

find each other.



# Organizing and fighting without dying

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Most people who have spent enough time organizing know it can be a thankless job. The planet is on fire; millions of people don't have their basic needs met, and are experiencing housing and food insecurity; a global pandemic has killed more than 4 million people worldwide; and fascism is on the rise. Everywhere, people are navigating how to survive each day. Basically, the world is pretty bad right now, and activists are fighting tooth and nail to change that. But fighting state violence and organizing around mutual aid in our communities can also become unsustainable and lead to physical, spiritual, and emotional trauma and burnout. So I spoke with Alice, or GothBotAlice about how activists can take care of and pull each other through the darkness on our way to creating the world we want and need.

Alice identifies as a Mad femme, suicide attempt survivor, anarchist, antifascist, care worker, and writer. Their work focuses on dismantling violent and coercive systems and creating alternatives that are non-hierarchical, and preserve autonomy and agency. They also co-author *It's Going Down's* 'This Week in Fascism.' Alice uses art and language to explore the complexities and intersections of suicide, madness and culture.

Erin Corbett is a journalist and writer covering political movements and state repression. She is also very tired.

*This interview has been edited and condensed.*

***I listened to your conversation back in March with *It's Going Down*, when you discussed the role of community care and peer-to-peer support in social movements. Can you tell me more about this concept and why clinical models of mental health care don't work for everyone?***

The medical model for mental health places symptoms of trauma, like anxiety, depression, or any other issue as within a person and as a thing that needs to be treated. People are told, "You have this condition, you are broken, we need to treat you," and it's your responsibility to seek out the help that is going to make you better.

one in case you need naloxone administered. That's kind of the golden rule with most risky behaviors.

As a culture I think we ought to talk more about suicide. Our friends and our comrades are dying around us. And similar to abstinence-only education around sex, well, nothing good comes from not talking about sex. There are more unplanned pregnancies, more STIs. Not talking about it is not working. So not only do we need to stop ignoring it, we also need to consider what we will do when someone we love wants to die. I know that that's really hard.

Most likely when I die it will be by my own hands, and I have taken steps to ensure that when that happens the people I love are not harmed by it other than just the loss. I think that's really important. I don't want my decisions to fuck people up forever, and I know I'm not the only person out here like me.

We need to learn to sit with our discomfort. We are exposed to all kinds of fucked up shit, like police violence, interpersonal violence, State violence. These are life-saving conversations that we should be having with each other. The pains of trauma and grief are easier to navigate as a community than they are as individuals, and again, that's where creating these networks of support is really important. People shouldn't have to live or die in isolation and despair.

If we apply harm reduction principles to these things that I mentioned, people in my support system would not tell me to not do those things. Those things keep me alive and that is harm reduction. I take those risks in the safest way possible to avoid bigger risks that might kill me. Harm reduction for some of these tools might look like allowing myself to drink only a certain amount and then I'm done. I can make sure I eat something. I can make sure I'm practicing first aid and thinking about what happens if I go too deep. How do I know if I've gone too far? Do I reach out to someone? Do I know how to suture myself?

If we're supporting somebody going through some crazy painful shit who's maybe willing to engage in something that we wouldn't engage in, or something we maybe don't want them to engage in, but they're going to do it anyway, it's about how to make sure they do it in the safest way possible. We can ask questions, like: What happens if you go too deep? Are you cleaning up after? Are you using clean tools? How can we make this the safest possible?

When we're talking about our comrades in crisis and people we care about being alive, that care and support can be the foundation of the conversation. We can address it as such: "I want to make sure that we can support you, and want to ask if you're willing to have a conversation with me. When you felt this bad in the past, what things — good, bad, and ugly — helped you manage?"

I think we need to remove ourselves from a position of needing to fix another person. We're not here to fix anything. We're here to sit with people in their pain and be supportive, and allow people to take the risks they need to take to stay alive. We can create conditions that help people endure the effects of trauma in supportive ways, but we don't get to choose for people what's enough, when it's enough, or when it's too much. We might do everything we can for the people we love, and sometimes that's not enough.

I've had a friend observe me while I self-harmed before. Sometimes maybe somebody just needs someone to be around. With heroin and opioids, we tell people that it's better to do it with some-

For some people that makes sense. But I choose to look at mental health through the lens of the social model of disability, which looks at the overarching social factors that are causing things like anxiety, depression, and trauma. Our mental health is tied to the environment, like when there are wildfires, for instance. Food insecurity causes all kinds of issues, both physical and mental. If your loved ones are entangled in the prison industrial complex, or if you're in a relationship where there's domestic violence, these are all social factors that have really gnarly implications and impacts on our brains. If we're looking at mental health experiences through that lens, we can see that addressing these things requires a social shift. Making sure people have access to housing, addressing food insecurity, making sure income is stable. This will look different as we build a world that has all of us in mind.

