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# HOPE AND HEALING

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**A Pastoral Letter from the Bishops of California  
on Caring for those who Suffer from Mental Illness  
Addressed to All Catholics and People of Goodwill**

A Study and Discussion Guide

## **Introduction:**

This document is a summary of “Hope and Healing”, a pastoral letter that The Bishops of California released in May 2018. This document is not exhaustive of the letter’s original content. Instead, this is designed to be a guide that facilitates a general understanding and discussion about the Church’s teachings and approach towards providing compassionate care to all of those affected by mental illness.

This guide will discretely break down the six core sections of the pastoral letter. Each section contains a handful of summarizing points and questions to consider in response. This document can be used for personal reflection or to help guide small group discussions that promote a sense of community surrounding these challenging themes.

In each section, you will also find a “Discussion Guide” with pertinent concepts to consider in response to the questions. Finally, the document concludes with a list of resources available to those suffering from mental illness, their loved ones, or anyone who wishes to learn more about these important topics.

*“Just as Christ never abandons anyone, so also the Church never abandons those who suffer from mental illness” – Hope and Healing*

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## Section I

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Christ calls us to attend to those who suffer from mental illness and provide hope and healing.

### Summary

- Jesus Christ's public life was a ministry of hope and healing and, as followers of Christ, we are all called to provide hope and healing to others.
  - "So his fame spread throughout all Syria, and they brought him all the sick, those afflicted with various disease and pains, demoniacs, epileptics and paralytics, and he healed them" (Mt 4:24)
- No illness or condition, mental or otherwise, can diminish a person's dignity.
  - "I have a dogmatic certainty: God is in every person's life. God is in everyone's life. Even if the life of a person has been a disaster, even if it is destroyed by vices, drugs or anything else- God is in this person's life. You can, you must try to seek God in every human life. Although the life of a person is a land full of thorns and weeds, there is always a space in which the good seed can grow. You have to trust God." – Pope Francis
  - "Whoever suffers mental illness always bears God's image and likeness and has an inalienable right to be considered a person and treated as such" – Saint Pope John Paul II
- Those struggling with mental illness often suffer in silence. This is, in part, due to the isolating nature of their disease and, in other part, due to unjust social stigmatization.

### Questions

1. What is your understanding of human dignity?
2. In your encounters with those who suffer from mental illness, have you observed ways that they are treated with less dignity than others?
3. How does the isolation and silent suffering experienced by individuals with mental illness impact the individual and their loved ones?
4. How can local parishes better cultivate understanding and respect of human dignity?

### Discussion Guide

On Human Dignity:

- Human dignity refers to a person's intrinsic worth - a value of all people, which they are born with as human beings who are made in the image and likeness of God.
- Because it comes from God, human dignity is not something that we can bestow, or take away from another person. It is intrinsic to our existence.
- Human life is sacred and must be protected and cared for, as God intended.
- Economics, politics, law, policy and social institutions may promote or work to diminish human dignity. A healthy society can be achieved only when human rights and responsibilities are met.
- "Amen, amen, I say to you, no slave is greater than his master nor any messenger greater than the one who sent him" (John 13:16)

**Psalms, Chapter 8:**

For the leader: “upon the gittith.” A psalm of David.

O LORD, our Lord, how awesome is your name through all the earth! I will sing of your  
majesty above the heavens

with the mouths of babes and infants. You have established a bulwark against your foes,  
to silence enemy and avenger.

When I see your heavens, the work of your fingers, the moon and stars that you set in  
place—

What is man that you are mindful of him, and a son of man that you care for him?

Yet you have made him little less than a god, crowned him with glory and honor.

You have given him rule over the works of your hands, put all things at his feet:

All sheep and oxen, even the beasts of the field,

The birds of the air, the fish of the sea, and whatever swims the paths of the seas.

O LORD, our Lord, how awesome is your name through all the earth!

*Further reading on the topic of human dignity can be found here [1]: <http://www.usccb.org/beliefs-and-teachings/what-we-believe/catholic-social-teaching/themes-of-catholic-social-teaching.cfm>*

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## Section II

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The scope and burden of mental illness in our society is enormous.

