

The harmful effects of policing are well documented across the United States...

August 2015, Texas: Alan Christopher Pean, who checked himself into a hospital for a mental health emergency, reporting anxiety and disorientation, was shot and critically wounded by police within the hospital.

December 2015, Florida: Barbara Dawson reported shortness of breath when physicians discharged her from the hospital. She refused to leave. Police were called to the emergency room and charged her with disorderly conduct and trespassing, then escorted her out of the hospital in handcuffs. She collapsed in the parking lot, became unresponsive—due to what was later discovered to be a blood clot in her lung—and was readmitted to the emergency room, where she died one hour later.

December 2015, California: Mario Woods, who suffered from depression and mental health issues after spending seven years in state prison, was shot 20 times by police in San Francisco while walking on the side walk.

January 2016, Kentucky: A teenager, Gynnya McMillen, died of injuries after police used martial arts to restrain her when she refused to remove a sweatshirt for a booking photo at a local jail. Staff waited 11 minutes after she was found unresponsive to start CPR.

Get involved!

- * Host a “Know Your Options” workshop with your organization. This workshop is offered by Critical Resistance-Oakland and is part of the Oakland Power Projects. For more information, email PowerProjects@CriticalResistance.org or call 510.444.0484.
- * We also regularly offer Abolition of Policing workshops. Email croakland@criticalresistance.org to find out when the next one will take place or to host one at your organization.
- * Use the tools. Download them from:
<http://criticalresistance.org/chapters/cr-oakland/the-oakland-power-projects/>

Steps to take if you are on the scene during a health-related crisis

- 1** Self de-escalation, take a breath, feel your feet on the ground, assess the environment and any risks present or possible.
- 2**
 - * Make the person as comfortable as possible.
 - * Be aware of your body language and notice how the person is responding.
 - * Help the person not dissociate- sensory noticing the ground below you.

If the person is conscious:

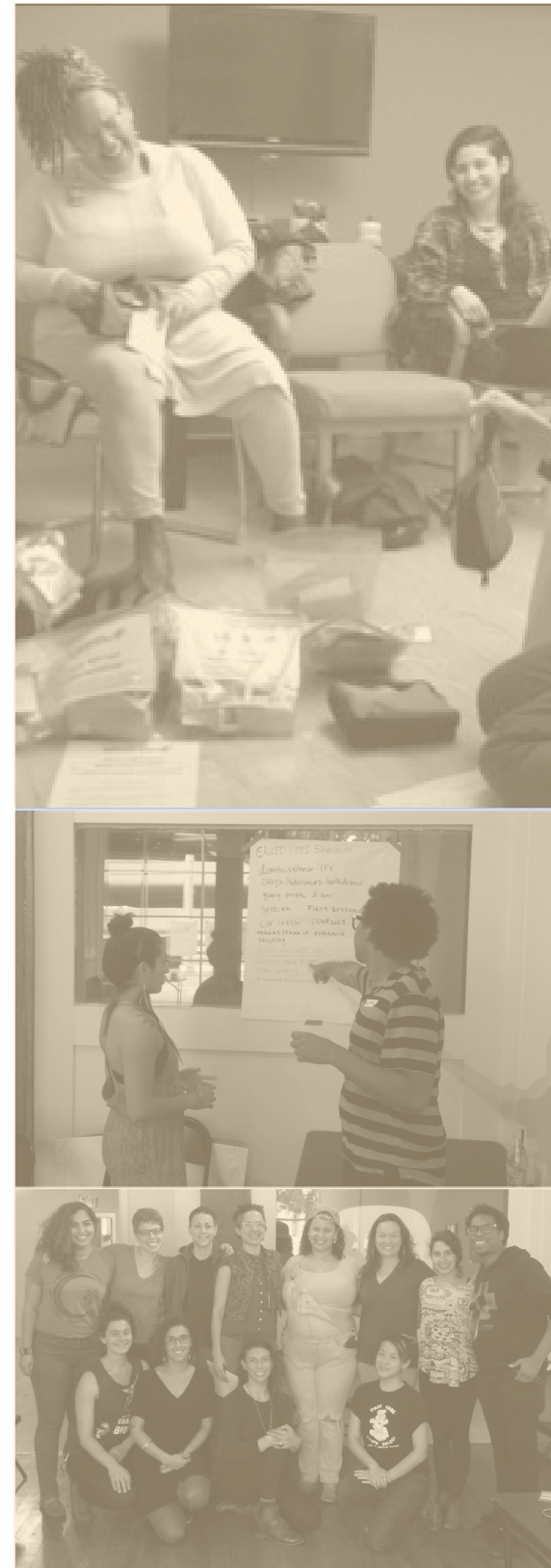
- * Introduce yourself/ your role;
- * Establish consent to help and consent around possessions;
- * Ask if they have concerns around 911 or cops’ involvement;
- * Find out who they want called or who is nearby that can be supportive.
- * Assessing Alert + Oriented: Ask four questions, such as: where they are, what day it is, what is their name, what the weather is currently, etc.

