

# GET EQUIPPED:

Responding to the growing  
mental health needs in our  
churches and communities.

Australian Institute of Family Counselling Report 2017



# About this Report

## Research Methodology

Australian Institute of Family Counselling (AIFC) commissioned a series of questions in the National Church Life Survey 'Leaders Survey' 2016. This survey was completed by ministry and pastoral staff of churches, and included 886 senior local church leaders who are staff from churches across Australia. The data represents leaders from 13 denominations and movements, which account for 89% of the estimated number of church leaders and 95% of weekly church attenders in Australia (not including Orthodox, independent or house churches or other small movements that are not well documented).

The 13 denominations have been combined into larger groups in the NCLS analysis which includes:

1. Catholic
2. Mainstream Protestant (Anglican, Lutheran, Presbyterian, Uniting Church)
3. Pentecostal (Australian Christian Churches, C3 Church, International Network of Churches, Christian Revival Crusade)
4. Other Protestant (Baptist, Churches of Christ, Christian Reformed, Salvation Army).

The data from the NCLS survey has been analysed alongside other relevant data sets and this report has been produced by Hello Clarity on behalf of AIFC.

AIFC ([www.aifc.com.au](http://www.aifc.com.au)) are the trusted leaders in Christian counselling education. AIFC is a leading, accredited, national education provider committed to the highest level of professional excellence. All of AIFC courses are bible based, taught by professionals, flexible in delivery options and are accredited with nationally recognised bodies.



# Pastoral Needs in the Local Church

## Spiritual, Mental, Physical & Relational Health

The spiritual, mental, physical and relational health of our communities is of the highest concern for church leaders. When church leaders were asked about the most common areas of need in their churches, after faith issues (57%), the greatest issues identified were around mental health issues (52%), physical health issues (50%) and bereavement (47%). This was followed by marital and partner relationship issues.

### Top 3 pastoral needs in the local Church

Percentage of senior church leaders identifying these as the current most prevalent pastoral needs in their church.