### Summary

- Statistics on Mental Illness [2]:
  - 1 in 5 American adults suffered from mental illness in the past year.
  - 1 in 25 American adults (approximately 10 million people) have a mental illness that is severe enough to impair their daily functioning.
  - 1 in 5 adolescents have currently, or previously had, a debilitating mental disorder.
  - Mental, neurological and substance use disorders are the leading cause of disability in the U.S.
  - Rates of depression and anxiety are increasing more rapidly in adolescents than other age groups.
  - Drug overdose is now the leading cause of death for Americans under the age of 50, with the number of deaths from opioids quadrupling since 1999.
- Deaths of Despair [3]:
  - Deaths due to suicide, drug overdose or alcohol-related illnesses are sweeping the country at epidemic levels. These deaths are collectively referred to as “Deaths of Despair”.
  - Addictions often coincide with other mental illness such as schizophrenia and mood disorders. They also disproportionately affect those who have suffered abuse, neglect, overwhelming loneliness or heartbreaking loss. Treatment of addictions must address not just substance use, but also the many other psychosocial struggles faced by this population.
  - Finding a solution to these problems will not be simple or straight-forward. The Christian desire for justice and love of neighbor is imperative as we work to collectively find a solution.
- Loneliness [4]:
  - America is also facing an epidemic of profound loneliness. Over forty percent of Americans feel that their relationships are not meaningful. Approximately twenty percent of Americans say they have no one in their life they can talk to during challenging times.
  - Things that contribute to this sense of loneliness include: the breakdown of families, the fragmentation of social life, growing tendency to compartmentalize our lives, and increasing isolation allowed by technological advancements.
  - The Church and her followers can help by supporting family life and early childhood development, evangelization and outreach to those on the peripheries – especially those who are single, widowed, divorced or socially marginalized.

### Questions

On loneliness:

1. Have you ever felt lonely? What did it feel like and what was happening in your life that made you feel this way?
2. What factors do you think are contributing to people, by and large, feeling so lonely?
3. How might you and/or the Church best reach out to marginalized populations?

On addictions:

1. Do you know someone struggling with addiction? What do you think that experience has been like for them and their loved ones?
2. What life circumstances may drive someone to addiction? Why is this an important consideration when creating a treatment plan?
3. What is the role of the Church and/or the laity in the healing process of those who struggle with addiction?
4. Is there a way the Church can partner with local organizations to better aid those who suffer from addiction?

## Discussion Guide

On loneliness:

- Consider how divorce, hesitance to marriage and having children out of wedlock all contribute to fluidity and instability in the home. These struggles often result in profound suffering for the adults and children involved - leaving everyone vulnerable to feelings of loneliness, isolation, insecurity and anguish.
- Technology has the ability to bring people together who otherwise may not have been connected. Unfortunately, it can also draw people apart who are already together. Increasingly, people are compelled to check their technological devices regularly, for social media updates or sharing, email or work-related responsibilities, or to browse the internet. While all of these things may have their time and place in our lives, they now occupy a disproportionate amount of Americans' time and attention.

*Recently, Cigna Health Insurance investigated the scope and extent of loneliness in America. Summarized results, revealing that this is a problem of epidemic proportions, can be found here [4]: <https://www.cigna.com/newsroom/news-releases/2018/new-cigna-study-reveals-loneliness-at-epidemic-levels-in-america>*

On addictions:

- Those who struggle with mental illness often turn to drugs of abuse, as a way to cope with the immense suffering they experience. For this reason, a large percentage of those who suffer from mental illness such as schizophrenia, depression or bipolar disorder, often, also struggle with addiction. Additionally, drugs of abuse also become a way to cope for those who have experienced immensely painful or challenging life experiences – such as neglect, abuse, overwhelming loneliness or immeasurable loss.

### **Saint Mark Ji Tianxiang**

Saint Mark Ji Tianxiang used opium to treat a severe stomach ailment, and he soon became addicted to the drug. After repeated failure to give up the drug, Ji abstained from receiving the Eucharist for 30 years, while continuing to practice the faith, even amidst persecution.

During the Boxer Rebellion at the beginning of the 20th century, Ji and his family were martyred. Chinese nationalists known as the Boxers, or the Militia United in Righteousness, expelled missionaries and persecuted Christians across China. Thirty-two thousand Chinese Christians and 200 foreign missionaries were killed. Ji requested to be beheaded last in his family so as not to leave any of his loved ones alone during their death.

“He gives hope in the most important way for addicts – even though you are struggling with some addictive behavior, your dignity as a human person is still intact and you are destined for greatness,” Dr. Gregory Bottaro, executive director of the Catholic Psych Institute, told CNA.