- 3** Call out:
 - * For people with experience with the condition/ apparent situation
 - * For anyone who knows the person
 - * For people to hold off calling cops or 911Utilize 911/ other ambulance source – in case of certain symptoms - RED FLAGS/ orange/ yellow/ not breathing, no pulse, bleeding you can’t control. Remember, we are not advocating for people to not get medical care!

- 4** Delegate roles and practice closed loop communication. Potential needs or roles:
 - * someone with a car;
 - * a phone;
 - * a first aid kit;
 - * water;
 - * a blanket

The Oakland POWER Projects

Decoupling Policing from Health Services: Empowering Healthworkers as Anti-Policing Organizers



Policing is failing Oakland.

The Oakland Power Projects helps Oakland residents invest in practices, relationships, and resources that build community power and wellbeing. By identifying current harms, amplifying existing resources, and developing new practices that do not rely on policing solutions, the projects remind us that we can make our families and neighborhoods safe and healthy without relying on the cops.

The Oakland Power Projects (OPP) builds the capacity for Oakland residents to reject police and policing as the default response to harm and to highlight or create alternatives that actually work by identifying current harms, amplifying existing resources, and developing new practices that do not rely on policing solutions. Through a steady and intentional process, Critical Resistance members talked to close allies from the Stop the Injunctions Coalition to get a sense of the perception and experience of the current policing landscape in Oakland.

Oakland Power Project #1: The Anti-Policing Healthworker Cohort

Policing is a public health issue.

We know from personal experience, stories shared in our communities, and mainstream media headlines that cops are increasingly involved in health-related events, though they are not medics or social workers. The disruption and harm they cause by asserting their authority in health crises or when people are trying to access routine care is increasingly seen as both legitimate and normal. Whether someone is facing a mental health crisis, a social conflict that involves interpersonal harm, a medical situation, or an accident, police on the scene worsen the situation. Cops are the antithesis of care providers, as evidenced by the many instances in Oakland and across the country of police harming and even killing the person who needed care. At best, the person requiring care (or people in their company) is subject to a delay in healthcare, if not interrogation or harassment by police, detention, arrest, or deportation. With this information and a rigorous analysis of the Oakland political landscape CR-Oakland developed the Oakland Power Projects.

Because policing fails to meet people’s needs, and puts people in danger of injury or denial of needed care, arrest, imprisonment, and/or even death, we must eliminate connections between policing and healthcare.

Critical Resistance-Oakland chapter (CR-OAK) launched the Oakland Power Projects (OPP) in 2015 to build Oakland communities’ capacity to resist the everyday violence of policing and to minimize its harmful impact. Critical Resistance-Oakland (CR-OAK) identified the outrageous and routinely mundane intersection of healthcare and law enforcement as a strategic site to intervene, erode the power of policing, and support access to necessary healthcare, which serves the short and long term goals of stabilizing community wellbeing.

CRITICAL RESISTANCE

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The Anti-Policing Healthworkers Cohort, our first Power Project, aims to:

- * increase resistance against the every-day violence of policing;
- * strengthen people’s skills to respond to community health needs and emergencies in ways that minimize police contact;
- * ultimately decouple access to health care, both routine and emergency response, from policing.

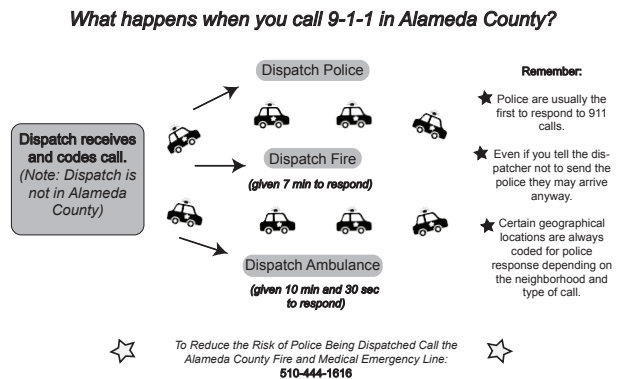
Who is part of the OPP Healthworkers Cohort?