**57%**

Faith issues



**52%**

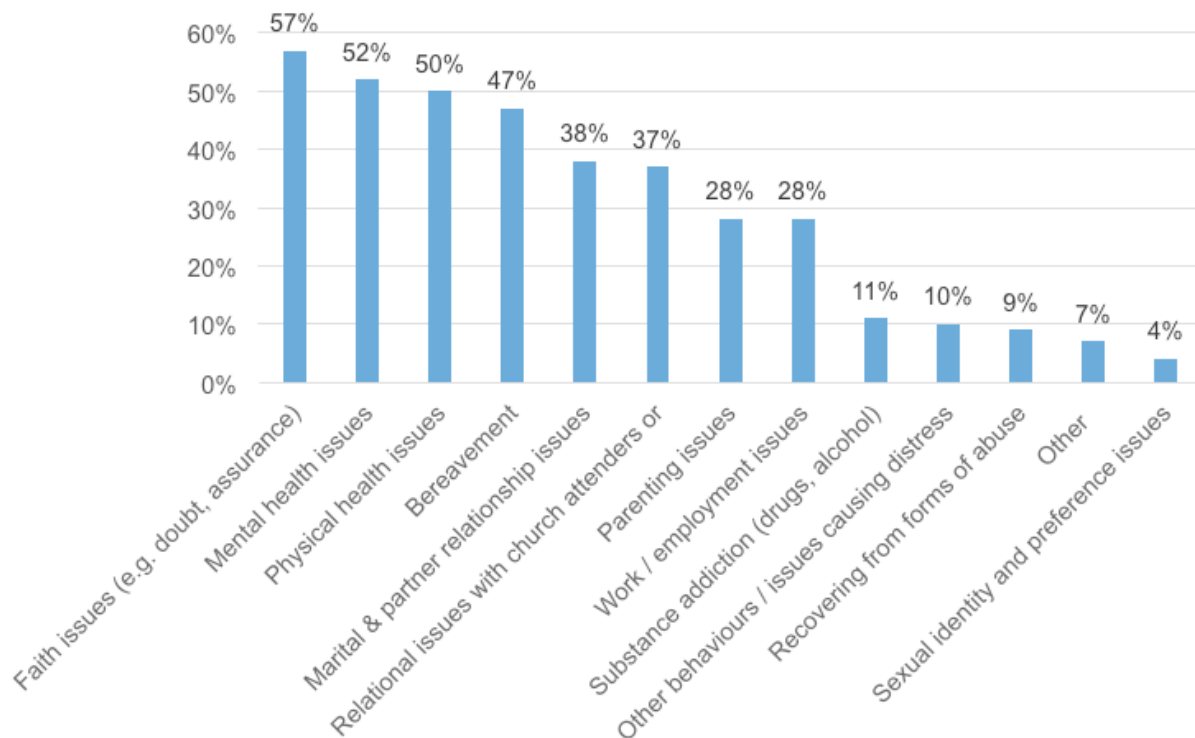
Mental health



**50%**

Physical health

### Most common areas of pastoral need in your congregation



# Pastoral Needs in the Local Church

## Denominational differences

Leaders from different denominations experienced varying areas of need. Whilst those in Pentecostal churches rated mental health (64%) and marital and partner relationship issues (63%) as significantly higher areas of pastoral need than other denominations (Mainstream Protestant rated mental health at 52%; Catholic at 29%), they experienced less need around bereavement issues (12% for Pentecostal leaders compared with 62% for Catholic leaders and 63% for Mainstream Protestant leaders).

This could be contributed to a range of factors, including a younger median age of a church attender in Pentecostal churches – there is a greater proportion of children and young people and a smaller ratio of attenders in the older age groups, where more bereavement is experienced. Female leaders were also more likely than their male counterparts to rate mental health issues highly (63% versus 50%).

## Spiritual health in Australia: Snapshot

As church leaders, a primary area of focus is on the spiritual health and faith development of their congregations. Issues of faith were recognised as a common area of need for 57% of church leaders.

The context of spirituality and faith in Australia is a shifting landscape. According to NCLS, whilst in 1950, 44% of Australians were regular church attenders, it is estimated that 15% of Australians now attend church at least once per month. Furthermore, whilst over half of Australians (52.1%) identified as “Christian” on the latest 2016 ABS Census, this has declined from 61.1% in the Census five years prior.

The category that has seen significant growth over the decades has been numbers of Australians identifying as “not religious”, with 30.1% responding in this way (compared to 12.9% in 1991). A further 9.6% chose not to answer the religion question on the Census, suggesting some level of possible disengagement or apathy with religion on the whole. Other religions in Australia make up the remaining 8.7% of the population (2.6% Islam, 2.4% Buddhism and all other religions comprising 3.2%).

NCLS research shows that 3 in 10 Australians have active spiritual lives, praying or meditating at least once a week, and that a quarter report having had some kind of mystical or supernatural experience (NCLS, 2016). However there has been a shift towards increased secularisation in our society, with regular church attendance having declined over the decades, and also other indicators of engagement with the church lessening. For example, whilst the majority of weddings and funerals were conducted by ministers of religion in the past, 74% of weddings and 58% of funerals are now conducted by civil celebrants (ABS). This shows that whilst many Australians engaged with the church at these key life markers in the past, it is becoming less common to do so.

# Growing Needs in the Local community

When church leaders were asked to identify the fastest growing areas of need within their local communities, similar themes emerged. Mental health issues were the highest rating (66%), followed by marital and partner relationship issues (50%), parenting issues (42%), followed by work and employment issues (39%).

## Top 3 fastest growing needs in the community

Percentage of church leaders identifying these as the fastest growing areas of need in the community.