I think people deserve to have options and choices. For some people, seeing a doctor and psychiatrist is a good system. For others who have been harmed by these models, it doesn't work for us. There are all kinds of reasons why this model does not work for everybody, one of them being that maybe we're engaged in activism that is deemed illegal by the state and we can't talk to a therapist about trauma related to our activism.

In terms of community care when someone is experiencing a mental health crisis, putting that on one person, like a therapist, is very challenging and it's not sustainable. We all need to be invested in keeping us safe, and preserving our autonomy and agency. For some people, going into the hospital is the right thing. For me personally, my peer pod knows never to engage law enforcement and will do anything to keep me out of the hospital.

What this also forces us to do is really interrogate our feelings about suicide and self-harm because when we talk about preserving autonomy and agency, that means letting people make choices for themselves even if we wouldn't make those choices.

***How do we support each other better both in and out of the movement?***

Believing people and getting out of our heads that we have to investigate the truth is really important. When someone tells us what they're experiencing, we can believe that it's real for them. We also can let go of the responsibility to fix it. We can be supportive and hold space and not take it upon ourselves to own another person's shit. The flip side to that is having good boundaries. This helps us support people, and helps us check in with ourselves. We can't support everyone on our own, and we have to create support networks.

Support networks look like plugging into an existing affinity group or a group chat, and then being able to check in on your group. I have a couple groups of people I've done this with, and when I was in IRL spaces, I had an IRL group. We would share meds, buy each other dinner, and come over when people needed care. Maybe we're not changing the world, but we're helping each other survive by being present and being attentive to each other's needs. These are things that make the world less of an obstacle course. Most importantly, it's not just one person providing support; it's like 3 or 4 people involved in taking care of each other. None of us has to be the sole caregiver.

***Mutual aid requires the understanding that individuals and / or communities are the experts in their own lives and needs. So how can and should we apply this concept of solidarity with mental health care, rather than a prescriptive model?***

I think we can trust people in crisis to know what they need, and also be OK with people not knowing what they need.

We have to get comfortable with sitting with people in their pain, and interrogate the idea of what it means to be sane. Not all experiences of madness are crises. I might hear voices, talk to myself, or have big uncomfortable energy and that still doesn't mean I'm in crisis. I get to define crisis for myself. We need to be able to trust each other. I am the most accurate reporter of my experience. And I trust you to be the most accurate reporter of your experience. And

People of marginalized genders, Black and Brown folks, and Indigenous folks — we have to hold everything together, and it's painful. Care work is important, and holding things together is important, but if we could make some changes to the way we move, we could make things easier on ourselves.

***You've posted a bit about harm reduction and engaging in self-harm while coping with trauma. How can we be better about not shaming people for their coping skills when we show up for them?***

I'm a huge proponent of harm reduction. Harm reduction preserves autonomy and is a set of principles that helps guide us in keeping people alive while they choose what kind of risks to take. Sometimes we don't have a choice in the risks we take.

As this applies to self-harm, I'll talk about myself. I am somebody who lives with chronic suicidal intensity. I wake up with it and I go to bed with it. I consider it an extreme state that I'm always in. Some days it's more intense than others, but it's always there. And I believe that it is protective. I believe it gets louder when I'm in a place that feels unsafe. Things that activate the voice are times when I feel trapped and really stuck, or not being able to leave a situation or a place, or get away from something that's harmful.

It can be more existential too, like if I feel like I'm not able to move my life in a direction that I want. In addition to having a really awesome peer pod and support network and amazing comrades that I can call on when things get really ugly, I also have a set of tools that I use to manage some of the really loud painful suicidal intensities. Some of the tools I use to cope when things are bad could be categorized as forms of self-harm. I am somebody who cuts, and who uses substances, and that's because substances quiet the buzz in my brain and slow me down. I'm not able to make decisions as quickly as if I were sober. Cutting is something I use to distract myself. The sensation helps me recalibrate where my brain is, and what I'm seeing and thinking. It has worked for many, many years and continues to work.

case, let's talk about how we can support each other when shit gets rowdy. Let's have intentional conversations about that. Ask your comrades, "In the worst case scenario, what can I do to support you? Can we talk directly about support we will need in a physical or mental health crisis?"

In our daily lives, we shitpost and exchange memes and share the worst content out there. Let's also make some fucking space to talk about our feelings and planning how to support one another. It's uncomfortable, but just be like, "Hey, it matters to me that we all feel supported in this space." Movement work is better when we feel supported and cared for.

The other side of this is anonymity. The reality is especially with antifascists, we're all researchers and investigators. If one of us goes missing, we're probably gonna start digging. Just have some conversations about that. Save people the energy and heartache of having to dig when we can just say, "Hey, I'm really struggling. I need xyz." And then we all fucking do it because we protect us. We do, that's the whole point of our work.