“I think the story is a beautiful testimony to the goodness and complexity of the human heart. His struggles can give great hope to people who are suffering,” Dr. Bottaro said. “The interesting paradox here is that he did not recover from his addiction, but he did recover from separation from God.”

He noted that those who struggle from addiction “[do] not have the same kind of freedom to avoid the addictive behavior,” and therefore their actions cannot be judged in the same way. “However, there is a point at which the faculty of freedom is active,” he said, adding that this freedom could manifest itself in someone reaching out for help from friends, family or a 12-step program such as Narcotics Anonymous. “This is where we need to support and educate people who are suffering this way. Judging the actions of an addict as a personal moral failing does not support the addict when they are superficially directed only at the addictive behavior.”

*This excerpt is borrowed from catholicnewsagency.com [5]*

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## Section III

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Those suffering mental illness should not be stigmatized or judged.

### Summary

- Mental illness is not a sign of insufficient faith or weakness of will. It can affect anyone at any time.
  - As a result of original sin, we are all vulnerable to temptation, pain, sorrow and other such isolating processes. These emotions are often also experienced by those struggling with mental illness.
- There is no shame in receiving a diagnosis of a psychiatric disorder. The Church and its members must educate our communities, to help reduce stigma and unjust prejudice that accompanies mental illness.
- Catholics should be the first to display witness to the truth of human dignity, to live in love and solidarity with our neighbor. This is especially important when considering our interactions with those affected by mental illness.
- Suffering is ultimately a mystery and we do not fully understand why we suffer
  - Catholic life does not promise a life free from suffering or affliction, but the Church offers us hope and spiritual strength to endure whatever suffering God permits. Not all afflictions can be avoided and not all illnesses can be cured.
  - We are always capable of being healed spiritually and filled with God's sanctifying grace.

### Questions

1. Evangelical Pastor Rick Warren, who lost a son to suicide, said "Your chemistry is not your character" and "Your illness is not your identity." What does this mean to you?
2. What are some ways that you see mental illness stigmatized in your life? Have you, yourself, ever stigmatized the mentally ill? How? What are some ways to combat this?
3. How does our society interpret and react to a diagnosis of a medical illness (i.e. cancer or a broken bone) compared to a mental illness (i.e. depression or schizophrenia)?
4. How might stigma and biases towards mental illness impact not just those suffering from mental illness, but also their loved ones who are working hard to care for them?
5. What are some ways that your local parish can combat the stigma of mental illness?

### Discussion Guide

On our shared humanity and weakness:

- Remember that to suffer from a psychiatric disorder is not a sign of insufficient faith or weakness of will. Each of us is a "vessel of clay" (2 Cor 4:7), fragile in body and mind. Yet each of us is still loved by God, our Father, always capable of being healed spiritually and filled with God's sanctifying grace

### **Saint Benedict Joseph Labre**

Born in France in the eighteenth century, St. Benedict Joseph Labre was the eldest of 18 children. He studied under his uncle, a parish priest. He began to display behavior consistent with psychosis and was unable to complete adequate academic preparation for the priesthood. At age 16 he became a pilgrim, traveling from shrine to shrine, living off alms, and wearing the rags of a beggar. He was turned away from many religious communities due to his mental illness. With time, he discerned that his vocation was to be a wayfarer and befriend other homeless individuals in the city of Rome. He was filled with the love of God and neighbor; he spent hours kneeling on the sidewalk in prayer and greeting passerby with a blessing. Despite being turned away by many religious communities earlier on, through his life's work and witness of God's love, he found a very special place in the hearts of many Romans [6]. "He may have had only half a mind, but he gave it completely to God" – Fr. Benedict Groeschel

In contemporary society, a man displaying Benedict's behavior would likely face much stigmatization: being ostracized and potentially institutionalized. The eighteenth-century Romans, however, recognized that Benedict was far more than just his illness and was living witness of God's love. Benedict had much to offer the people and the Church. Through discernment, faith and persistence he was able to build a life of meaning and purpose beyond his mental health diagnosis.

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## Section IV

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The Church, health care professionals and scientific researchers should work together to improve mental health care.