**66%**

Mental health



**50%**

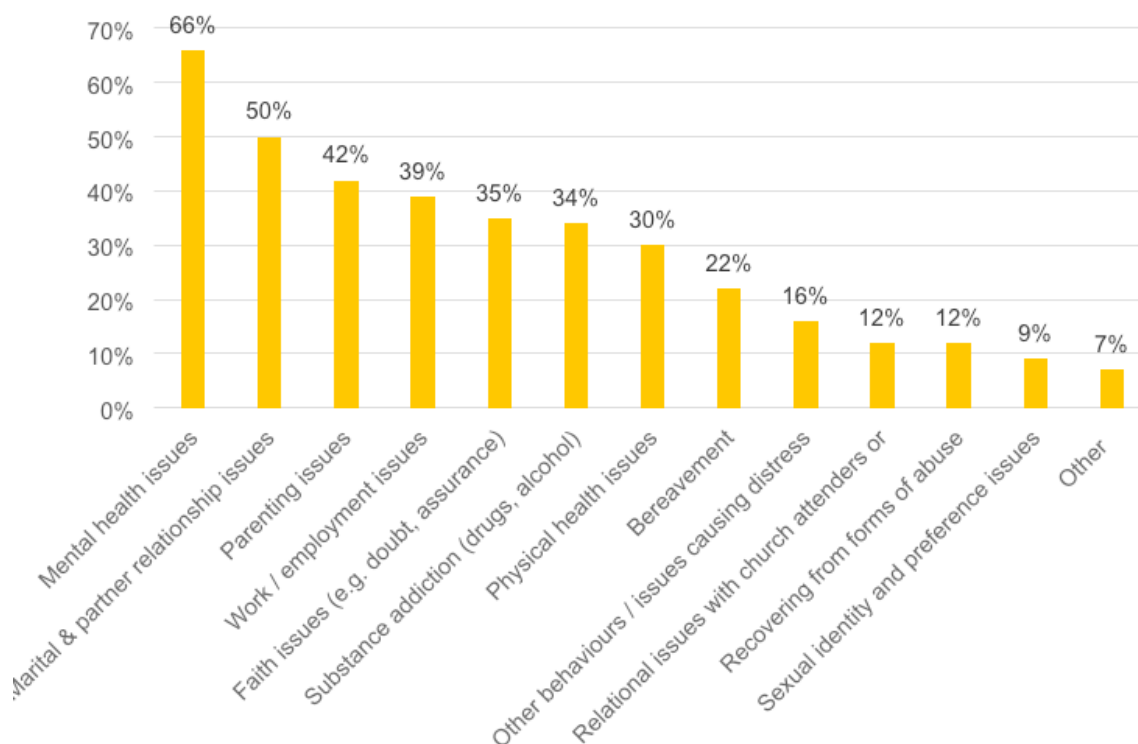
Marital/partner



**40%**

Parenting issues

## What are the fastest growing areas of need within your local community?



# Growing Needs in the Local community

## Generational perspectives

The age of the senior leader played a significant role in identifying areas of growing need in the local community. Older senior leaders (70+ years) rated faith issues (60%) and bereavement (46%) significantly higher than younger church leaders, such as 18-39 year olds who rated these issues at 14% and 28% respectively. Mental health (68%) and substance addiction (44%) on the other hand were rated very highly by 18-39 year olds, compared with 56% and 12% respectively for leaders aged 70+.

Equipping emerging leaders with skills to effectively respond to these needs will be of increased importance. The youngest leader group also rated parenting most highly (52% compared with the average of 42%), not surprising since they lie in the age bracket of young families.

## The Training Gap

With the rapid acceleration of mental health needs, among other needs in our communities, church leaders feel that their teams are not adequately trained or equipped in a number of pertinent areas.

When church leaders were asked to identify the issues that their pastoral team were least equipped and trained to effectively respond to, the top issues were:

1. Sexual identity issues (63%)
2. Substance addiction (59%)
3. Mental health issues (52%)
4. Recovering from abuse (51%)
5. Other issues causing distress (40%).

