's in the class and we're just going to try to treat him like every other child in the same structure and that he acts out, that's just not going work. I think what we have to do is we have to take these things into account in the context of our child and adolescent ministries that we have at churches.

We have to have training for our volunteers and our staff so that they understand these problems, that they know what they are and what they're not, and that they know some appropriate ways to respond and work with the children that have these issues. I think, secondly, we have to ask the parents, do your children have any type of mental health problem or neurodevelopmental problem?

List out issues and ask them that information, not to kind of somehow mark them, but so we can follow up and say, "Okay, well, you say that your child is on the autism spectrum. Well, tell us what works with your child? What doesn't work with your child? How can we make your child the most comfortable in this environment where we can minister them most effectively?" Now the parents have given you some tools to work with that child. And then I think we also have to think about specialized ministries on top of that.

What works really well in the context of children that have any type of a disability or mental health issue is usually a buddy system, where a child is assigned a buddy, and older high school adolescent or college age or even a young adult. Those people are given training. And then every week when Charlie comes, his buddy Jim is going to meet them there. The parents turn Charlie over to Jim, and Jim is there every week with Charlie and he goes to Sunday School with Charlie. If Charlie is struggling, then Jim might be the one that helps him or walks him out in the hallway or what.

Jim is always there and the parents don't have to worry. And that's a much more inclusive way to deal with issues like this than to say what's been done in the past, which again, I'm not negating this because it still can be effective, but a special class for children that have special needs where you kind of segregate them off. With a buddy system, you're able to not only train others to be involved in ministry, but you're able to keep those children in the mainstream ministries.

And then I think finally, what we have to do is we just have to let go of this kind of faults rigidity, this kind of structure that we have on Sunday morning, that what God cares about is getting through the service or the Sunday School. What God cares about is people. If Charlie comes and has a great time and his parents can have a break and they can hear the word, however that happens, that's what God cared about, not whether Charlie did exactly the way we've done Sunday School for the last 50 years of the Baptist Church or whatever.

What's important in God's economy are people and people are broken and desperate for him, and that's what we need to present to both Charlie and his parents.

Dr. Tim Clinton: Matt, I know in your book, *Grace for the Children*, you contend that all children are fearfully and wonderfully made in the image of God, even children who have special needs, challenges, issues. Our extra effort and that our attunement is really carrying out what is meaningful discipleship. Matt, you're talking about the children. We also have to see the family. I had a gentleman say this to me, Matt, "Dude, they have no idea. They don't have a clue to what we're going through as a family. They got all these nice little programs and everything's tidy.

But if anything upsets the apple cart there, and my family is going to upset the apple cart, it basically means we're not welcome at that church. Or in other words, we don't have a place for you to fit in." And I know, Matt, it takes extra effort. I know it may mean training some people in mentoring activities or doing some one-on-one work, but isn't that the work of the ministry here just for a moment?

Dr. Matthew Stanford: Absolutely. I mean, I'll tell you right now, if you're working at a church and this Sunday you run your church and everything just goes off without a hitch, it's time to expand your ministry. Because it's not about being comfortable, again, it's about people and people are a mess. We could talk about it in the context of the service. What happens when a homeless guy walks in and sits down in your front pew? I mean, what happens if a guy shows up and he's drunk? We don't want to just throw these people out. We want to draw these people in. I mean, that's the house of God.

I mean, in a sense, he's drawing them to us. If we can't care for a child who has a mental health problem and the family that's desperately trying to care for him, then I don't even sure we have the right to even call ourselves the church of Jesus Christ. Because I'll tell you right now, I think Jesus said something about keeping children away from him. It'd be better if you had a millstone put around your neck and thrown into the water. I mean, he was angry at his disciples just for trying to keep children from coming and sitting on his lap to get a blessing.

I mean, I can't imagine what God feels like when... You know that story I told you before, when someone tells a family, "There's nothing for you here," there's nothing for you here in the church? I mean, I almost laugh at this point because that's so... I mean, I could tell you stories, Tim. I put some in the book, but I

mean, you know them as well as I do. Churches that got restraining orders against families to keep their child out of the church because the child acts out.

