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Editorial

Sustaining family and mental health in contemporary societies underscores the point that there is a troubling storm within families. To sustain a healthy family, there must be a healthy family. There is something to sustain. Studies have shown that unresolved challenges in families inevitably lead to stress and mental health issues. They analyse how unstable families lose their social and health balance, whose consequences snowball into individual, family, and societal life. Based on the challenges that confront the family, this volume devotes itself to exploring the causes, dimensions, challenges, effects, and potential panaceas to the increasing ill-health in families across different spaces.

Sajo opens this volume with a critical evaluation of how mental health could be sustained in families in contemporary times. He argues that family mental health is integral to societal well-being. Contemporary pressures demand that families actively cultivate resilience, supportive relationships, and adaptive coping mechanisms. Policymakers, religious organisations, and health institutions must partner with families to reduce stigma, provide resources, and foster environments where families thrive.

The second article by Harold examines the critical intersection between psychology and evangelicalism, drawing biblical normativity and theological resources to establish the place of Christ in the redemptive work. He avers that evangelicalism and psychology are becoming increasingly relevant and effective in helping counselees grow both spiritually and emotionally by acknowledging their Christian values and assisting them in understanding their emotional pain and social issues. The paper offers counsellors and psychologists a Christian worldview rooted in the Evangelical tradition, serving as a framework to support and guide counselees

when they bring religious experiences and concerns into therapy and counselling. Following this is Ayokunle's article, which argues that there is a connection between migration and mental health. For Ayokunle, as humans migrate from place to place, they either encounter health issues in their host communities or carry health challenges. Thus, migrants should have access to information about their health status and the places they migrate to.

On their own, Gire and Oladapo explore the complexities of family mental health and well-being in contemporary society. They argue that despite the scientific and technological advances the world has made, along with all its challenges, biblical principles remain relevant to addressing them. The vagaries of contemporary life are the subject of biblical contemplation. Audu and his colleagues conducted an empirical study to investigate the correlation between poverty and family mental health in Ayingba, central Nigeria. They argue that poverty results in social stigma, which in turn causes mental ill-health. They submit that addressing the viscerogenic needs of the family is a catalyst for sustaining family health. Irewole and Femi-Bamidele further develop this argument by asserting that the effects of poverty on a family cannot be overstated. They conclude that addressing poverty in families will lead to a healthy family life in all ramifications.

Onuchukwu argues that choosing the right marriage partner is fundamental to achieving and sustaining family mental health. A wrong spouse, he argues, would instigate stress and problems that would undermine a family's mental health. He therefore suggests that emotions and physical attractions are not the fundamental values for choosing a spouse; spiritual guidance would be needed to complement them. Bolaji and Balogun argue for the place of children in mainstreaming mental health in a family. They believe that godly children are critical assets to family mental health; thus, guiding them properly and biblically will help them to perform their designated roles in the family. Agboifo further explores the place of

children in the family and their correlation with mental health. Since dysfunctional families could produce unadjusted children, he recommends that the services of pastoral caregivers are crucial in turning the tide around. Closely knitted to Agboifo's view is Babalola's, who vigorously argued that pastoral care and counselling are all too important to maintain and sustain family mental health. Pastoral intervention in stressed families can help restore trust and love, and heal the entire family, he submitted. Ibrahim also follows this trajectory of pastoral care-giving as indispensable to addressing family challenges. He highlighted the causes of family mental health challenges and suggested that bible-based pastoral counselling can serve as a worthy intervention. Oyewole also argued along this line that family health challenges can be addressed through informed pastoral care-giving in addition to other socially approved measures. For Rhodolf, the nexus between family system theory and its implications for mental health and well-being within the Ghanaian socio-cultural context cannot be overemphasised. He advocated for a family-centred, contextually grounded approach, calling for integrated pastoral and psychosocial frameworks that reinforce family systems, mitigate stigma, and promote sustainable mental health interventions within Ghanaian society.