***I'd like to talk more about a point you made in one of your threads about this idea some people have that being in the movement is supposed to hurt. Where do you think that comes from? How can we break it down?***

It's patriarchy, white supremacy and capitalism. It's the same bullshit repackaged and I reject it. I am not here to doxx nazis until I die. I want to build something better. Some of the people I love dearly are hurting themselves and won't give themselves a break. We ought to be rejecting it. What's the point of our organizing if we're just going to recreate the same systems that oppress us?

The folks that don't give themselves a break, who keep grinding, don't celebrate the wins, or have moments to feel joy and pleasure, they are burning themselves out. We're losing people. There are really consequences for that shit, and I think we deserve better. We work really hard.

I certainly don't know more about what you need than you know about what you need.

Solidarity in community care is about being empathic, asking questions, and remaining curious. We don't need to have all the answers, but in order to preserve autonomy we need to be curious. We can ask each other, "What do you need? What hurts right now? What might feel good right now? Are you scared?" We can trust each other to be the accurate reporters of our experiences, and reject this need to fix and prescribe each other's pain.

We can also expand the idea of what coping skills are appropriate for people. People have all kinds of ways of dealing with trauma. A lot of people might suggest to someone to drink water and do deep breathing exercises. But you know what helps me when I'm having a panic attack? Smoking a cigarette, because it helps me regulate my breathing. Therapists aren't going to suggest that. We can practice being open to what people are going to do to feel better, even if we wouldn't do the same thing. And if we have conversations about autonomy and agency when people are well, we will have a better time showing up when people are unwell.

One of the things that keeps me going is being a care worker and providing care to people. Even in my madness, even when I'm unwell. I have to be boundaried about it, but this is my gift and I want to share it. I don't want to hoard this knowledge. Anybody can and should be able to support another person.

In terms of peer pods, mine has men and women and nonbinary people. I'm very lucky to have a handful of cis men in my life willing to help hold me down when I'm in a crisis, but more cis men need to step up to the plate. We can't keep putting all the responsibility of emotional care on women, femmes, queer people, and Black and Brown people. Cis men need to interrogate their own feelings about care work. You can show up on the frontlines with riot cops, but you can't hang with your homegirl while she's curled up on the couch? Get it together.

***You've posted a few Twitter threads recently about care work as community defense. Can you tell me more about that?***

Care work is an umbrella term. I define it as emotionally supportive work, which can address all kinds of things, like food and housing insecurity, and mental and physical health concerns. The community defense piece comes into play in a lot of ways, and specifically is about addressing safety concerns. When we don't have access to the things we need to feel safe, that is a safety concern.

Providing community care and support is a form of community defense and belongs under the umbrella of antifascism. Doing antifascist work is hard. It breaks us. It makes us into different people. It permanently changes who you are to take on antifascist work, so care work can address some of those things. Dismantling and disrupting and destroying are important parts of liberatory and revolutionary work. But world-building and creating and constructing are the other parts. Some of these things that we're doing are very painful, and if we're not creating networks to support each other and pull each other through, then we risk losing our comrades. It's important and it's life-saving work.

Care work should be built into the infrastructure of the organizing we're already doing. We need to challenge this idea that if we're not doing enough, we are worthless. One of the things that keeps me going when things get really dark is knowing that I can plug into a community and provide support.

***How can we work together to build and support peer networks for community mental health/ trauma care?***

I think first it means centering and uplifting the voices of disabled and mad people, because we have been doing that work. Disabled people know how to survive fucked up situations; mad people know how to survive fucked up situations — because we've had to. So, when it comes to building the infrastructure, we can look to our disabled friends or disabled loved ones and value their lived expertise. Disabled people are most prepared, and also the most

negatively impacted by things like climate change. They already know and are worried about things like how the air is impacting them, and having access to medications, and rides to doctors, and all of that stuff.

Disabled folks have had to put contingency plans together and have had to navigate a lack of resources. And so there's a wealth of knowledge to be gained by stepping back and allowing the disability justice movement, and disabled and mad folks to share experiences, and talk about what works and what doesn't. And we can all also be working really intentionally to make things accessible, because accessibility is a huge fucking barrier. Being disabled, and being mad — those things can be painful because the world is not built with us in mind.

And so it is one barrier after another after another after another. We could make accessing certain things easier, like sharing food, giving rides, helping each other keep our houses clean, preparing for worst case scenarios, and talking really directly about what our comrades want if and when things go bad, and in cases when we're not able to make decisions coherently for ourselves. So like, how do we surround ourselves with people who we know are going to help us navigate that in a way that aligns with our values and our ethics?

I suggest everybody read *Care Work: Dreaming Disability Justice* by Leah Lakshmi Piepzna-Samarasinha, and especially my cis male comrades. I want the people who are least likely to do the emotional care work to hold themselves accountable and participate in care work more because we all have to do it. The people that are least likely to do the care work are also benefiting from the care work that's being done, right? Care workers are holding our movements together, and we need some support.

***How can people get started with care work for the first time?***

If you're already part of affinity groups or coalitions, you have a group of people you're interacting with on a regular basis. In that