The OPP Healthworkers Cohort is made up of a range of health care practitioners - from EMTs, free clinic workers, emergency room doctors and nurses, to folks providing traditional/non-western remedies such as acupuncture or herbal care. The cohort was recruited, organized and trained by CR-OAK members with the goal of developing a “Know Your Options” workshop for community members and organizations that would cover the basic intersections of policing and healthcare and empower people to address a health situation while minimizing police contact.

In Fall 2015, the cohort initiated its work together to develop tools and resources to decouple healthcare from policing. Critical Resistance- Oakland kicked off the OPP Health Workers Cohort with a five-week intensive series of workshops with the health workers. In these sessions, CR-OAK members worked with the cohort to build a strong understanding of the prison industrial complex, analyze its intersecting relationship with healthcare, and understand abolition as both a strategy and long-term vision. Building on this knowledge, the OPP Health Workers Cohort practiced developing ‘no-call’ plans for their organizations and communities. These discussions, which in themselves served to engage OPP Healthworkers as visionaries toward building healthier and stronger communities, provided a starting point for the cohort to develop their own “Know Your Options” workshops with “no call” components. During the final 3 weeks of the cohort training, healthworkers organized themselves into different healthcare themes, and crafted “Know Your Options” workshops and supporting resources. Following the five-week intensive, CR members and the cohort have continued to meet to fine tune this curriculum and accompanying tools.

As part of the five-week intensive, CR members also provided workshop facilitation training and did many rounds of practice, so the healthworkers would be strong community educators.

Through the Oakland Power Projects, healthworkers also discussed how interactions with police exacerbate their abilities to provide care and healing for patients...



A ‘no call’ plan refers to a plan to respond to urgent issues drawing from the resources and services that already exist, instead of calling 9-1-1 or the police (unfortunately, 9-1-1 and police are linked, see diagram, and calling 9-1-1 triggers law enforcement involvement).

..here are some excerpts:

“At my job we use institutional police daily. I have seen the emotional and physical damage that can come from their presence.”

“The police are triggering for both our patients and staff, often times not respecting gender pronouns or being culturally competent.”

“I have worked in psychiatric facilities where on a few occasions police have escorted folks who were brought in by or brought out by EMS. Sometimes folks were mechanically restrained to gurneys. Once in a while the particular team of cops treated the folks with dignity and respect, but more often they did not. I’ve witnessed them using too much force, just to guide their safe passage.”

“[There are] many instances of institutional police being called on patients in crisis, (during withdrawals from substances, ‘acting out’, when health workers feel ‘unsafe’). I wish that my coworkers would not call [police] and use our staff for de-escalation support and recognize the implications of calling police – mental trauma, physical trauma, new crises – and how that converts to their lives in the communities they live in and come to us from.”

Following this process, the Health Workers cohort reported gaining confidence, information, resources, and support to respond to a variety of health situations in ways that minimize the harmful impacts of policing. Further, many appreciated the opportunity for co-learning from one another and building their own networks among peers working in health and committed to abolitionist goals.

“I definitely feel I have more political confidence and a deeper analysis to policing and how it works/ doesn’t work. Plus the connections.”

“I feel that my analysis is more refined but [policing entangled in healthcare workplaces] is a difficult environment/issue to challenge.”

“I have this cohort to reach out to now. It feels like we are a team with shared principles. I don’t feel isolated anymore.”

“I feel the CR definition [of policing] pieces together several common conversations and concepts in my life in a succinct way.”

The cohort has begun offering the “Know Your Options” workshops to ally organizations and coworkers to great reception, and is developing education tools and strategic media pieces to bolster people’s skills and confidence to refuse law enforcement presence in healthcare (sheriffs in hospitals, police as first responders with 911, etc). We’ve also seen exciting ripples outward, as OPP participants are confidently bringing their anti-policing politics back to their healthcare sites and to other organizing spaces. For example, in response to ongoing Sheriff-patient violence at a local hospital, an OPP nurse is organizing her coworkers to reject the omnipresence of the Sheriff’s Department on her floor. Another OPP care worker at a local clinic is reigniting the clinic’s historic commitment to not calling the cops by building a “No Call” plan and de-escalation protocol. In addition, OPP Healthworkers, who wanted to bring clear messaging about the intersections between healthcare and the violence of policing to the Black Lives Matter movement, initiated and led the 2016 MLK weekend Bay Bridge shutdown.



The Oakland Power Projects was conceived to build capacity for Oakland to reject police and policing as the default response to harm and to highlight or create alternatives that actually work. As the Oakland Power Projects moves forward, Critical Resistance will continue to work in collaboration with political and community allies as well as those who have contributed their voices to the project’s development.