These articles explored critical areas of family mental health and proffer intellectual, spiritual, and practical solutions that can mitigate the challenges. While welcoming you to savour these interesting articulations of ideas, it is essential to acknowledge that the contributors are responsible for the accuracy of the ideas in their articles.

Benson O. Igboin
Editor-in-Chief

CONTEMPORARY ROLES OF PASTORAL CARE AND COUNSELLING IN SUSTAINING POSITIVE FAMILY MENTAL HEALTH

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Abstract

Contemporary family life is without doubt facing a lot of mental health challenges arising from causative factors such as lack of physical touch, sexual deprivation, lack of effective communication, financial insufficiency and impropriety, emotional disaffection, spiritual incapability, and social detachment. Major concepts such as Pastoral care and counselling, healthy family life and mental health would be examined. The role of pastoral care and counselling in sustaining positive mental health, such as the organisation of family enrichment programmes, premarital and post-marital Counselling Intervention, healthy self-esteem enhancement techniques, and Rational-Emotive therapeutic techniques, among others, would be explained. The dangers of inability to sustain mental health, such as technical divorce, lack of effective communication, verbal warfare, lack of trust, adverse reactions, spiritual inertia, and carefree attitude, would be discussed. Having considered this study from various standpoints, personal observation, review of literature, and interviews, the writer can conclude that pastoral care and counselling play a vital role in sustaining positive mental health in contemporary family life.

Introduction

Well-adjusted couples who can face challenges emanating from physical, emotional, social, psychological, aesthetic, and cognitive aspects of family environment would surely be able to handle some mental health challenges plaguing our contemporary family. This implies that whatever can be put in place to ensure mental health is

maintained or sustained within a family must be done. This is because when mental health is sustained in the family, couples learn to handle minor crises successfully and major losses as well. The couples would not be afraid to express emotions freely, face frustrations openly, and admit and discuss their struggles or problems honestly (Collins, 2007:482).

To produce well-adjusted couples who can confront the mental health challenges in the family, the role of pastoral care and counselling cannot be overemphasised. With the effective use of pastoral care and counselling techniques, whether mainly biblical, secular or a combination of both, counselling techniques are therefore of vital importance to enhance mental health in the family, with the resultant effect of averting the dangers of mental health challenges in contemporary family life.

Concept of Mental Health

Mental health is a state of well-being that enables people to cope with the stresses of life, realise their abilities, learn well, work well, and contribute to their communities. (<https://www.who.int.mentalhealth>). Thus, mental health is psychological well-being comprising accepting oneself, having good mastery of the environment, having good relationships with others, the ability to engage in independent, rational thinking, living a healthy, purposeful, and meaningful life, coupled with personal positive growth and development. If the above explanations are well observed, it can be inferred that mental health concerns a person's cognitive, behavioural, and emotional well-being (Healthline Media, 2025). Thus, mental health affects many aspects of our lives, such as: how humans react to stressful conditions, respond to environmental conditions, react and being affected by bad experiences of the past, engage in friendliness or otherwise with others, make choices out of many alternatives or options, respond to the behaviors of others, maintain or sustain ongoing wellness, sustain ongoing happiness, maintain healthy relationship with other,

and feel or make meaning out of life.

The mental health challenges or problems, on the other hand, are a state of inability to maintain cognitive behavioral and emotional wellbeing, which has the following symptoms, itemized by Healthline Media (2025) as follows: Aggressiveness, anger, and irritability; changes in mood or energy levels; changes in appetite or sleeping habits; difficulty in focusing; feeling restless or “on edge”; a high consumption of alcohol, inappropriate use of drugs; participating in risky activities; feeling sad, hopeless, numb, or emotionally flat, having aches, pains or other physical symptoms without a clear cause; obsessive or compulsive thoughts or behaviors, thinking or acting in a way that causes concern to others or harms work, social or family life; and thinking about or attempting suicide. These symptoms should be observed very early so that counselling intervention can be sought, which may often lead to referral for further medical attention when the occasion demands.

