Sunday, April 9, 2017 at 10:00 AM

MISSION PEAK UNITARIAN UNIVERSALIST CONGREGATION

"A spiritual community of open minds, nurturing growth and healing in ourselves and all people."



Emotional CPR

Worship Leader: Rev. Barbara F. Meyers Worship Associate: Paul K. Davis

Music: Eric Niessner

ORDER OF SERVICE

Welcome Rev. Barbara F. Meyers

Prelude "Arabesque No.1" Claude Debussy

Performed by Eric Niessner

Invocation

Hymn #1000 Morning Has Come

Unison Chalice Lighting

We light this chalice...To remind ourselves to treat all people kindly,

because we are all one family;

To take good care of the Earth, because it is our home;

To live lives full of goodness and love,

because that is how we will become the best people we can be.

Story for All Ages How to Listen Paul K. Davis and Barbara Meyers

Singing the Children to Class

This little light of mine, I'm gonna let it shine (3x)

Let it shine, let it shine, let it shine

Greeting One Another

Offering

Sharing Our Joys and Concerns

Meditation In Words & In Silence

Hymn of Reflection #1012 When I Am Frightened

Homily A Continuum Paul K. Davis

Sermon Emotional CPR Rev. Barbara F. Meyers

Interlude "Traumerei" Richard Schumann

Performed by Eric Niessner

Extinguishing the Chalice #456

Hymn #1021 Lean On Me

Benediction Please rise and join hands as you are able

Invocation

Into this home we bring our hunger for awakening.

We bring compassionate hearts,

and a will toward justice.

Into this home we bring the courage to walk on after hard losses.

Into this home we bring our joy,

and gratitude for ordinary blessings.

By our gathering we bless this place

In its shelter we know ourselves blessed.

- Kathleen McTigue

Story for All Ages - How to Listen

Person in distress:

The person in distress, Mr. Dee, is frightened and in emotional turmoil. His wife left him a month ago for another man and since then he has isolated himself. He stopped going to his job and he has rarely left the house in the last month. He has become convinced that the TV is producing shows about him. He thinks that the neighbors are giving information to the TV stations, so he doesn't feel safe talking to them.

Mr. Dee:

- Hugs himself tightly in an embrace and stares at the floor
- Doesn't want to talk and especially doesn't want to answer questions
- Is acutely aware of any nonverbal cues given by the helper but does not want the helper to know that
- · Only responds nonverbally at first
- Gradually makes eye contact when he feels the helper is connecting and caring
- Slowly loosens his arms and shows the beginning of a smile when he feels the helper is taking a genuine interest in him
- · Nods when he feels trust is being established
- Gradually, if/when he feels connected, starts to speak

The supporter as an ineffective connector:

Ineffective connectors typically have difficulty listening and often focus on trying to fix the person in distress. They tend to only notice what is being said and not what is implied, or what is being communicated nonverbally. They ask very specific problem-solving questions, sometimes emphasizing what is wrong with the person.

Below are ideas for practicing being an ineffective connector:

- Ask a series of questions, such as: "Why haven't you gone to work?" or, "When did you last take a bath?"
- Lean forward in your chair, frowning, teeth clenched, showing irritation and frustration.
- · Keep your body tight and closed off.
- Avoid eye contact because he makes you uncomfortable.
- Speak in a demanding and pressured voice.
- Make no attempt to match your movements to his.

The supporter as an effective connector:

- Makes eye contact in a respectful manner, gauging the response and matching future eye contact to response.
- Smiles gently to encourage some expression in Mr. Dee; uses mirroring to encourage further response by either mirroring his expression or responding to it.
- Mirrors body movement and posture when reasonable, again gauging response and adapting motion and posture to response.
- Communicates that you care about him as a person and then gauges the response.
- Briefly shares about a difficult time you experienced and conveys hope that Mr. Dee can get through his difficulties as well.

Prayer

Even when our hearts are broken by our own failure or the failure of others cutting into our lives, even when we have done all we can and life is still broken, the is a Universal Love that has never broken faith with us and never will.

- Rebecca Parker

A Continuum

Homily for MPUUC by Paul K Davis, 2017 Apr 09

I have never been diagnosed with a serious mental issue, but I have had spells of milder depression and tension in my life. Among these were when my first wife and I separated, when my second wife and I were involved together in a very problematic theatrical production, when the validity of my union local election was challenged, and when I faced retirement.

My problems have resolved various ways. The first couple of times, I simply muddled through to the best of my ability. More recently, my current wife intervened positively to relieve job-related stress. I was dealing with very difficult personalities at work. She insisted we take a weekend trip to Yosemite, saying, "You need to see that there are greater things around."

Twice the result has been my doctor prescribing blood pressure control medications. I found afterwards that, besides feeling relieved of my blood pressure symptoms, I also felt generally happier and more at ease dealing with my problems.