### Summary

- The Church's pastoral care, resources and charitable works of mercy can and should be utilized in the goal to improve mental health care.
- Christ can be a source of hope, strength and healing for those who struggle with mental illness and/or addiction.
  - "This disease [depression] is often accompanied by an existential and spiritual crisis that leads to an inability to perceive the meaning of life" – St. Pope John Paul II
- All Christians can help those suffering rediscover their self-esteem, confidence in their own abilities, interest in the future, and the desire to live. In stretching out a hand to the sick, we help them perceive the tenderness of God, and bring them into a community of acceptance, support, understanding and love.
- The goal should be to build bridges between science, health care and pastoral care, to create a "both-and" rather than an "either-or" approach to psychological and spiritual healing.
- Our model of healing is always Jesus Christ – the divine physician – who, with great tenderness, compassion and solicitude, draws close to us and binds up our wounds. Like Christ, we are called to tend to the whole person- body, mind and spirit.

### Questions

1. Discuss the difference between a "both-and" and an "either-or" approach to psychological and spiritual healing? Do you think you, or others around you, have fallen victim to an "either-or" way of thinking?
2. What is your understanding of the Church's view of medicine and medicine's view of the Church? Are the views of each towards each other always correct?
3. What role can the Church play in healing the mentally ill? Consider, in particular, how your local parish can reach individuals or pair with community organizations to aid those in need.
4. Do you believe that a strong spiritual life can prevent mental illness?

### Discussion Guide

On the relationship between medicine, science and spirituality, and how the Church can help heal those who are suffering:

- The Catholic faith and good science, that recognizes the dignity of people, are never at odds. Catholics are welcome to make use of medical treatments to help those with mental illness, such as medications, psychotherapy and other medical interventions. Conversely, those struggling in any way, especially from mental illness, are encouraged to make use of the spiritual care, prayer, sacraments and healing love of the Church.
- There have been many advances in science and medicine, but these alone cannot provide solutions to the problems posed by mental illness such as: Why am I here? What is the purpose of my life? Why have I suffered this loss? and Why is God allowing this terrible illness? In order

to fully heal, these questions cannot be ignored or stifled. In this way, the Church and medicine must work together to treat the individual as a whole person. Approaching these problems as just a medical issue, or just a spiritual issue, will not provide the person with the extent of healing that they need.

- There is a deep connection between body and soul: what affects one has a profound effect on the other

On how a strong spiritual life alone, cannot prevent mental illness:

- We know a strong spiritual life alone, cannot prevent mental illness, but strong faith can reduce the risk of mental health problems, and assist in recovery when mental illness is present.
- There are well-documented health benefits of prayer, meditation, religious worship, active participation in faith-based communities, and cultivating Christian virtues like gratitude and forgiveness [7].
- Evidence shows that there is a protective effect of religious participation, especially religious service attendance, on health. Religious participation has been shown to decrease rates of depression and suicide and improve the rates of cancer survival and subjective well-being [7].

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## Section V

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We must meet and attend to those in need, where they are.

### Summary

- Meeting people where they are often requires that we move beyond our comfort zone and familiarity. It is often too easy to hide behind the doors of our parishes.
- Christians should seek to create a ministry of presence and accompaniment - to seek out and engage those who suffer wherever they are found. This requires that we are seeing, hearing and understanding the experiences of those who suffer.
- Our communities and parishes should not be places of rejection or judgement. They should be places of refuge and healing for those who are the most misunderstood, ignored and unjustly stigmatized.
- Ministries of the Church should both promote prevention and model healthy families. We should strengthen our focus on supporting families, and healthy child development, while also attending to those who are single, widowed, divorced or alone.
- Those who are on the path to healing, or who have healed, should in turn be resources for their struggling neighbors.
- Catholics have a duty to engage in efforts to find a more humane and equitable solution regarding mass incarceration. Prisons are now the nation's largest mental health care facilities. Up to twenty-five percent of incarcerated individuals today, struggle with serious mental illness (compared to a rate of five percent in the general population) [8].
- Clergy need to remain close to the daily problems of ordinary people, to be available to them, and always ready to assist. "The shepherds need to smell like the sheep" – Pope Francis.
- We must work to create a "culture of encounter", meaning that we no longer hurry past people without noticing them or recognizing their struggles. Although we do not have the answers to others' problems and are not able to cure them, small acts of love, compassion and understanding can be precisely what people need most.