Causative Factors for Mental Health Challenges in the Family

Factors such as stress, depression, and anxiety could interplay to cause mental health problems in the family. On a more specific level, however, the causative factors militating against mental health challenges in the family are examined below;

Lack of Physical Touch: This is a situation in which couples are physically detached from each other, either by sleeping in different rooms or by hugging, kissing, and holding each other becoming a thing of the past. There are situations in which physical contact with legs, hands, and other parts of the body does not elicit emotional feelings. In such a situation, the anxiety and worry would set in to destabilise the mental health of either of the couples.

Sexual Deprivation: Sex is one of the significant gifts that God gave to humanity, it is not a dirty affair, as we are products of sex. Ignorance of the subject matter has made many people go into

predicaments and sufferings (Dogara 2014:11). Sexual deprivation results in deprivation of immediate gratification or pleasure, which is part of the joy of marriage, or future unpalatable consequences, such as post menopause sickness in females and prostate problems in males. Both the immediate and later consequences can result in mental health problems.

Lack of Effective Communication: Spouses may not be willing to listen to each other or ready to speak to each other. It could be further explained as a situation in which a spouse always reads negative meanings into whatever the other partner says, leading to misunderstandings and incessant altercations between them. The result of all these is that either or both couples become worrisome, as the future of the marital relationship becomes unpredictable. This, in turn, leads to mental health problems in the family.

Financial insufficiency and impropriety: Financial insufficiency and financial impropriety are twin factors that can ruin a healthy relationship in the family. A situation in which the husband is financially incapable of taking care of the family and the woman resorts to unhealthy measures to fend for herself may lead to a lack of trust, confidence, and, consequently, a lack of love on the part of the husband. Financial impropriety or mismanagement on the part of either spouse can also lead to the same results. These unhealthy relationships can affect either or both spouses' mental health negatively.

Emotional Disaffection: Disaffection sets in when couples lack feelings for each other. They are thus emotionally detached. Instead of an intimate relationship, the only thing they have in common is the romantic connection; take this away, and there is nothing left between them (Adefolaju, 2006:61). The effect of this emotional detachment is a lack of concern for each other, which undoubtedly leads to mental health problems in the family.

Spiritual Dwarfness/Incapacity: Low or Lack of spiritual growth or development leads one to live a wayward and ungodly life. Such persons scarcely adhere to the dictate of the spirit nor bear the fruits of the spirit, which include love, joy, peace, longsuffering, gentleness, goodness, faith, meekness, and temperance (Galatians 5:22-23), nor will they be able to live and walk in the spirit: not desirous of vain glory, provoking one another, envying one another. On the contrary, they manifest the works of the flesh (Galatians 5:19-21). Thus, in the family where either or both couples' spiritual lives are nothing to write home about, there is bound to be a manifestation of works of the flesh and absence of the fruits of the spirit. The result is disagreement, lack of trust, strife, loss of confidence in one another, anxiety and thus mental health problems.

Social Detachment: The purpose of marriage is to meet man's need for companionship (Adams 1983:20). Therefore, social detachment is characterised by couples' lack of staying together, discussing and socialising together, travelling together and preferring to stay with neighbours or friends rather than spouses. Thus, the family is characterised by unhealthy antisocial relationships resulting in worry, fear, anxiety and moodiness, which may later result in mental health problems.

Congenital abnormality: There are hereditary factors, inherited traits one can get from his parents, such as moodiness, aggressiveness, extroverted behaviour, and introverted behaviour. If the spouse has the opposite of such traits, there may be a problem in the family. Further still, some congenital abnormalities may be a result of infection or complications right from the womb, which continue to manifest after marriage and after giving birth to the first child. This may bring great concern, worry and anxiety to the spouse, thus leading to mental health challenges.