I have had some close associations with people who have been diagnosed with named mental illnesses. I have seen their symptoms in myself, but just at a lower, more manageable level. I have concluded that there is no distinct line between mentally well and mentally ill.

I see that we need a large perspective. I see that we should always look to the combined well-being of body and mind. I see that we need our communities. We all, whether diagnosed or not, need to seek and accept help, and need to offer and provide help.

Emotional CPR Sermon

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When some important phase of our personal or professional life has come to an end, what do we do? We see the possibilities around us. Some people give up and never try again. Some retreat to safety and stay there. We all know examples in people we know or hear about, or maybe we have done these at times ourselves. What I would like to share today is an example of how we can remain resilient and move forward.

As many of you know, for the past five or six years, I was heavily involved in starting and running the Connections counseling center in Fremont. This was a center that was devoted to spiritually integrated psychotherapy – that is therapy that makes the client's spiritual life an asset in recovery. This concept is central to my ministry which is focused on issues of mental health and how spirituality and religious community are greatly helpful in recovery from emotional crises. We tried very hard to make Connections work, and were successful for nearly two years. We were not, however successful in making the center last and had to shut the doors last September due to financial difficulties.

After such an occurrence, the way that one approaches the road forward is important. I'd like to share my discernment process in finding a new focus after the end of Connections, and the Trump election which occurred at roughly the same time.

It was important to me that I chose to celebrate the good that we did with Connections, and learn from the mistakes. It was clear that we were successful in training therapists, treating many clients and starting groups. Many of the benefits of these efforts continue in the community. I am choosing to focus on these successes. I also have learned a number of things that I would have done differently, knowing what I know now. I am grateful that I had the opportunity to learn them.

In my discernment of what was next for me, I exposed myself to many efforts, books and classes, waiting for something to gel in my mind – for something to feel right. Here are some examples:

A class organized by the Church of the Larger Fellowship: *Strategic Non Violent Resistance for Ministers*, taught by Dr. Sharon Welch, faculty member of Meadville-Lombard Theological School. In that class I learned:

- Don't try to defeat evil; expose and contain it and inoculate yourself against it. Recognize your temptations.
- Research on Non-violence shows that it is the most effective way to change a society; one person can't do everything; need roles for all kinds of people, including law enforcement to play; getting large numbers of people to engage is very important; ideological tests don't work
- Diffusion in activism (many different people working on different aspects
 of the problem in creative resonance) is necessary for success, not a
 cause of failure. In fact, I related to the instructor the process by which
 Fremont became a "compassionate, sanctuary city" and she said it was
 a classic case of success by diffusion in activism. Thank you MPUUC
 member Vinnie Bacon for starting this!

I joined the ACLU, the NAACP, the Southern Poverty Law Center, and Planned Parenthood and made contributions to some other groups doing things that I believe in

I took classes and webinars on mental health issues: the role of faith communities in suicide prevention; the use of art and the creative process in recovery; mental health and the changing climate; client culture; history of the consumer movement; a revolution in the treatment of schizophrenia; weekly conference calls with the "We Say Enough" campaign for racial justice; a faith based training called "Getting Active in the Age of Trump"; a wonderful and helpful class on "Disarming the Suicidal Mind", a webinar on Women, Trauma and Addiction; to name a few.

I read many books, mostly on mental health and racial justice.

Throughout this search process, I intentionally did not put pressure on myself to come up with a next focus right away or by some deadline. I viewed this time of search to be a fertile time that was just as important as work I would do when I finally selected a new focus. I should point out that this wasn't the only aspect of my ministry. I continued working at the Reaching Across mental health center where I have worked for over 16

years. I led worship services here and in other congregations. I officiated at rites of passage. I continued my leadership role in the UUA's Accessibility and Inclusion Ministry. And, I was actively involved in congregational life at Mission Peak.

After being exposed to all these things, I could see that there were so many issues and groups starting up – I couldn't possibly engage in them all. The issues that were in dire need of support included civil rights, immigration, environment, the arts, gun control, Supreme Court, health care, and many other issues. But I quickly realized that I couldn't split myself in all these pieces and work on all of them.

Then, something I read, I don't remember where, made sense. It advised people to:

- Choose an issue or two you are passionate about and work hard on that
- Be a good foot soldier / donor in other efforts. Pick another worthy effort or efforts to set up automatic payments to support.

For me that came down to two issues: Mental Health and Racial Justice

The class I took on "Disarming the Suicidal Mind" was taught by a counselor who was called into his Texas town's emergency room whenever someone was admitted after a suicide attempt. We asked him: "What the most helpful thing you can do in this kind of situation?" He said that authentic person-to-person connection without judgment was the most helpful. They can sense if you aren't being authentic and don't really care. So what works best is to find something to like about the person, and concentrate on that as you listen to them tell their story. That is the most helpful thing – a caring presence. As I know from many years working as a peer counselor at Reaching Across, there is something magic about authentic presence. I view this as a spiritual connection.