### Questions

1. What are some ways the Church and the community can promote healthy family and child development?
2. What are some "acts of love" you can display to those who are suffering?
3. Outreach efforts on the part of the clergy and laity may be hindered by a fear of interacting with those who have mental illness. Are these fears justified? How might you work to overcome such fears?
4. Was there ever a time when you felt uncomfortable reaching out to someone? How did you respond?

### Discussion Guide

On "acts of love":

- Compassion, understanding and acts of love can be demonstrated through small gestures, such as, active listening and praying with those who suffer. Some parishes now have teaching teams available to train people how to pray with others. It can make a great difference when we move from praying for someone, to praying with them. Just because you may not be a trained health

care professional, or spiritual leader, you are not ill-equipped to help those suffering from mental illness, and can still be a great source of support and healing through simple acts like these.

On concerns about outreach and safety:

- It is important to recognize that the fear elicited in response to individuals struggling from mental illness can make it harder to acknowledge the common humanity we share. Recall how St. Benedict Joseph Labre was turned away from many religious communities due to his mental illness.
- God’s grace heals and overcomes our fears. This is exemplified in Jesus’ words to his disciples “Peace I leave with you; my peace I give to you” (John 14:27).

### **St. Dymphna**

Saint Dymphna was born in seventh century Ireland to a pagan father and devout Christian mother. As a teenager she consecrated herself to Christ and took a vow of chastity. Shortly after this, her mother died and her father slipped into a state of mental instability. Her father was determined to remarry a woman as beautiful as his wife and, eventually, focused on marrying his daughter, Dymphna. To uphold her vows, Dymphna fled the city and took refuge in the town of Geel. There, Dymphna built a hospital for the poor and sick. Unfortunately, because she spent a lot of her fortune to build this hospital, her father was able to trace her whereabouts. Her father and his team of men arrived to bring her back to Ireland. She refused to return with them- so her father drew his sword and decapitated her, and her accompanying confessor, Father Gerebernus. The people of Geel buried them in a nearby cave and then built a Church in her honor. Soon after, pilgrims needing treatment for their mental ailments filled the city. The demand was so high that the Church was expanded and people of the town began welcoming those afflicted into their homes – a tradition that continues to this day. Many miracles have been reported at the shrine that stands over her original burial site. Dymphna is the patroness of those suffering nervous and mental afflictions [9].

Despite her own fear and suffering, St. Dymphna remained true to her vows and committed her life to serving those who suffered. Her life can teach Catholics much about the importance of displaying “acts of love” and having courage to aid a vulnerable population. Her witness to God’s love and compassion was so strong that the townspeople of Geel, even after her violent death, felt compelled to continue her good deeds.

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## Section VI

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Those impacted by suicide need our compassionate response.

### Summary

- Suicide statistics [10]:
  - There are more than 42,000 deaths by suicide each year in the United States.
  - Suicide is the second leading cause of death amongst adolescents and young adults.
  - Suicide is the tenth leading cause of death overall in the US.
  - Death by suicide is often associated with severe mental illnesses, such as major depression, schizophrenia or bipolar illness.
- Mental illness can impair a person's capacity to reason clearly. It can adversely impact sound judgment, such that a person suffering in this way is liable to do things that, when not sick, he or she would never consider.
- The Church teaches that suicide is contrary to the will of God, but the Church also recognizes that "Grave psychological disturbances, anguish, or a grave fear of hardship, suffering, or torture can diminish the responsibility of the one committing suicide." – The Catechism of the Catholic Church, 2282 [11]
- By ways known to God alone, those who have taken their own lives may still achieve eternal salvation, as God can provide the opportunity for salutary repentance. For this reason, the Church prays for persons who have taken their own lives.
- Behind each of the 42,000 deaths by suicide, is a network of family and friends left behind.
  - Those left behind are often afflicted with grief, as well as feelings of guilt, shame, confusion and/or anger.
  - Those suffering in this way need particular care and attention, for a considerable period of time, and too often feel alone and misunderstood.
  - Catholics should not be afraid to open this difficult conversation. Healing happens slowly, and we should be willing to walk the long road with suicide survivors and those left behind.
- Those who have lost a loved one to homelessness or imprisonment, as a result of severe mental illness, also suffer greatly.

### Questions

1. Do you know someone who has committed suicide? What thoughts or feelings were associated with this?
2. How does it feel to encounter a friend or family member who is suffering after a loved one committed suicide? How can you help them?
3. How can the local parish better aid those who have been impacted by suicide? Are there any community organizations that may be helpful to partner with?