Environmental Influence: The environment in which one is born and lives has a great impact on one's character and ways of life. The

type of environmentally learned behaviour depends on the environment and the people one mingles with. It is possible that a spouse who grew up in a ghetto or who lived with wayward peers would have learned some maladjusted behaviours. During courtship, some of a spouse's maladjusted behaviours might not be noticed because of the magnitude of love (Love is blind) expressed to each other at that time. But later, after marriage, the spouse continues to exhibit this antisocial behaviour to the disappointment of the marriage partner. The persistence of this antisocial or maladjusted behaviour may cause the marriage partner to develop worry and anxiety, which automatically leads to a mental health problem.

Dangers of Inability to Sustain Mental Health in Contemporary Family Life

A family with sustained mental health will surely be peaceful, blissful, fruitful, full of joy, and characterised by superb interpersonal relationships. Whereas a lack of sustenance of mental health in the family will undoubtedly lead to the following:

Technical Divorce: lack of sustenance of mental health in the family will cause the couples to live under technical divorce with its resultant physical, emotional, verbal, sexual, financial, social, and spiritual detachments caused by betrayal of trust, personal pain from the past abuse, public disgrace of spouse, ungodly addiction, uncaring attitude in critical situations, communication breakdown and lack of sexual fulfilment (Ayankeye 2015:30-32). Therefore, when mental health challenges are present in the family, there is a possibility of the presence of technical divorce: a situation where couples are living together but are not relating to each other the way couples are expected to relate with each other at home.

Lack of Effective Communications: Couples living together with mental health problems are associated with a lack of effective communication. It is either that the couples always misunderstand

each other, or that they deliberately do not want to talk to each other. Further still, couples are not open to each other but hide or keep some of what they consider secrets from each other. These attitudes may lead to a communication gap within the family, with its associated untoward consequences on the sustainability of mental health.

Verbal Warfare: This is also referred to as a family altercation. With little provocation or misunderstanding, a couple flare up at his spouse. If the other spouse cannot endure the provocative or annoying utterances of his/her partner, verbal warfare may escalate into physical combat. Thus, a Christian family that is supposed to be known for peace and tranquillity becomes a place of incessant verbal and physical warfare, thereby losing its status as an exemplary reference.

Lack of Trust: A family suffering from mental health challenges is usually associated with mistrust or lack of trust between the couple and the entire family. This is because family exerts the most enduring influence on the child's personality (Onyejiaku, 1991:227). In a family with mental health challenges, there will be a state of disorder without due recognition of the authority at home resulting from a lack of trust and leading to a state of anarchy.

Negative Reactions: Mental health problems often lead to negative reactions at home because parents and children not seem to agree. This is contrary to the submission of Christian Scholars: “that in the Christian family, both parents should be united and cooperate in the disciplining of their children” (Ayandokun 2019:77). Where parents are found wanting in the cooperative discipline of their children, negative reactions result. It is abnormal for a father to be seen as the only authority figure or disciplinarian in the family. (Ayandokun 2019:77). A situation where one spouse is pampering the children while the other is exercising disciplinary measures always leads to an altercation and negative reactions.

Spiritual Inertia: Families suffering from mental health problems will surely subscribe to the values of this world. Things of the spirit will become difficult for them to practice because of the self-denial and self-control that it involves. No wonder it was said that any problem of inability to discipline the flesh must be decisively dealt with if one desires a victorious life. (Omotayo 2001). This is because the flesh refers to human nature and its weakness, the most significant of which is the desire for indulgence. In addition, the flesh opposes the spirit of God (Galatians 5:17). As a result of mental health challenges, the inability to practice spiritual exercises, discipline, and self-control, spiritual inertia (lack of spiritual growth) occurs.

Care-free Attitude: The Bible records that “ if anyone does not provide for his relatives and especially for his immediate family, he has denied his faith and is worse than any unbeliever (I Timothy 5:8) (Lasisi, 2022:22). A situation where one couple does not care for the other is unscriptural. But unfortunately, a mental health problem resulting in incessant maladjusted behaviour may cause the other spouse to neglect or feel unconcerned, especially when he observes the other spouse is acting out of a mental health problem. The result is that a carefree attitude would creep into the family and disrupt the state of unity, oneness, peaceful coexistence, and the joy of belonging to one family.