**The top 3 issues leaders report being least equipped and trained to effectively respond to:**



**63%**

sexual identity



**59%**

substance addiction



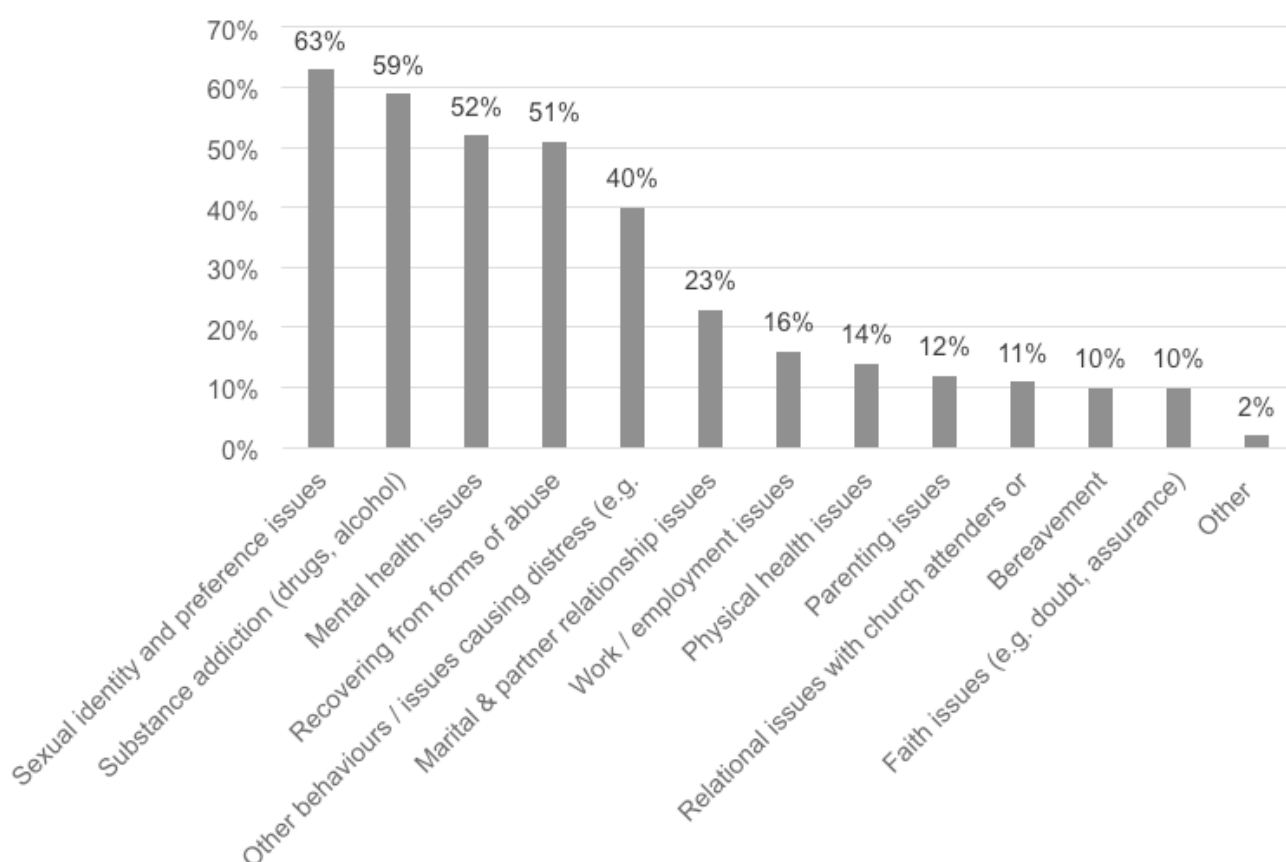
**52%**

mental health

# Growing Needs in the Local community

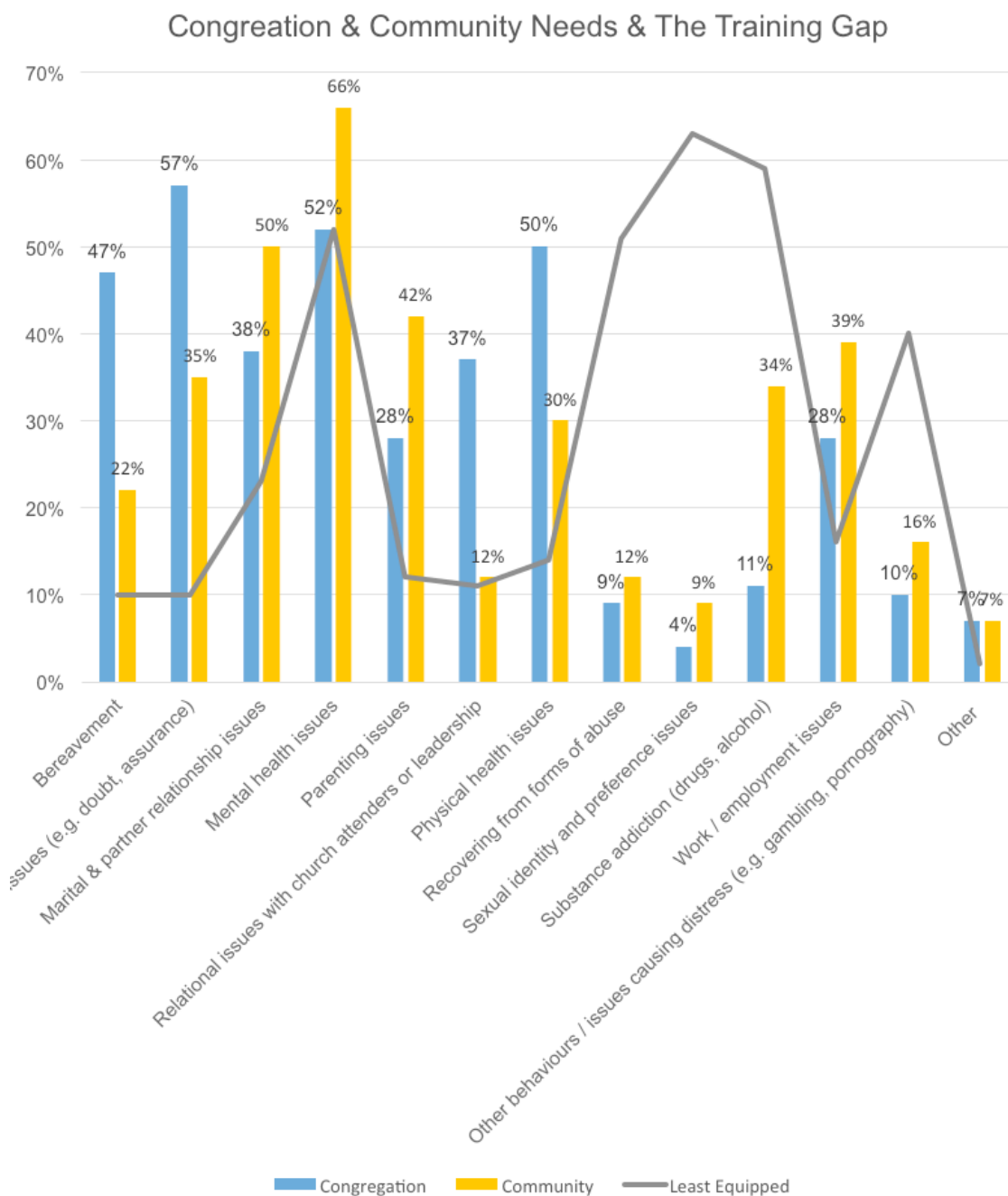
## The Training Gap (continued)

Identify the issues that your pastoral team are LEAST equipped and trained to effectively respond to:



# The Big Picture: Church, Community & Training Needs

When considering the overlay of the growing needs within churches, in the wider community, and how well equipped church leaders believe their pastoral teams are to respond, some clear priority areas emerge.





# The Big Picture: Church, Community & Training Needs

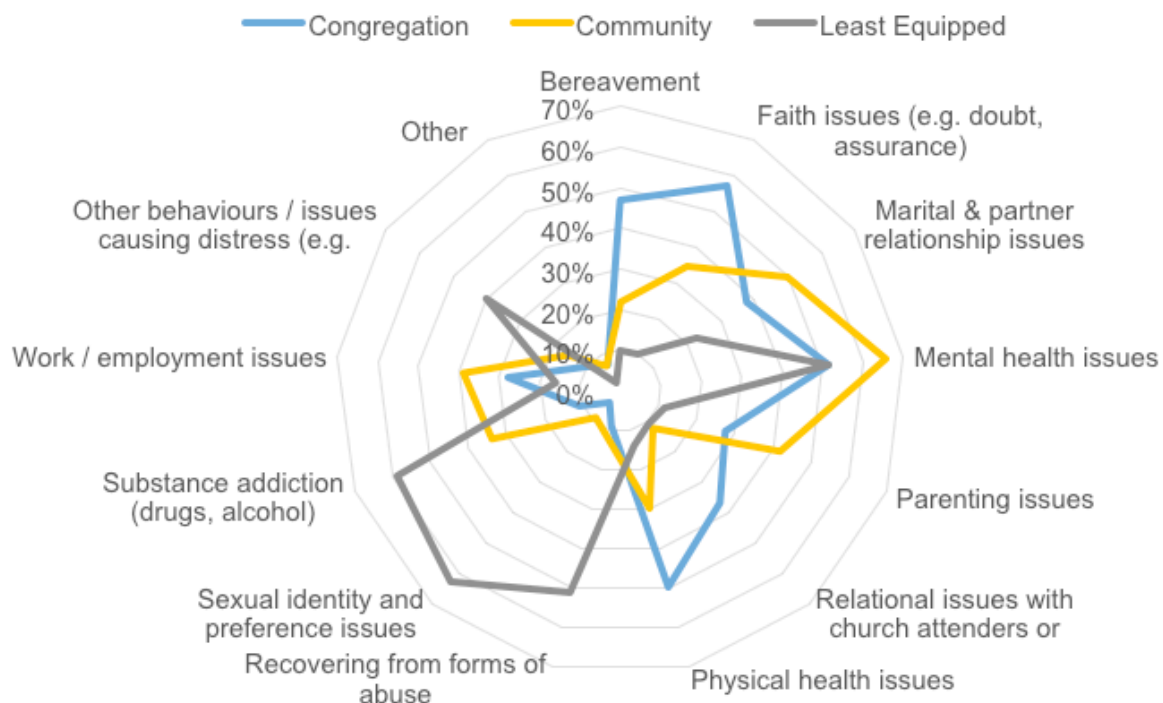
## Most significant priority & training gap

