**OUR EXPERIENCE AT AN eCPR TRAINING**

Our agency recently conducted a 2-day training on a support model known as eCPR. The article below starts with one attendee’s longer write-up on the training, and then adds some thoughts offered by her fellow students. We are excited by the optimism displayed by the various students, and by the breadth of observations the contributors made.

By Laura Yudof  – I recently went to a training on eCPR. CSP hosted the training, which was put on by representatives of the National Coalition of Mental Health Recovery (the developer and owner of the eCPR approach). eCPR stands for Emotional Connecting, emPowering, and Revitalizing. It is an approach anybody, with or without mental health training, can use to help anybody through a crisis or hard time.

Of course, people with and without mental health issues have emotional crises. Crisis is sometimes defined as a set of circumstances where your regular coping skills are not sufficient to get you through a situation. People young and old have crises around grief, illness/pain, physical or emotional trauma, family life issues, etc.

One of the most interesting things I learned about this approach was that a person needs to prepare to help someone else, and needs to set aside some time for self-care after giving support. As part of preparing, we need to know if we have the actual time and emotional energy needed to give a person support for as long as they will need to work through their crisis. Self-care includes taking the time to relax and clear your mind. Breathing techniques can be used as part of preparing, self-care, or at any time when we need to stop and renew our focus and energy. It is even OK to take a short break during the actual helping to catch a quiet moment, to practice self-care, or even to ask the person we are helping to help us.

Not only did I find the material interesting, but the interactions with my classmates were very valuable. We went into small groups, “role played” various problems and crises, and exercised our eCPR counseling skills. All of the people in the class were very supportive of each other. Of course, all of this role play, and dealing with so many emotionally serious issues, left us drained by the end of the two day training.

A key idea of eCPR is that it is about connecting “heart to heart.” It uses our natural ability to relate to other people. It is not about using the various kinds of “relational techniques” many of us have learned in our mental health provider educations. Some of my classmates struggled a little bit to take their professional counseling skills out of the exercises.

Two other concepts I learned are “meeting people where they are at,” and “not taking people’s issues at face value.” People have the potential to be in many different frames (states) of mind, and the helper needs to adapt to the person’s needs, not vice-versa. We all know examples of people expressing anger or other strong emotions about something which is not actually what is troubling them. A person upset about trouble on the job may blow up in a conflict over the TV remote, or a person seeing saddening news on TV may “pick a fight” with a loved one.
As a Self-Help Center facilitator and CSP community board member, I am excited about ways we can use eCPR at the centers. I believe that every facilitator needs to understand eCPR. This can be used very effectively to help a lot of our members, and to deal with the conflicts which often come up. It is also very possible someday that Self-Help Centers staffed with people trained in eCPR could serve as a drop-in crisis resource, so people can get the help they need and not turn to hospitals, emergency departments, or other “medical” type services. Some self-help centers might even turn into a community resource for training people with and without mental illness in the use of eCPR.

One of our trainers supervises a peer-run drop-in program which uses eCPR. Many people find it more comfortable than professional services because it is “trauma informed,” meaning that it does not do things like force people into spaces or decisions which may bring back memories of past physical or emotional trauma. It is also very focused on aftercare planning; meaning that it helps people make plans for how they can get out of their crisis, including how to use community resources for that purpose.

Just like I might take a regular CPR course so that I can help someone in an emergency, I hope that someday the skills I learned at this training will be available for me if I find myself with someone having an emotional crisis. I also hope that someone else with eCPR skills is available to me if I find myself having a crisis. That is one of the reasons I hope that we are able to train many more people in this empowering method.

(Laura Y)

*By Jen Cohn* – eCPR is similar to cardiopulmonary resuscitation (CPR); it too can be a lifesaving technique for someone experiencing a crisis. Unlike CPR, however, eCPR addresses an emotional, not physical, crisis. The first step with the eCPR practice addresses using compassion, concern, connection, and caring. Helping an individual become empowered is very helpful, and taught in the next step. The last step involves revitalization. Revitalization includes assisting the person to start to experience life again for what it really is, and to resume vital roles they have (such as worker, mom, friend, sister, etc.).

The skills learned with eCPR can teach a compassionate alternative to hospitalization, be used as a way to resolve a crisis, or even assist us help anyone we meet who seems to be having an emotional crisis. People who have learned the skills of eCPR are even going beyond our community to teach people in law enforcement more compassionate ways of working with individuals experiencing emotional crisis.

*By Irene Sanborn* – eCPR had some concepts and skills that were familiar, but it was helpful to have them in a distilled, focused, and structured format. As they point out in the workbook, it takes practice not only remember the steps and skills, but also to integrate the technique in order to respond “automatically” using the method. For now, the general concepts of connecting, empowering and revitalizing are often part of what we try to do, and taking the training or looking at the workbook gives me time to be reminded of and think about them.
A concept not often considered in this type of context was community, but it’s an important one for our network of self-help centers. I anticipate helping to train Self-Help center facilitators and members on using eCPR techniques to foster community.

By Jeanette Ellis – As someone who started out working in human services with clinical training in counseling psychology, I found the eCPR training both refreshing and helpful in reinforcing that connecting with others in crisis authentically, compassionately, and with healing intention is not the unique realm of professionals, but involves inherent skills of active caring available to everyone that can be strengthened with focused training.

The limited size of the training group provided an excellent opportunity to practice the elements of eCPR: in a welcoming and supportive environment. The fact that many individuals knew each other well seemed to create additional safety to share and process real issues and crises, resulting in a richer learning experience. Not very surprising perhaps, is that the deeper the issues, the greater the universality of experience (loss of loved ones, confusion over roles, meaning and purpose)! This led to the re-affirmation that not only do we have responsibility one to the other, but are enough, just as we are, to support each other and others. For these reasons, in addition to building skills working with service participants, eCPR seems well-recommended for agency and community team-building.

I recently saw posted “What greater wisdom is there than kindness?” This to me epitomizes eCPR. As trainers Ann Rider and Lauren Spiro shared, when we have right intention, have assessed we are in a good space to listen deeply without judgment, and are willing to share the risk of not knowing, we have the necessary and sufficient elements to promote healing.