Divorce: Another danger of inability to sustain mental health in the family is permanent divorce, which God hates (Malachi 2:6) but permitted only on the grounds of sexual immorality (Matthew 19:9). Divorce is not a new social phenomenon; it has always constituted the primary source of family collapse and thus has attracted much attention (Adeyanju and Ajedokun in Oloyede, Areo, AjedokunAyanyinka 2023:445). Thus, the issue of mental health challenges, which could result in either technical or permanent

divorce, should be faced squarely and a solution proffered before it results in divorce.

Role of Pastoral Care and Counselling

Pastoral care and counselling is a ministerial professional course that involves mentoring, shepherding, discipline, and, at the same time, resolving areas of conflict that have not been hitherto resolved through the professional service of a change specialist called a pastoral counsellor. Since counselling covers academic, career, and personal–social areas as noted by Oladele (1990:8), pastoral care and counselling could play a vital role in sustaining mental health in a contemporary family life by offering the following services.

Organisation of Family Enrichment Programmes: Mental health, which, in the strictest sense, is a good measure of peaceful co-existence in the family, has been adversely affected by many factors noted earlier, resulting in various aspects of family crises. In order to enhance and sustain mental health in the family, family enrichment programmes should be organised by a pastoral counsellor. These marriage or family enrichment programmes consist of seminar talks, symposia, group discussions, tutorials, workshops, and a time for interaction when participants can raise issues that need further clarification (Olagunju, in Emiola, Nihinlola 2023:440). This type of programme, when specially prepared to promote mental health, will go a long way to sustain mental health in the family.

Pre-marital and Post-Marital Counselling: Marriage has been defined as the union of a man and a woman as husband and wife, which serves as the foundation for homes and families (Jonah and Nenge, 2020:254). Thus, if marriage were to perform the above functions very effectively, proper and sound counselling should be organised before and after the marriage ceremony to put the marriage

on the proper footing. This will help prevent divorce, which has replaced death as the end of marriage. Pre-marital and post-marital counselling related to mental health should cover topics such as how to live a healthy life, how to make marriage successful, balancing marital responsibilities with spirituality, promoting mental health in the family, and how to make marriage work. It is apparent that if this method is judiciously employed, the family's mental health will be sustained.

Healthy Self-Esteem Enhancement Technique: Self-esteem is how we value and perceive ourselves. It is based on our opinions and beliefs about ourselves (<http://www.mind.org.uk>). It refers to a person's overall sense of their value or worth. (positivepsychology.com, 23rd May, 2018). From the above, we can look at self-esteem from two perspectives, viz, Low Self-esteem, which is characterised by not thinking much of yourself, criticising yourself, blaming yourself, focusing on your own weakness, feeling unable to assert yourself, apologising a lot, feeling self-conscious, being eager to please, and feeling you do not deserve treats. Thus, a person with low self-esteem has low self-worth and may have difficulty making decisions, while a person with healthy self-esteem has confidence in their ability and value. Thus, the compliment he receives after the presentation boosts his self-esteem. Thus in a family where mental health is the result of how self-esteem of a spouse, self-esteem enhancement techniques such commendation, applause for success achieved, prize/gift, praise rather than condemnation, appreciation rather than verbal disapproval, saying sorry when mistake is committed (Proverbs 15:1), eulogizing rather than singing songs of abuse (I Samuel 18:7) complement rather than competition in the family, praise and not mockery; Giving kudos rather than contempt and if possible deliver a panegyric, a speech of praise. These will help enhance the self-esteem of the spouse and any family member with low self-esteem, and help sustain those with

healthy self-esteem. Through this, the family's mental health will be enhanced.