The pastoral area of need which is consistently high across the needs of those in the congregation and the wider community surrounds the topic of mental health issues. Furthermore, church leaders also identify a significant gap in how well their teams are to respond to this issue.

Whilst faith issues are seen as a considerable area of pastoral need when responding to those within the church, there was not a significant training gap identified in this area, with just 10% stating there was a training gap for their pastoral teams. Whilst leaders believe their teams are not well equipped to respond to issues around sexual identity and preference, this need was seen to be far less common than other needs. The largest priority and training gap is therefore around the mental health issues.

These pastoral priorities and training gaps can also be seen visually here:

## Pastoral Priorities & The Training Gap



# Spiritual health in Australia: Snapshot

## 1 in 5

Australians experience a mental or behavioural condition — nearly 4 million people



It is widely recognised that mental health is an area of growing concern across the nation. This is of particular concern amongst the emerging generations. Over the last three years, the number of Australians experiencing a mental or behavioural condition has increased by over 1 million people – with over 4 million Australians (17.5%) now reporting this. Anxiety related problems and mood (affective) disorders are the most commonly experienced for both males and females (ABS).

While more than 1 in 10 (11.7%) of Australians aged over 18 report that they experience high or very high psychological distress, this is most pronounced amongst younger Australians, rising to 15.4% of those aged 18-24. Females are more likely to experience these high or very high levels of psychological distress, impacting 13.5% of females, and 1 in 5 females (20%) aged 18-24 (ABS). According to the Mission Australia Youth Report, the issues of greatest concern for young Australians are coping with stress, school or study problems, body image and depression (Mission Australia).

Greater complexity occurs for those with a co-existing mental and behavioural condition. Over 1 in 8 (13.3%) experience a co-existing mental health condition with two or more physical conditions. These Australians face further challenges, as they are also more likely to be unemployed, live in a lone person household and have a lower educational attainment level, compared with those who just experience physical health conditions (ABS).

Children are also experiencing mental health challenges, with 1 in 7 children and adolescents aged 4-17 experiencing a mental disorder. Attention Deficit Hyperactivity Disorder (ADHD) was the most common mental disorder for these young people (7.4%),

## Spiritual health in Australia: Snapshot (continued)

followed by anxiety disorders (6.9%), major depressive disorders (2.8%) and conduct disorders (2.1%) (AIHW, 2016, p2).

Rates of depression, suicidal thoughts and self-harm are concerning, with on average one in ten teenagers reporting that they have engaged in self harm and nearly one in five girls aged 16-17 years meeting the criteria for clinical depression. ABS data also shows intentional self-harm consistently rates highly as a leading cause of death in Australia, ranked number 13 in 2010 and 13 again in 2015. Males are also three times more likely than females to take their own life than females. With a median age of death by self-harm being 44.5 years, it statistically rates as the form of death with the highest impact when considering Years of Potential Life Lost. (ABS 3303.0).

The Australian Burden of Disease study (2011) examined the impact of diseases, conditions and injuries on Australians. Mental and substance use disorders was the third largest burden, being responsible for 12.1% of total diseases, and following 'cancer' and 'cardiovascular diseases'.

The Mental Health of Children and Adolescents' report makes note of the vital effort of the broader community plays, alongside the government and health services, in responding to the needs of those suffering from mental health problems, particularly children and young people. In responding to the growing burden of mental illnesses, much weight is falling on GPs, psychologists, counsellors and others who work in related areas, including ministers and pastors.

Over the 2014-2015 year, there were an estimated 17.6 million mental health related GP encounters (AIHW, p.5). Church leaders across all age groups identified mental health as one of the fastest growing needs in their local community (72% of leaders aged 40-49 years; 63% aged 50-59 years; 65% aged 60-69 years and 56% aged 70+). Female church leaders were even more likely to report the priority of mental health as a pastoral need in their community.

