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## ACTIVIST TRAUMA: MUTUAL SUPPORT IN THE FACE OF REPRESSION

### **Activist-Trauma Support**

If we want to be effective as a movement, we need to be able to support each other in the face of repression. We need to be conscious that what we are doing might be harmful to ourselves, potentially even life-threatening. This is not meant to scare people off – quite the opposite; but we need to face reality, deal with our fears and sort out our support if we don't want to give state repression the means to be effective.

Activist-Trauma Support (ATS) was started in 2005 in order to provide support during and after the G8 mobilisations in Scotland. Previous experiences have shown that while self-organised medical support for victims of police violence was quite well organised, there was a serious lack of assistance on a psychological level. For some, the idea for ATS was born from experiences following the Aubonne bridge action against the G8 in Evian 2003. During that action one person was seriously physically injured – and got lots of support. But several others suffered from varying degrees of psychological trauma and didn't get the support they needed or deserved. This is when we realised the pressing need for organised awareness raising, information and support.

While 'post-traumatic stress' is now taken quite seriously in mainstream society (it is standard practice for the emergency services to be trained in identifying and coping with it, and treatment is finally available via the National Health Service), it is surprising that, as activists, we still think we can live through

situations of police brutality, fear and powerlessness without showing any emotional response. The fact is that we can't.

Of course reactions to stress vary. Everybody has their own way of dealing with it, but this reaction can extend to dropping out, disappearing, or feeling excluded because we feel scared or are suffering from post-traumatic stress 'disorder' (PTSD).<sup>1</sup> Inside our movements a deeper understanding of these processes is lacking. Even after terrible incidents such as those at the Diaz school in Genoa where sleeping activists were severely beaten by police during the 2001 G8 summit, not enough emotional support was available for the victims. It is crucial to understand that emotional wounds often continue to hurt and debilitate long after the physical wounds have healed, and that people who don't get physically hurt can still suffer serious psychological damage. In the long term, many of those in Genoa suffered more from the emotional consequences than the physical injuries.

This lack of support within the movement can exacerbate the trauma. If the police treat us badly, it's hardly a surprise; but it's really devastating to feel let down by our mates afterwards. It can cause 'secondary traumatisation', which is often worse than the initial experience because it shatters our fundamental assumptions. We're not asking for all of us to become 'experts' in healing trauma, but there is a clear need for understanding and support: solidarity is a fundamental part of our politics.<sup>2</sup> The police and prison 'service' specialise in consciously creating traumatising conditions, especially aimed at breaking resistance. Beatings, arrests, isolation custody, violation of rights, threats, lies... Their focus is on creating fear, getting inside our heads and stopping us from taking action again. Within our movements this 'internal censorship' has not really been addressed and talked about. What stops us from getting where we want to get? Sometimes it might be real obstacles; but a lot of the time it is our fear. The state's strategy is a psychological one – they beat one of us up and a hundred get scared and feel blocked. And maybe the person they beat up never goes back on the streets. This is how repression works. And this is why we need to start talking about it. The repressive organs are in their hands – the more effective we are in our struggle, the harder the repression. But how we deal with it is in our hands. What are we going to do with our fear, what are we going to do about our pain, how are we going to support each other through all this and how are we going to show our solidarity?

## **AN ACTIVE PART OF RESISTANCE**

In preparation for Gleneagles, a six-day training course was organised with a professional from a charity focused on trauma care called ASSIST. Most participants, plus some new people, went on to form the Activist-Trauma Support group. As far as we knew, it was the first time active trauma support had been taken on board for a big mobilisation. We were breaking new ground, and with no earlier experience to fall back on, we spent a lot of time trying to figure out what would be needed and useful.

In the end the group split itself between the campsite in Stirling, where a big recovery dome was set up, and the Forest Café in Edinburgh, in the ground floor of the Indymedia Centre where the missing persons helpline and prisoner/friends support were also based. Both groups ran a 24-hour phone helpline.

The recovery dome saw a steady flow of people coming to find somebody to talk to about what they were going through, to get a massage (often fulfilling the same purpose), to find a quiet place to cry, to retreat or to just calm down with a cup of tea and a blanket. Some people came once, some several times. A lot of people seemed to know of our presence on site and it gave them some level of comfort even if they didn't use the facilities – rather like the assurance when you know there is a medical first aid tent.

At the office in Edinburgh, the main tasks were phone support and personal support, but these turned out to be in much less demand than at the campsite. So we started focusing on avoidance of trauma – doing prisoner support (sending cards, money, organising visits) and helping prisoners' friends (making phones available to call families, lawyers, police stations, embassies...). We hadn't intended this to be part of our work but it transpired to be very useful. We also think it proved effective in blurring the distinction between 'trauma support' (which sounds quite dramatic and off-putting), prisoner support and 'general welfare' – we want to normalise and destigmatise trauma.