## Discussion Guide

On Suicide:

*From the Catechism of the Catholic Church [11]-*

- “2280 - Everyone is responsible for his life before God who has given it to him. It is God who remains the sovereign Master of life. We are obliged to accept life gratefully and preserve it for his honor and the salvation of our souls. We are stewards, not owners, of the life God has entrusted to us. It is not ours to dispose of.

2281 - Suicide contradicts the natural inclination of the human being to preserve and perpetuate his life. It is gravely contrary to the just love of self. It likewise offends love of neighbor because it unjustly breaks the ties of solidarity with family, nation, and other human societies to which we continue to have obligations. Suicide is contrary to love for the living God.

2282 - If suicide is committed with the intention of setting an example, especially to the young, it also takes on the gravity of scandal. Voluntary co-operation in suicide is contrary to the moral law.

Grave psychological disturbances, anguish, or grave fear of hardship, suffering, or torture can diminish the responsibility of the one committing suicide.

2283 - We should not despair of the eternal salvation of persons who have taken their own lives. By ways known to him alone, God can provide the opportunity for salutary repentance. The Church prays for persons who have taken their own lives.”

On ways to help those who have lost a loved one to suicide:

- Catholics can cultivate a sense of support, compassion and love of neighbor through their commitment to unconditional friendship. Unconditional friendship can take many forms, such as active listening and starting a difficult conversation despite personal discomfort. Additionally, those who have lost a loved one to suicide may benefit from engagement in sensitive pastoral care.
  - “I have told you this so that my joy may be in you and your joy may be complete. This is my commandment: love one another as I love you” (John 15:11-12).

**St. Thérèse de Lisieux**  
"Little Flower"

Thérèse was born in France in the late nineteenth century. At the age of 15 she joined the cloistered community of Carmelite nuns in Lisieux, Normandy (despite many religious leaders' apprehension due to her young age). Her spiritual life was characterized by small daily sacrifices such as eating what was given to her without complaining (and, consequently, often receiving the worse leftovers) and forgoing argument when she was wrongly accused [12].

At the age of 23 she developed tuberculosis and suffered incredible pain. During her slow death, she also suffered a dark night of the soul but remained determined to keep faith as her foundation. Amidst her incredible pain and anguish, she contemplated suicide. Just a week before her death she told a fellow Carmelite, "Yes! What a grace it is to have faith! If I had not any faith, I would have committed suicide without an instant's hesitation" [13]. She ultimately died from Tuberculosis at the age of 24.

Thérèse has much to teach the Catholic community. Her life epitomized "quiet acts of love" for which she never expected anything in return. In this, she is a great example of the gospel paradox that we gain our life by losing it.

Additionally, Thérèse was a very pious woman but still suffered immense physical, emotional and spiritual pain. Even the most devout individuals can fall victim to mental illness or suffer suicidal thoughts.

In a 2009 homily on the topic of physician-assisted suicide, Archbishop Vincent Nichols (Westminster, England) discussed what St. Thérèse's life can teach the Catholic community:

*"In the shortened perspectives of many, such moments are pointless and actually rob life of all its meaning. Therefore some seek the right to exercise the only solution that is within their own power: that of killing themselves and having others free to assist them to do so. // St. Thérèse lived through those same moments. She too experienced suicidal thoughts of ending the pain and the overpowering sense of futility. // So Thérèse too lived the tension that many experience today, the tension between her individual, autonomous choice, on the one hand, and, on the other, the bonds which bound her to her community, to her family, to those who cared for her, to life. She argues, as we do today, that reason, in the context of our relationships, must acknowledge life as a gift and not an individual possession and, at the same time, embrace death when it comes" [14].*

## **Mental Health Resources**

### **National Suicide Prevention Lifeline**

1-800-273-8255 – [Website](#)

### **Local/Diocesan Mental Health Resource Pages**

[Archdiocese of Los Angeles](#)

[Archdiocese of San Francisco](#)

[Diocese of Fresno](#) – [Catholic Charities of Fresno](#)

Diocese of Monterey – [Catholic Charities of Monterey](#)

[Diocese of Oakland](#)

[Diocese of Orange](#)

[Diocese of Sacramento](#)

[Diocese of San Bernardino](#)

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