Churches will continue to play a vital role in the community around this issue, and leaders and their teams could greatly benefit from adequate and appropriate training in effectively responding to these issues.

# Bridging the Gap: Formal Training Needs

The complexity around these growing issues, and the speed at which these areas of pastoral need both within the church congregations and within the wider community have developed highlighted a prominent need for increased formal education and training.

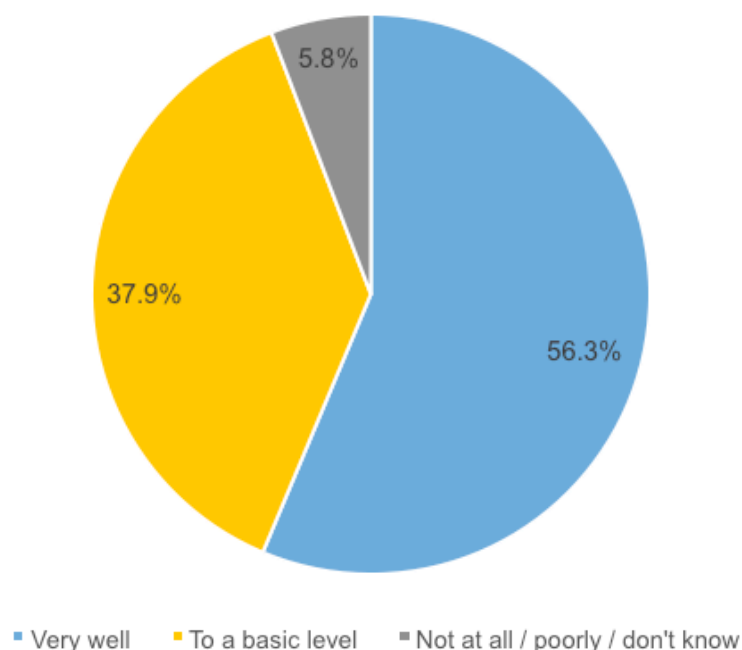
## Pastoral teams training gap

To help bridge this gap, leaders identified that it would be beneficial for their pastoral team to be equipped through formal counselling training (53% extremely or very beneficial, 34% somewhat beneficial). Female leaders were more likely to view formal counselling training as beneficial, with 62% of female leaders noting its benefits. There is a likely correlation here with statistics discussed previously, as female leaders were also more likely to rate mental health as a common pastoral need in the church than their male counterparts, suggesting that caring better for those with mental health issues is a prominent need in the church.

## Senior leaders training gap

As well as the need for their teams to be formally equipped, many senior leaders recognised that they themselves felt inadequately trained and equipped for ministry. 44% of senior leaders acknowledged that they were only equipped “to a basic level” or below when it came to responding to the pastoral needs they are faced with.

To what extent do you feel adequately trained and equipped for pastoral care and counselling?