Rational Emotive Therapeutic Technique: There are some solutions to mental health problems in the family that would require introducing logic and reason in the process of counselling. Introducing logic and reason into the counselling process therefore, necessitates the use of Rational Emotive Therapy. Going by Ellis 1977 in (Makinde 1983:111) the goal of this counselling approach is to demonstrate to the clients (members of the family) that the way they perceive their situation is the source of their emotional disturbance (which in this case is the mental health challenges) and also to bring into focus the illogical and irrational ideas to help him to re-adjust his thinking rationally and logically. In this case, let the affected couple or child realise that their mental health problem is a result of illogical ideas or thoughts about their spouse. For instance, a spouse may nurse the negative thought that, judging from the way her wife dresses, she was committing adultery, having a concubine in her place of work. The husband should be made to realise that as long as he maintains the irrational thought, the problem will persist. Thus, the counsellor would encourage the concerned spouse to change his irrational, unfounded thought and embrace a rational one. This approach, coupled with other counselling techniques, if properly implemented, will help resolve the problem of evil thought, unnecessary suspicion, anxiety, and worry that escalate mental health challenges in a contemporary Family life. We should therefore follow the example of our God, who has always thought of good and not evil towards us (Jeremiah 29:11).

Promotion of Christian Virtues Mentality: It was asserted that the act of violence, divorce and technical separation are not options for settling issues in unhealthy homes because it is against God's original design for marriage, according to Malachi 2:16, Luke 16:18, Mark 10:11-12 (Olaosebikan&Okewande 2023:483). Therefore, whatever means the Pastoral counsellor could use to inculcate Christian ethics that promote mental health in the family should be employed. Thus, teaching and the provision of information and materials (visual and

audio-visual) that could inculcate Christian virtues in our homes should be employed.

Stress Coping Mechanism: The essential function of family counselling is to assist family members in coping with stress, as established by Oyedele (2012:9-12). Stress is a form of Psychological and mental discomfort associated with emotional strain and pressure. The major causes of stress are pressure, changes in life, worry, overwhelming responsibilities, lack of control over a given situation, being discriminated against, hate, abuse, undergoing uncertainty, primary and/or secondary infertility and others. As stress is one of the causes of mental health challenges, Christian counsellors should use various stress-coping mechanisms such as meditation on the word of God, Association with godly and cheerful friends engaging in good exercises and deep breathing, reducing or rejecting additional responsibilities and letting go of worry.

Conclusion

This paper focused on the role of Pastoral care and counselling in sustaining mental health in contemporary family life. The author established that, for mental health to be sustained in the family, well-adjusted couples are the answer, and to produce well-adjusted couples and children, the role of Pastoral care and counselling cannot be over-emphasised.

Having established the meaning of mental health to be a state of cognitive, behavioural and emotional well-being, the author examines some of the causative factors of mental health challenges in the family to include lack of physical touch, sexual deprivation, lack of effective communication, financial insufficiency and impropriety, emotional disaffection, spiritual incapacity (dwarfness), social detachment, congenital abnormality and environmental influence. The dangers that are associated with the family that is unable to sustain mental health were also discussed, such as technical divorce,

lack of effective communication, lack of trust, adverse reactions, spiritual inertia, permanent divorce and state of lawlessness.

The paper discussed ways in which Pastoral care and counselling interventions could help sustain mental health in the family. That is, the organisation of family enrichment programmes such as seminar talks, symposia, group discussions, workshops, refresher courses, etc. Pre-marital and post-marital counselling methods were also discussed, focusing on what could promote mental health in the family. Healthy self-esteem enhancement techniques include praise, verbal applause, saying sorry when the occasion demands, giving commendation, prizes and gifts, praise music, and eulogising. Rational Emotive therapy was also discussed as a means of exterminating irrational thought that could lead to anxiety, stress and worry, with resultant effect of mental health problems in the family. It is clear that if the aforementioned pastoral counselling roles are applied, mental health would be sustained, and the family would enjoy unity, progress, cooperation, peace, harmony, joy, good interpersonal relationships, and mutual help or assistance. It can therefore be concluded that Pastoral care counselling plays a vital role in sustaining mental health in contemporary family life.

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