As thinking about my future activities, I wanted something that focused on spirituality as well as on mental health, my old passion from the Connections center – something that looked at the spiritual connections between people as being a primary, generally untapped, source of healing. And something that addressed racial justice.

One day it occurred to me that I already knew efforts focused on these areas. An organization called Reach Out, and a program called Emotional CPR.

I decided to do volunteer work with Reach Out. This is a group of mostly African-American former clients which visits patients at psychiatric hospitals and group homes. I have started spending one hour a month with Reach Out at the John George Psychiatric Pavilion. This is the psychiatric hospital in Alameda County where the poorest and most seriously ill people, are served. The clientele is disproportionally African American. We come and talk to them to give them hope. This kind of work is at the absolute center of what I see as my ministry.

I had taken a training of Emotional CPR, or eCPR for short, in 2010 and liked it a lot, but hadn't engaged in it further at that time due to other priorities at the time. I did some more research on it and talked to the psychiatrist who helped to start it, Dr. Daniel Fisher. He had been a guest twice on the public access TV show I produced earlier in my ministry called "Mental Health Matters". He said he would be delighted to have me as part of the team. The pieces sort of fell into place.

Let me tell you a little about Dan Fisher. He has a PhD in biochemistry and began his career working studying neurotransmitters at the National Institute of Mental Health. In the midst of this work he himself had a psychotic experience, was diagnosed with schizophrenia and was hospitalized several times. In his psychosis he was largely mute and sat by himself in the corner of a room in the hospital. The break-through for him was when a non-professional employee of the hospital, a janitor I think, came over and sat with him, at first quietly, then showing empathy in a caring way, and he found that he could speak. With the help of supportive therapist and his supportive family he was eventually able to recover. After he recovered he decided to become a psychiatrist who worked with the insight of what it felt like to be a patient, and what it really takes for someone to recover. At the center of this process is a heart-to-heart connection with a caring human being. He believes that when people are told that their situation is hopeless, like many are told today, that they start to believe it, and this contributes to worsening their condition. He believes that much of the current mental health system is iatrogenic - a big word

that means making things worse. He now runs an organization called the National Empowerment Center putting these principles to work. One of the efforts he has is eCPR. And, by the way, he is a Unitarian Universalist.

eCPR

eCPR trains people to provide support to others who may be experiencing an emotional crisis. It is a hope-based approach to building strong, resilient, cooperative communities.

eCPR skills can be practiced both by people trained in counseling, and also those with no mental health training.

The idea is that if enough of the public knows eCPR skills, it would kind of be like CPR, in that when someone has an emotional crisis, someone else in the community could support them.

It was developed by Dan and other people who have themselves learned how to make it through emotional crisis and integrate those experiences into a broader understanding of themselves and others.

Focuses on what is most helpful in the short term, and also how to turn emotional crisis into long-term personal growth.

Three phases:

- C = Connecting listening, practicing presence and creating safety with authenticity. This is a heart-to-heart connection and is what I had learned is so important for people who are suicidal.
- 2. P = emPowering inspires feelings of hope and being engaged in life. It is letting people know that they can be masters of their own destiny and make decisions for themselves.
- 3. R = Revitalizing
 - a. reengages relationships with loved ones and support systems,
 - b. begins or resumes routines of health and well-being,
 - c. reinforces a sense of mastery and accomplishment,
 - d. energizes emotional healing,
 - e. inspires creativity

Through revitalizing, people can eventually come to see their crisis as something which enabled them to move to more meaning in their lives.

With eCPR facilitation, the connection is a dialog and mutual learning among equals. It is flexible, and more emphasis is on process and practicing scenarios. One can share one's own story of trauma and healing, and one's own emotional response. There is mutual learning with new ideas emerging during the training. There are no formulas, just connection with one's wisdom and intuition.

I view accompanying someone on this process as a sacred journey. You are creating an environment for someone to help themselves. It is an honor to be a witness to the process.

I have taken training to become an eCPR practitioner and have become an Apprentice in the program. I'll be helping to facilitate trainings this coming week. In fact, we have some openings for a training on Wednesday afternoon. I invite you to come along on this adventure.

In Conclusion

The story of my discernment process has shown me what works when trying to be resilient and move forward when a one's life is changing focus. What worked for me was giving myself space to learn and explore, not forcing a decision, just waiting until things felt right. Then picking an issue I am passionate about and going with it.

I am grateful that I had the opportunity to go through this process of discernment and am very happy at the possibilities ahead.

AMEN

Benediction

At every crisis in one's life, it is absolute salvation to have some sympathetic friend to whom you can think aloud without restraint or misgiving. – Woodrow Wilson