We know that one of the first things people need after distressing experiences is to see their friends, but tracking down people can be hard and stressful in itself. That's why we had set up a missing persons helpline which was run in close connection with the legal team. It also had the bonus of taking pressure off the legal phonelines when people were just calling to find out about their mates. In addition we organised a secret 'safe space' some miles away from any action for people who really needed to get out of the area. Fortunately it proved not to be necessary this time (at least we hope this is true).

In terms of education, we set up [www.activist-trauma.net](http://www.activist-trauma.net), printed and distributed flyers about what we were offering and what to do after instances of brutality, as well as a six-page briefing about PTS'D'. We organised a few workshops, although we should have done more and advertised them better.

After the summit, the long-term support by phone, email and/or personal contact was less than expected. We're not sure if it wasn't needed, or if people felt reluctant to use it, or if we didn't do sufficient outreach work. On the other hand, the hits on our webpage after the G8 were really high. We had started setting up a public contact base for support which is accessible through the webpage – it's a place where people who need help can find people who offer to help in different ways.

## LEARNING THE LESSONS

A month after Gleneagles we had a debriefing weekend with the aim of looking into group dynamics and evaluating our work in order to draw lessons for others.

The general consensus was that all of us enjoyed doing the work; it felt useful, it was appreciated and it was rewarding to feel that somebody actually feels better after talking to you.

Internal group dynamics are often complicated and this is especially true if people have been traumatised in the past – which applied to all of the people in the working group in one way or another. Summits are stressful situations at the best of times: they trigger people’s memories and recall previous traumatic situations. Of course, it is not only police violence that causes trauma – statistics suggest that one in four women and one in six men have been sexually abused at some time, while thousands are hurt in car crashes, injured at work and so on. Trauma can result from any situation where the natural reaction to fight or flight is blocked. It is important to remember that a lot of us have gone through some of that and still carry old trauma around while being exposed to new ones. Added to this was that fact that we didn’t all know each other beforehand and had very different personal and professional backgrounds and attitudes.

We concluded it would be better for a future trauma support group to really try and get to know each other beforehand, put effort into trust-building and group bonding, since we should be able to draw strength from the group rather than having to deal with internal conflict. It might have been a good idea to have an external ‘supervisor’ or counsellor on site, independent of the group, who could provide support for the supporters and facilitation if necessary.

From the beginning we had made it clear amongst ourselves that we were offering emotional first aid and not therapy or deep counselling, since a campsite with police at the gate is not the right space for that, and therapy is a longer term project anyway. As it turned out, it wasn’t always easy to make that distinction and opinions about where to draw the line differed due to our different backgrounds. For future work we think it would be important to have an in-depth discussion on this topic beforehand and to establish some ground rules.

We found out that trauma support is very narrowly focused and inevitably ended up doing other mental health work. We recognise the need for broader self-organised mental health support in our movements, but at the same time due to limited resources we could only focus mainly on trauma. It also became clear that trauma work in itself during big mobilisations can’t be reduced to police brutality, because the repressive environment triggers all kinds of old trauma like childhood sexual abuse, rape, and other previous experiences of brutality. When doing emotional first aid it’s crucial to keep in mind that the person you are talking to might be carrying all kinds of old trauma with them. And different people need different things, so it’s essential to be prepared to adapt to people’s specific needs and ways of coping.

There is a definite need for general welfare work – cups of tea, massages, a quiet space and blankets can make an enormous difference, and can help prevent burn-out (on a really basic level, we underestimated the profound impact of a lack

of sleep). This blurring of general welfare and trauma support proved to be very useful, especially since a lot of people feel uneasy about going to some kind of 'trauma tent'. We need a longer discussion to come up with ways of making trauma support 'mentally' accessible for as many people as possible. But in the short term, cooperation with prisoner and legal support, cooperation with general welfare, and cooperation with medics can all provide a range of entry points. In the end it's important to raise awareness about the topic and to make an effort to destigmatise it by integrating it within our wider support networks and making that support easy to access.

Overall, we feel we succeeded in putting the topic on the agenda. Hopefully it will be an intrinsic aspect of future activist work, similar to legal and medical support. However, it might take longer to change the culture in our movements to a more supportive environment, where we are not ashamed of what we feel and can be confident that we'll be respected and supported in what we are going through. Activist-Trauma Support was a first step in that direction: we hope that one day going to trauma support will be just as normal as going to the medics and that any stigma will be overcome – not just in terms of traumatic stress, but in the widest sense of mental health.

- 1 *The term 'disorder' is controversial. Reactions to traumatic experiences are not a disorder, but normal. We use it here to differentiate between post-traumatic stress reactions which heal in 4–6 weeks (PTS) and the condition where symptoms persist after that period (PTS'D).*
- 2 *In some ways, we think trauma support goes beyond solidarity, it's about just being human and caring for each other. Then again, perhaps all truly revolutionary action is about struggling to become more human!*