Health and Safety at Militant Actions
by On the Ground

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Some tips and suggestions to help ensure personal and collective well-being in the face of police violence (and other adversities)

written and published by On the Ground
**Introduction**

As the intensity, frequency and scale of militant protests in North America have all recently and steadily increased, so too have assaults by those charged with protecting the institutions and elites being challenged by growing movements for social change. Each side is involved in a race to develop tactics and technologies that will provide an advantage in the streets during times of organized popular unrest.

In the interest of internal movement education and empowerment, we’ve developed this document to help protestors – or potential protestors – understand some of the risks involved in militant activism, as well as ways to improve their physical safety during actions. This advice has emerged from ongoing discussions within the “action medical” community – the street medics, clinicians and affinity group medics who provide preventive care, emergency first aid and aftercare at major demonstrations. The advice and tips in this document have all been developed and approved by numerous experienced “street first aiders,” including medical professionals such as paramedics, nurses, doctors and herbal/naturopathic practitioners. We hope you will find it useful, whether your involvement in an upcoming demonstration is that of curious onlooker or seasoned direct action affinity group activist.

The information presented here is intended to empower you, not frighten you. Remember, you are strong and capable — and without you we cannot win.

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**About this Pamphlet**

*Health and Safety at Militant Actions* was written and produced by On the Ground (OtG), an action medical collective based in Syracuse, NY. OtG is Catherine Dardaris, Adrianne “Ace” Allen, Justin Dewyea, and Brian Dominick.

This is a work in progress. We are very interested in feedback, regardless of your level of experience or medical background.

The advice presented here has been compiled from the results of field experience and clinical tests. We owe the contents of this pamphlet to groups and individuals too numerous to mention, but most significantly: Colorado Street Medics/Medical Committee for Human Rights; Black Cross Health Collective; MASHH; Adrienne Lowe and Scott Weinstein. While these and numerous other parties deserve credit for the knowledge offered here, responsibility for all contents is that of OtG alone.

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**More About Action Medical**

The people who provide health care at demonstrations fall under the general term “action medics.” Typically, these activists fit into one of three categories: street medics, who are on-scene and mobile at protests, and whose sole purpose is to care for anyone in need of medical attention; street clinicians, who staff rear clinics in order to provide advanced care, after care, or treat anyone who “drops in”; affinity group medics, or medical monitors, who are members of a specific group of protestors and responsible for their care, but can often assist others outside their collective. All of these activists are trained in at least basic first aid and chemical weapons response, and often naturopathic practices such as herbalism and accupressure, or advanced emergency medicine.

Action medical organizers try to establish a rear clinic at every action, usually staffed by at least an RN, an MD, and an advanced herbalist, as well as skilled assistants. Clinics are safe and relatively secure spaces, and anyone in need of medical attention should not hesitate to drop in, if possible, whether what they need is rest or emergency treatment.

**Complete trainings** for action medics, as well as basic trainings in Health and Safety (for protestors in general), are usually held at “convergence” spaces in the days leading up to a major demonstration, and now commonly in various cities between actions. We urge *everyone* to attend a basic health and safety session, and those interested in specializing as medics to attend medic trainings.

For further information, or to stay in touch with the action medical community, visit [www.action-medical.net](http://www.action-medical.net) on the Web (coming Winter, 2000). Updates to this document will be posted there, as will other important notices. Many new action medical organizations are forming, in addition to those already in place, and we encourage anyone with a serious interest to get involved.
Critical Incident Stress

Instances of brutality, even when not directly experienced, tend to have varying effects on different people. Whether you are injured physically or not, one can sustain “psychological trauma” as a result of bearing witness to situations of violence. It is thus imperative that activists take care of one another emotionally, as well as medically.

The condition most commonly affecting activists as a result of traumatic events, experienced or observed, is known as “acute stress response,” or “critical incident stress.” Symptoms include re-experiencing the events (dreams/nightmares, obsessions, intrusive memories, flashbacks, etc); avoidance (amnesia, substance abuse, self-isolation, etc); increased arousal (insomnia, irritability/outbursts, difficulty concentrating, etc).

These effects are not signs of insanity. You are not alone in experiencing them.

The best known means for dealing with acute stress include: (1) getting to a place that feels safe, and surround yourself with people with whom you are comfortable; (2) “processing” the experience, especially by telling the story or otherwise expressing the emotions surrounding the events which led up to your stress reaction. “Processing” should take place before the next time you go to sleep, and can take the form of writing, creating art, crying, dancing, or even taking action against oppression.

Affinity groups should make a “critical incident stress debriefing” part of their standard routine following each and every day of action in the streets. Strength is a product of cohesion and unity – so exercise it.

Preparing for Action

It is vital to wear proper clothing, eat well and get lots of rest and water before you go into the streets. All of these are scarce once demonstrations heat up. Yes, this seems like common sense, but by far the most typical ailments treated at demonstrations are related to activists’ physical preparation, or lack thereof.

Detergents can enhance the effects of chemical contaminants on your skin. Therefore, wash the clothes you will wear several times in soap that is detergent-free. Castile soap works best, but should not have fragrances or additives. Kirk’s brand is good (comes in a bar which can be shaved down for the washer), and the “Original” or “Baby” versions of Dr. Bronners (liquid) are even better. It is also important to keep in mind that the clothes you wear may well be ruined by chemical contamination.

Wash and rinse your skin, scalp and hair thoroughly, also with castile soap. Washing your body rigorously on the morning or eve of the action is essential to rid your skin of oils and dead skin cells, which help the chemicals stick to you.

Avoid applying any vegetable, mineral, petroleum or other oils to your skin—this means moisturizers, lotions, makeup & sunscreens. They trap chemicals to your skin.

Do not use Vaseline, mineral oil or any other substance as an attempted barrier—this is a commonly spread myth that would cause much more harm than good.

Do not wear contact lenses to demonstrations if there is any likelihood of police violence. Chemical irritants trapped under the lenses can cause permanent damage to your corneas in a short period of time.

Cover up as much as possible. Wearing a layer of clothing clinched at the wrists, ankles, and neck can prevent irritants from getting to much of your skin. Long sleeves and pants are important even when the weather is hot – they are the only proven skin protection against chemical weapons. For the external layer of protective clothing, synthetic water-repellent or non-absorbing materials are better than cotton or wool which will soak up chemicals. Rain gear, hair cover and gloves are good. Even disposable ponchos or rain suits are better than no water-repellant layer at all.

Fuzzy garments trap tear gas, so wear fleece and sweaters only under a protective layer. Garments made of synthetic petroleum-based fabrics (fleece)
can act like a wick soaking up chemicals, slowly releasing them for days after.

To protect your eyes and lungs from tear gas, your best bet is a gas mask with shatter proof lenses. US M17 masks and clones (East German M10M) are the best among those that are affordable to even a fair number of activists, but various other models are even cheaper and will do the trick. We advise against the popular Israeli gas masks – they are not intended for combat, offer poor visibility, and have glass lenses which have been known to shatter.

Short of a gas mask, your respiratory system can be fairly well protected by covering your mouth and nose with a large bandana soaked in apple cider vinegar. This partially filters tear gases. But since the vinegar itself is uncomfortable to breathe, we further recommend you wear paper surgical or shop respirators underneath, as long as you can still maintain a seal with the outer layer of vinegar-soaked fabric. Lemon juice, or even water, added to a bandana will provide better barriers than dry fabric, when vinegar is unavailable. Keep a couple of these pre-soaked bandanas in zipper bags until they are needed.

Shatter-proof swim goggles can protect your eyes from tear gases and spray chemicals. Make sure they provide an excellent seal, comfortable fit, and good visibility. Commercially-available defogger solutions will keep your goggles from steaming up and inhibiting your vision. Prescription swim goggles can be purchased for as little as $20.

Police horses (and for that matter other protestors’ feet) have a tendency to come down on your toes. Wearing closed-toed shoes is essential, and steel-toed boots are optimal, though of course comfort and agility are important factors.

It’s a good idea to have some money on you, but no more than you need for food, transportation and phone calls. Cash has a tendency to make its way into the pockets of police.

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**Chemical Decontamination & Aftercare**

Be aware that entering into a room (or bus, or train car, etc) with contaminated clothes, hair and skin reeking of chemicals will contaminate the room, causing discomfort to others. A contaminated room with carpets or textiles on furniture may reek for weeks. **Remove contaminated clothes as soon as possible**, placing them in a sealed bag.

**Shower in the coldest water you can stand.** This keeps your pores closed, preventing chemicals from entering the skin. **Do not take a bath.** Scrub rigorously with castile soap. Be careful not to get chemicals from your hair onto your face.

**Wash your clothes at least once with a harsh detergent soap,** or discard them altogether; but remember to wash them again in castile soap before wearing them back into action.

Expect to experience some degree of fatigue and illness for at least a few days. Drink a lot of water for the next several days, and avoid adding more toxins into your system (eat organic foods and reduce or eliminate drug intake, except for any medications important to your health.

Consult an herbalist about a detoxification regimen appropriate to you and your condition.

Then, if you remain in good physical and mental condition, get back out there and continue the struggle!
treatment, meaning there are no side-effects or possible complications, even if applied to areas not affected by pepper spray, or areas affected by tear gas. When you are unsure of the chemical in question, go ahead and use the LAW treatments described here.

For the eyes, drip two to four drops of LAW into each eye. There is no need to rinse the eye – let the injured person’s tear ducts carry out that task.

LAW can also be used on the skin of an OC victim. Simply saturate a clean (not necessarily sterile) gauze pad with LAW and wipe it on the affected area.

If your patient is having trouble breathing due to a contaminated airway, you may treat their mouth and inner nostrils. Squirt a small amount of LAW into their mouth and then add some water. Have them swish it around (but not swallow) then spit. Repeat as needed. For the inner nose, apply LAW to the tip of a rolled-up gauze pad and have the victim insert the tip a half inch or so into each nostril and swab the area.

Anyone who suffers facial exposure to chemical weapons and requests further relief should be seen by a trained street first aider at some point shortly after initial contamination. Action medics are trained and equipped to treat burns and skin contamination.

Bring an ample amount of water – at least 32 ounces – and sip it frequently, even on cold days. Dehydration is one of the most common and dangerous adversities encountered at demonstrations.

If the weather is cool and/or damp, be sure to wear or bring layers of clothing, including a rain suit or rain poncho and insulated, waterproof footwear. Hypothermia can set in at relatively warm temperatures if other conditions are right (or wrong) – it is sometimes hard to detect, and it can be deadly.

Carry whatever first aid/health care supplies you are capable of using safely. If you have been trained in first aid or herbalism, and you are confident in your knowledge, skills and judgment, don’t hesitate to be prepared for medical emergencies, even if you are not a designated medic.

Find out where any rear clinics have been established by action medical organizers, and know how to get there.
Staying Safe & Sensible in Action

A demonstration where police might attack requires a higher level of tactical awareness than your run-of-the-mill picket. Here are some generally applicable suggestions to help you stay safe and effective in the streets.

Always have a safe space in mind. All demonstrators need to be aware of a safe place to get to if a situation grows out of hand. You define “safe” and “unsafe” for yourself. For some, safe is among the locked arms of fellow activists, right on the front lines; but there’s no shame in a lower threshold, for any number of reasons. Safe spaces change depending on movement and barriers by other demonstrators and the police, etc. In some cases they include wide open spaces or public areas. Other times they may take the form of an alleyway or similar hiding spot. There’s no hard and fast rule about finding a safe space, but the time to have one in mind is before the shit hits the fan.

Similarly, you should always have an exit in mind. Assess how to leave a bad situation. Maybe it is best to be in a large group for protection. But if the police are herding you like cattle, then the large crowd is their focus and you may need to break up and leave in small groups. You should always be ready to quickly change clothing to avoid being recognized in case of pursuit. Getting away one moment might be your only chance to be active the next.

Use the buddy system and move in a group. If at all possible, make sure to have a partner you can trust, to whom you will always stay close. That way, at least one person always knows your whereabouts and condition. Working in small groups of people, all of whom you know well and trust with your own safety, is another important factor. Even if you are not part of an organized affinity group with a plan of action, it is helpful to at least be with folks you can rely on.

Remain aware of social dynamics and dangers. You need to know what is going on – not just in view, but around the corners and a few blocks away. Pay attention to the mood of the crowd and the police. Certain actions like property destruction and violence will likely be caused by or result in violent behavior on the part of police. Be aware of police movement and

Only flush eyes with a squirt-style drinking bottle. The only thing you should mix with the water is Rescue Remedy (4 drops per quart). Bottles should decompress quickly after being squeezed, and should not drip when inverted.

Anyone who has experienced serious respiratory distress as a result of exposure to chemical weapons should leave the area of risk entirely, and should not be in the vicinity of another chemical deployment for at least 24 hours, during which period they should be monitored for further complications.

Tear gas, “mace” or OC in the eyes: If the victim’s eyes are burning from contamination, you need to immediately determine if they are wearing contact lenses. If they have contacts in, instruct (and if necessary, help) them to remove the lenses immediately, lest permanent eye damage could result.

Next, you will need to flush the bulk of contaminants from the victim’s eyes. This procedure must be conducted with utmost care.

Have the victim kneel on the ground, and tilt their head back and slightly to one side. If they are not wearing water resistant clothing and the air temperature is cool, you may need to cover the victim with a raincoat, poncho or plastic bag — they are about to get rather wet. Stand in front of the patient. With a squirt-style drinking bottle [see inset] in one hand, use the thumb of your other hand to carefully but surely pry the upper eyelid of one of the victim’s eyes open, at least a slight amount (this is the eye toward which their head is tilted). With the tip of the water bottle a few inches from the eye to be treated, quickly squirt a strong stream of water into the eye at a slight outward angle. Use a sweeping motion, starting at the inside corner of the eye and moving toward the outside. It is important to squeeze hard on the bottle. Do not simply drizzle or gently squirt water into the eye — use a solid stream of water. The idea is to flush the contaminants out, not to dilute them. Merely moistening the eye may cause an increase in pain. Next, repeat this procedure on the other eye.

For pepper spray victims, after you have flushed the eyes of anyone nearby who has been sprayed, you may wish to apply a mild soothing agent to their eyes or skin in order to help ease the pain by moderately “neutralizing” the chemicals in OC. This solution, which medics refer to as “LAW,” consists of one part liquid antacid and one part water. LAW is a “do-no-harm”
amount of misinformation concerning first aid which is at present floating around the Internet and other activist rumor mills. Some of that misinformation is downright dangerous.

Here we will provide a limited amount of instruction pertaining to the treatment of chemical weapons contamination. There is no substitute for training, and we do not advocate the employment of these methods by anyone who has not been properly instructed by a qualified street first aid trainer. Additionally, these procedures should be practiced in controlled circumstances before they are ever used in street situations at actions.

If you or someone nearby has been contaminated by chemical weapons and is in need of care, you should immediately call for a medic. If no medic is available and you wish to attempt treatment yourself, follow these procedures precisely. Remember, we do not recommend this procedure for use by anyone without proper training and practice.

Always expect that someone who has been exposed to chemical agents is in a state of psychological shock. Approach them cautiously and introduce yourself. Assume they cannot see you. Obtain their consent before you begin to help them, even if they are your best friend. Stay relaxed yourself, and help calm the injured person.

Next, guide the person to the safest available spot you can find. Make sure they are sufficiently removed from any contaminants lingering in the air, and a good distance from police lines or other sources of danger. Open air is the most important factor for someone saturated in chemicals.

Breathing Difficulty: It is common for victims of chemical contamination to suffer from strained breathing, but exposure to fresh air should help noticeably and abruptly. If the victim’s ability to breathe does not begin to improve almost immediately after being introduced to fresh air, you can assume contamination of their lungs has complicated their condition, and consider this a respiratory emergency. At this point, you must call for advanced aid. Have the person sit comfortably. Sitting upright is the best position for recovering from respiratory distress. Encourage slow, calm breaths. If the victim is asthmatic and has an inhaler, help them find and use it. Do not use someone else’s inhaler on an asthmatic victim. Anyone who experiences prolonged breathing difficulty as a result of chemical inhalation should seek medical care as soon as possible — at the very least it may be an indication of other underlying illness.

different groups of protestors entering or leaving an area. Try to monitor the vibes and focuses of friends and foes at all times.

To know what is going on out of view, it is useful for demonstrators to be part of a group that regularly sends out scouts to investigate what the police and other demonstrators are up to. Since the situation at a dynamic protest will change frequently and rapidly, scouts need to check around and report back often. It’s a good idea to appoint a pair of group members as scouts, so they can operate together, and you’ll know the job is covered at any given time, as well as who is doing it. Consider the use of cell phone, secure cell coms, and walkie-talkies. But expect they may be monitored or sometimes disrupted by the police.