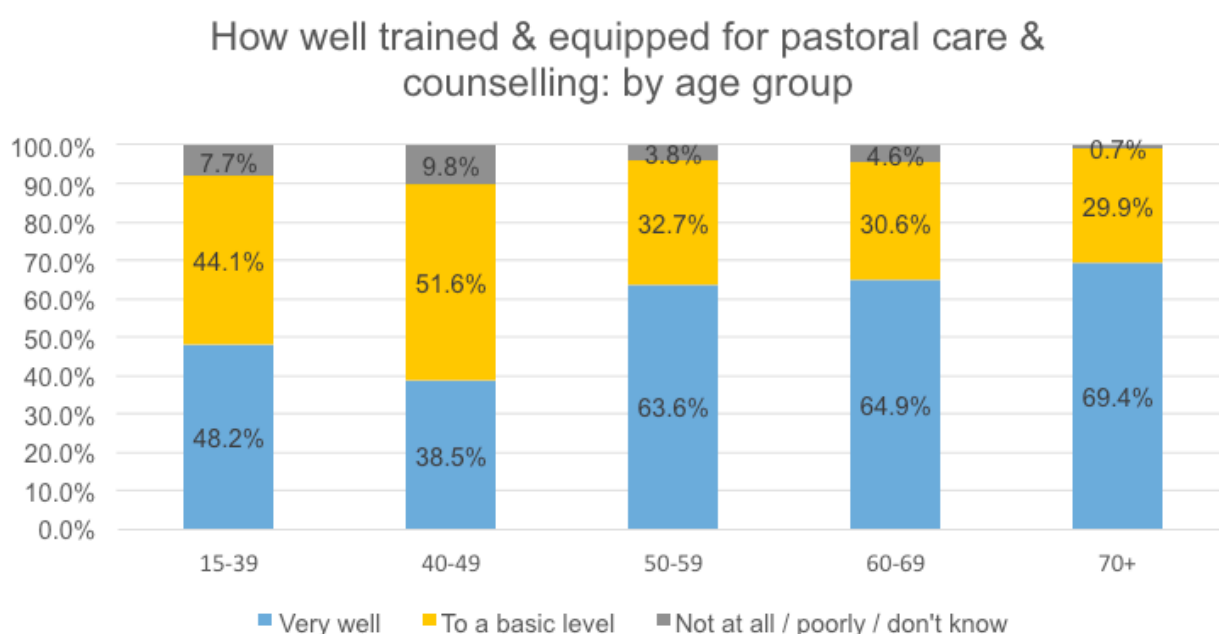




# Bridging the Gap: Formal Training Needs (continued)

## Equipping emerging leaders

Considering the rise in complex issues that leaders see rising in their congregations and wider communities, there is an evident need for further training to equip church leaders to respond to these issues. There was an even greater training gap for emerging leaders, with younger leaders less likely to feel well equipped (only 43% under 50, compared with 65% of those over 50).

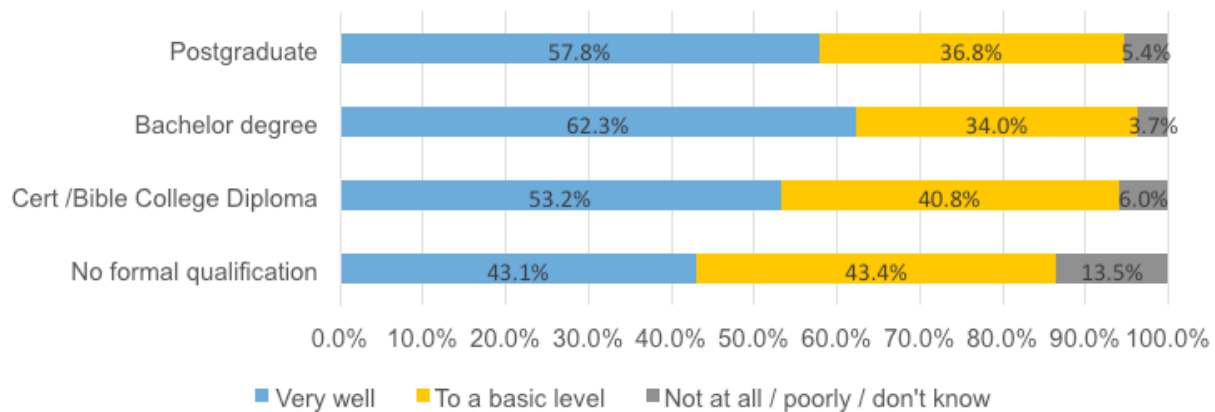


## Benefits of formal education

Those with higher levels of theological education were more likely to feel equipped for pastoral care and counselling. Nonetheless, a large proportion of leaders with theological qualifications only rated themselves equipped for pastoral care to a 'basic level' or below, with 42% of leaders with postgraduate theological training, 38% with bachelor degrees and 47% with a diploma level qualification categorising themselves this way. It is clearly evident that church leaders are recognising a need for increased training, equipping and upskilling to respond more effectively to the growing areas of pastoral need in their churches and local communities.

# Bridging the Gap: Formal Training Needs (continued)

To what extent do you feel adequately trained and equipped for pastoral care and counselling? By theological education:



## Benefits of formal education

Analysis of the NCLS data from church leaders, alongside other relevant national data sets paints a compelling picture. Church leaders have recognised areas of growing concern in both their local churches and also wider community. Mental health has been recognised as an area of significant increased prominence and also where church leaders feel that they themselves, and their pastoral teams lack adequate skills in responding to. The need for upskilling and further training of church leaders and pastoral teams, particularly in these core identified areas is essential, so that they can effectively minister and respond to the growing needs of people in our communities.

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