I mean, I can't even fathom where the sympathy and the compassion went, because certainly that's not what Jesus would have done. I mean, any interaction with children is graceful and healing. I mean, we have to look beyond the structure we have on Sunday morning, and we have to start saying, "It's all about people and it's about kids." And as you said, these families are being torn apart.

One thing people don't understand is that the level of stress that these families go through, in stress research, when you want to find highly stressed populations to do research on how that stress affects their DNA and their brains and things like that, one of the populations that's used by stress researchers is they go in and get the mothers of children with disabilities because they are considered one of the most highly stressed populations in the world. And they literally find that it causes their chromosomes to come apart.

Their DNA is literally coming apart because of the level of stress. I mean, we're not just talking about a normal level of stress here. You had a bad day at work. We're talking a level of stress that literally is destroying your body.

Dr. Tim Clinton:

I can only imagine what kind of response we would get up on social media if we opened it up and said, "Hey, tell us about your experiences if you have a child who is struggling with an issue and the local church." Matt, you wrote in the book that 30 to 40% of those type of families have had a negative experience with their church and/or pastor. I know, again, not a beat down, just a recognition piece here that says, "Hey, here's something we need to address," because it's the ministry. It's what we do. We reach out. You bet.

We are the hands and feet of Christ, especially to these types of situations. Matt, let's close this way. I know we're out of time for today's program and we're going to have a lot of fun tomorrow, but the church, you say tends to be when they don't know what to do more disciplinary than accommodating, and they're often driven more by fear and ignorance than they are grace and wisdom. Close us in a positive way about how we can move in that direction.

Dr. Matthew Stanford:

Yeah, absolutely. I think if we just remember our foundation of our faith. I mean, it's faith. It's grace. It's love. It's forgiveness. Let's not worry about why a child is acting the way they are. Let's set up a structure in which we love them and show them grace, and let's work with the parent to understand them better. Because again, the gospel, the good news of Jesus is transformative to children and adolescents and adults across the board, whether they have a mental health problem or not.

We have an opportunity to really support this family in a very kind of tangible way, giving them a respite, and also loving their child in a way that many people

in the world simply will not. They'll push them aside. We need to be the place where they can go and really experience that unconditional love that God has given to each of us. And if we do that, we've worked as a transforming agent in their life and we really have, as you said, been the hands and feet of Jesus.

Dr. Tim Clinton: Yeah. You and I share a common dream and that is we want to see mental health ministries developed in and through the local church, people who are trained to understand, in other words, to recognize and maybe respond in an immediate way, kind of as a first line of defense, say first responder, and then to understand what it means to help these families, these individuals, these kids get the treatment that they need and more. Matt, I know you graciously agreed to join us again tomorrow.

I want to talk about that and some specific issues. To those who are listening, thanks for being a part of today's broadcast. Listen, call up your friends. If you know someone, a family that's struggling with mental health issues and their kids and people who love the Lord and they want to see them grow in their faith, they don't want to miss tomorrow's broadcast. Dr. Matt Stanford, thank you for joining us.

Dr. Matthew Stanford: Thanks for having me.

Roger Marsh: You've enlisted to our own Dr. Tim Clinton's conversation with Dr. Matt Stanford here on Family Talk, as they untangle the complicated relationship between childhood and adolescent mental illness and the church. I'm Roger Marsh. You want to make sure you catch part two of this intelligent conversation on the next edition of Family Talk. Now, to learn more about Dr. Matt Stanford, the Hope and Healing Center and Institute, and his new book, *Grace for the Children*, you'll find all that information and more at our broadcast page at drjamesdobson.org.

That web address once again is drjamesdobson.org/broadcast. And remember, you can always give us a call. We're here for you 24/7 to answer any questions you might have about Family Talk or the James Dobson Family Institute. Our phone number is 877-732-6825. Thanks again for listening to Family Talk today and be sure to join us again next time as Dr. Clinton and Dr. Stanford reveal mental health warning signs that parents can look for in their children. Also, what parents can do to help their kids navigate the uncharted path of today's youth.

You'll be encouraged and perhaps you will be of encouragement to someone else as well. That's coming up tomorrow on the next edition of Dr. James Dobson's Family Talk. I'm Roger Marsh. Thanks for listening.

Announcer: This has been a presentation of the Dr. James Dobson Family Institute.