## Anti-Carceral Crisis and Safety Planning



#### getting started

#### Crisis situations look, feel, and sound, different for everybody. They each require their own approach.

We have been conditioned to believe that a mental health crisis is what happens when a person is wearing "dirty" clothes, talking to themselves loudly, wide eyes, sudden movements, "strange" facial expressions. Psychiatric crises happen to strangers who go crazy or do drugs or are biologically, genetically, batshit crazy. This is far from the truth.

#### Crisis situations occur when an environment can no longer meet a person's needs.

- Someone is holding it together for a long time & cannot
- Unmet needs (housing, safety, food, etc.)
- Big, impactful or repeated negative experiences with authority
- Grief
- Trauma
- Drugs, lack of sleep
- Spiritual experiences/access to altered states
- Chronic pain / can no longer handle physical sensations in body

#### Crisis situations are not synonymous with violence.

Imagine a crisis situation like a pipe that is about to burst. We either need to make space for the water to flow, or stop the intensity of the pressure. If we're unable to do that, our nervous systems may panic & we may engage in what is called violent behavior out of a desire to get our needs met in a particular moment, or defend ourselves.

#### Bringing in police is <u>always</u> an escalation.

The mental health system is fundamentally carceral and often exacerbates trauma, perpetuates abuse, and offers no sustainable or long-term healing strategies to mitigate the violence of living under racialized capitialism.

## How do I feel when I'm doing well? How does my body feel? What are my thoughts like?

**Example:** I wake up in the morning and feel calm, not agitated; I experience less sensory overload; my stomach doesn't hurt

## How do I feel when I'm doing not doing well? How does my body feel? What are my thoughts like?

## **Early warning signs that I may be having a hard time:**

## **Urgent warning signs that I am approaching a crisis:**

#### WHEN YOU SEE

#### YOU MIGHT THINK

#### BUT ACTUALLY

Me screaming and banging my head into the wall

I'm trying to hurt myself

I am stimming and trying to calm myself down

#### My support team

Who will have a copy of this plan? What are their names, addresses, and contact information?

# What questions can your support team ask if they are concerned about you?

Examples: Have you eaten recently? What has your sleep been like? Are you taking your medication?

## What can your support team do to support you?

Examples: check in once a day, stay with me, make me food or deliver groceries, not threaten me with hospitalization, leave me alone if that is what I ask for

# In the past, what kinds of treatment, help, or healing has been most supportive?

Examples: seeing an herbalist, going into nature, talk-therapy, specific medication, being given space to move through crises

# Names & contact information of any preferred mental health providers or attorneys

# Signs I am no longer making the best decisions for myself:

## My plan for supported decision making: