

BUILDING COMMUNITY MENTAL HEALTH SUPPORT SYSTEMS

BEFORE WE START

I've had the privilege of meeting with many different communities and members of collectives and cooperatives to have conversations about mental health and ways members of communities can support each other. What follows is my compilation of strategies and ideas that have come up in these conversations. I share these with you with the hope that they will be useful for you and your community, whether that's a cooperative house or workplace, organizing collective, family, or circle of friends.

Everything listed here is to be viewed as a tool to be stuck in your tool belt. There is no one "right answer" or "right thing to do" when it comes to mental health. Some of the suggestions may strike you as the perfect thing to do for a particular situation; others may seem like a terrible idea. Use your best judgment and make what you think is the best decision for your individual situation, community, circumstance. Use these ideas as resources.

PREVENTATIVE MEASURES

As an individual part of a community:

Create a mad map. (See Mad Maps inset below)

Disclosure (if you feel comfortable), and provision of resources.

For example, if you identify as someone with bipolar disorder, and you feel comfortable sharing that with folks, do so. Provide them with resources or information that will help them support you when you need support.

As a community:

Regularly do mad map activities within a community.

If folks are comfortable, keep mad map in a place that is accessible to friends. They can be posted on doors, or just given to friends.

If you live in a collective or co-op, create an "understudy" program for house chores.

So if someone is feeling anxious and unable to clean the kitchen, or follow through on their commitment to make a flyer for an event, they have an

MAD MAPS

A mad map is a document that helps you and others keep you comfortable and safe. You can make them together as a community, and share them together to both avoid singling someone out and increase communication about everyone's mental health needs. Keep them readily accessible for future reference. They can look a lot of different ways. Be as creative as you want to be.

Include information on:

- What are my warning signs?
- What are my triggers?
- De-escalators
- Things I can do to make myself feel better: Acute and Long Term
- Things other people can do for me: Acute and Long Term

understudy to call on. They can return the favor for that person when feeling better. Having buddies and sharing responsibilities can also help in this way.

As a community, use person-first language.

Say "someone with schizophrenia" or "someone who has schizophrenia" vs "schizophrenic." This language recognizes that we are all people, not diagnoses. Also be aware of stigmatizing language that can be hurtful, such as "crazy."

Define your boundaries as an individual, and as a community.

Know in advance what you are capable and willing to do, and how much support you are able to give. Knowing when to call for support as a friend, ally, and community is an important piece, and can keep the whole community healthier.

Build in regular opportunities for check-ins.

"Checking in slows us down, reminds us

our existence is so much bigger than the meeting at hand, and encourages us to bring more of our whole selves to the practical tasks before us." (from *Friends Make the Best Medicine*, the Icarus Project) Allow people to share where they're at emotionally, how their week's been, etc. Allow people to pass if they want.

Respect someone's decision to take or not to take medication.

This can be hard. But remember, it's their body. You can offer yourself as a resource or offer to help them do research about the medication(s) they may or may not be taking but ultimately the decision is theirs.

Provide regular awareness and education opportunities.

This can look like a lot of things. Examples are:

- Provide a list of resources inside and outside the mental health system that are available in your area and nationally. Post in bathrooms, put on coffee tables, out on other public areas where people can read and take them.
- Coordinate workshops, discussion, peer support groups
- Postings and info about what mental health issues and diagnosis look like can help dispel myths and stigma.

Check in with people about drug and alcohol use.

If their drug use is harming the community, if you are concerned about them or see it harming them, if you think they are uncomfortable or bothered by someone else's drug/alcohol use, if it's becoming a general community issue...

Provide sober spaces.

Places full of intoxicated people can be triggering or feel unsafe for people. Make an effort to provide sober spaces for people to go if they're feeling this way. Have open dialogues about needs for sober spaces.

Don't ignore situations.

Waiting until something or someone has gotten out of hand is a lot harder than addressing issues, concerns, worries, etc when they begin to arise. Starting conversations can be difficult, but doing it early can save everyone pain and stress.

Call people out when their behavior could be hurtful.

Often times, someone who is hurt by someone's behavior may not feel comfortable bringing it up. If you recognize that a person's behavior could be hurtful, consider it your responsibility to bring it up so that someone else who may feel more triggered, hurt, or self-conscious about it doesn't have to.

Meet people's food needs and provide good food.

Build a mental health library in your house, collective space, community area, etc.

Talk in advance as a community about what to do if anyone goes into crisis.

CRISIS MOMENTS

Create physical space, clear the room.

Remove all on-lookers. It does not feel good to be gawked at when you're already not feeling well.

Always ask before touching.

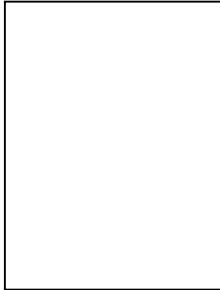
Even if you know the person well. Hugs and hand holding can be helpful, but not if they're unwanted.

Remain calm, even and especially if the person you're supporting is not.

Having two people stressed and freaking out instead of one only makes the situation worse. If you're having a hard time staying calm, explain that you need to take a short break, where you'll be and when you'll be returning. Then go have some nice deep breaths.

Helpful questions to have handy:

- What do you need?



- What do you want?
- Where do you want to be?
- Who do you want to be with you?
- If open-ended questions are hard to answer, ask yes or no questions to get important information you need, such as:
 - Do I need to worry about you?
 - Are you ok/safe?
 - Are you going to be ok/safe?
 - Do I need to worry about you hurting someone?
 - Do I need to worry about you hurting yourself?
 - Needs & wants: Do you want water/to be alone, etc?
 - (Don't forget: Do you want me to stop asking you questions?)
- Note: Sometimes asking, "How are you?" or, "Are you ok?" can be triggering, as can questions about hurting self or others. Use your best judgment.

Remember: respect self-determination.

Let the person have control over how they are treated and cared for. If you need to know their wants, ask yes/no questions. Respect treatment/non-treatment preferences.

Help them breathe slowly, regularly and deeply.

If their breathing is erratic, ask the person if they are willing to breathe with you and be an example. Help them slow down their breathing.

Know the location of first aid kit/materials.

Designate a check-in person.

Share tasks and support each other in your roles as support people.

RECOVERY FROM A CRISIS

COPING STEPS, HEALING, EVALUATION

Open a dialogue with the person.

Did things work out? What can they and the community do to help prevent another crisis situation from occurring? If a similar situation happens again, how would they like it to be handled? What would they like to be done differently? This could be done on a one-on-one or small group basis, if that makes it easier to share.

Create a physical space for decompression and being together.

Be together in a space, intentionally spend time together. (One beautiful/sad night after a particularly traumatic crisis at a collective house I was living at, we turned off all the lights, dragged mattresses, pillows, and blankets into the living room, lit a fire and candles, and just spent time there together.)

Call in outside support.

Would be helpful for the community to have a counselor come in, or someone less affected to facilitate a dialogue. Be sure to get community consent prior to inviting someone to come in, or at least inform people in advance (“Hey, there’s going to be a counselor in the living room from 3-6 tomorrow, if you want to talk to them.”) so as not to take anyone by surprise.

Provide an opportunity for appropriate follow-up education

An informational training can help dispel myths and assumptions, and help people understand their misconceptions and stereotypes and work to correct them. Check in with the community and see what other pieces of information they’re missing or skills they want to build for the future.