If you didn’t see it, it didn’t happen. It’s a common site at demonstrations for someone to approach a group of activists shouting, “The riot cops are coming!” As often as not, of course, there are no police coming at all. Acting on bad information is disruptive at best, and often dangerous. All critical information needs to be verified. If the person conveying info can’t claim to have witnessed something directly, or if he or she

The two basic types of chemical weapons with which activists need to be concerned are OC (commonly referred to as “pepper spray”), and the chemical irritant known as “tear gas.” OC is typically deployed somewhat directly, either through a foam or liquid spray or by a cotton swab applied directly to the eye. Tear gas is usually emitted from canisters, and typically creates a thick white cloud (though sometimes it is invisible), which can fill a street in less than a minute. The weapon known as “mace” is typically a spray form of tear gas, or a mixture of tear gas and pepper spray.

Tear gas canisters should be presumed to be extremely hot, and should never be picked up without heavy protective equipment.

Widespread use of either of these agents typically results in a generalized panic. People begin to run in various directions, and often times injuries result from collision between partially blinded protestors or passers by. Tear gas is especially effective on the lungs, and can cause serious respiratory distress, particularly among those with asthma or similar ailments. It also causes a minor burning of the skin, which can be quite painful. OC, on the other hand, primarily affects the eyes. It is extremely painful to the eyes and skin, but can also cause respiratory distress if inhaled or ingested.
is a stranger, then that information is unreliable.

Never pass along information that you haven’t already confirmed. Likewise, it’s a bad idea to convey your conclusions about something based on evidence you’ve observed or otherwise confirmed. Instead, inform people of the information you’re basing your own conclusions on, and let them decide for themselves how to evaluate it.

**Assume the riot cops may be coming.** While acting on rumors and fear-mongering can be disruptive and dangerous, it shouldn’t be surprising when the “authorities” do decide to blockade, surround, penetrate or break up a demonstration. This happens frequently, and the key to not being caught off guard is to **know** we are still living in a police state.

**Don’t panic; help others stay calm.** Sometimes at actions, the situation grows just plain frightening. But panic reduces critical judgment, adapting and coping abilities, and it can spread rapidly. Our best defense in a crisis is our collective cool – keeping each other centered & focused. If you can’t stay focused and centered, then you need to quit the demo to chill. Similarly, if someone else can’t be calmed down, they need to leave.

**Be prepared to be photographed.** If you don’t want to be photographed by the police or media at an action, the only sure antidote is to not attend. There is simply no guarantee that you will not be later identified, almost no matter how you attempt to disguise yourself. Assume some photographers are working for the police. Take measures appropriate to your own level of comfort or concern.

**Know your options, and what you and your comrades intend to do, in case of arrest.** This document cannot cover the various paths you may choose in case you or someone in your group is detained or arrested during an action. In order to be aware of how to prepare for and respond to such situations, you should seek training and advice from the team providing legal services to activists at a particular demo. This information changes from city to city, so always make sure you have current and applicable legal advice.

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**In Case of Injury**

Almost inevitably, people will get hurt at mass gatherings. Even when there is no violence to speak of, illnesses related to weather, hunger, dehydration and exhaustion are common occurrences.

The absolute most important action to take when there is a significant injury of any kind is to **get a trained and equipped medic to the scene** as soon as possible. The simplest and best way to do this is to call out, “MEDIC!” If none is within earshot, there’s a good chance the call will be relayed through the crowd until a medic can be contacted. Otherwise, you should send someone to find a medic.

Street medics can always be identified by red cross or star of life/star of resistance insignia worn prominently on their persons and/or gear. You are encouraged to verify that activists so-designated are trained and competent. Some medics, such as affinity group medics, may not be wearing insignia. Official emergency medical services personnel, such as EMTs/paramedics, will usually not be available in the vicinity of “insecure areas,” though for severe injuries or illnesses their attention is almost always preferred.

No injury or illness is too elementary or too serious to call for a medic – let him or her be the one to decide.

It is also key that you **send at least one person from your group to the “street first aid” trainings** that are offered in the days leading up to nearly every major demonstration. There, your designated medic will learn advanced chemical weapons treatments as well as basic first aid for injuries and sudden illnesses.

That said, we also recognize that medics cannot be everywhere at once, and some situations are considered too unsafe even for street medics to enter (let alone on-duty emergency medical personnel). Add to this the likelihood that deployment of chemical weapons often result in chaotic mass casualty situations, and it becomes clear why so often untrained protestors take to treating one another instead of calling for medics. (More commonly, we’ve found that general unawareness of the presence of trained medics is the cause for this.)

It is still the case, though, that **treatment of chemical weapons contamination can cause harm if it is not carried out precisely**, by a trained “street first aider.” This hazard is compounded by the fact that **there is a significant**