

# Safety Planning

Safety looks different for everyone. Here are some ideas to begin planning for escaping a potentially harmful situation.

Keep this information in a safe and private place where your partner cannot find it.

For assistance creating a personalized safety plan, call Catalyst's 24 hour crisis line at 1-800-895-8476.

## ***Preparations I can make as part of my action plan:***

- Start a journal of abuse. Include dates of threats, stalking, any property destruction. Ask someone I trust to keep it for me.
- Pack a bag with emergency money, clothing, identification, toiletries and medications for myself and my children. Hide it in a safe place I can easily get to.
- Ask someone I trust to keep copies of identification, keys and important papers for me.
- Open a new bank account. Have statements sent to an address I do not share with my abuser. Use only this account if I leave.
- Change passwords to e-mail or online accounts.
- Clear browser history on personal computer or use public computer when possible.
- Alert a neighbor that I trust to call 911 if they hear suspicious sounds or see a visible signal for help (like a towel in the window).
- Practice making an emergency escape (with my children) and traveling to the location I have chosen as a safe place.
- Join a support group or talk with a counselor.
- Make a list of other preparations I may want to consider:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

## ***Places I can go if I must leave home:*** (do not write down addresses)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## ***Important things to take if I have to leave:***

- |  |   |
|--|---|
| <input type="checkbox"/> Money (cash and checks)                         | <input type="checkbox"/> Cell phone and charger       |
| <input type="checkbox"/> ATM/Credit cards                                | <input type="checkbox"/> Medications                  |
| <input type="checkbox"/> Keys to car, house, work, post office box, etc. | <input type="checkbox"/> Spare glasses/contact lenses |
| <input type="checkbox"/> Driver's License                                | <input type="checkbox"/> Other _____                  |
| <input type="checkbox"/> Car registration                                | <input type="checkbox"/> _____                        |
| <input type="checkbox"/> Address Book                                    | <input type="checkbox"/> _____                        |

## ***Additional things to take if I have time:***

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Birth certificates for self and children | <input type="checkbox"/> Any court documents - adoption or custody records, restraining order, etc. | <input type="checkbox"/> Work ID/permit                     |
| <input type="checkbox"/> Automobile pink slip                     | <input type="checkbox"/> Social security cards  | <input type="checkbox"/> Passport or immigration papers     |
| <input type="checkbox"/> Lease, rental agreement or house deed    | <input type="checkbox"/> Welfare/MediCal identification   | <input type="checkbox"/> Marriage license or divorce papers |
| <input type="checkbox"/> Bank records                             | <input type="checkbox"/> School and vaccination records for myself and children                     | <input type="checkbox"/> Jewelry                            |
| <input type="checkbox"/> Insurance cards and medical records      |   | <input type="checkbox"/> Other _____                        |
| <input type="checkbox"/> Pictures and important personal items    |   | <input type="checkbox"/> Other _____                        |

**Notes:**