■ Steps to staying safe:

Keep a little money with me.

Keep my **cell phone charged** and with me.

Teach my children to **go to a safe place** (a friend's, neighbor's, or relative's home).

Teach my children to **call the police** when there is danger and to give their full name, address, and phone number.

Keep an **emergency bag ready** in a safe place.

■ Building my independence:

I can start **saving money** and store it in a safe place (like my own bank account).

I can **get help** from a counselor, an advocate, a health care provider, or legal services.

I can try to **keep in touch** with a friend or family member who I trust.

■ Things to put in my emergency bag:

3 - 1	,	3 3 3
Medications/		Cell phone/charger
prescriptions Phone card/change		Photo ID/ driver's licence
Extra keys		Restraining order
Bank card/ credit cards		Passports/ immigration
Custody order		papers/green cards
Work permits		Electronic Benefit Transfer (EBT) card
Photos of abuser	П	Clothes
Address book	_	Toiletries
Special toys	Ц	and diapers
Money		Other:

If you have proof of abuse, bring it with you.

■ Important phone numbers:

Police

Local Domestic Violence Hotlin	es
Local Sexual Assault Hotline	
For restraining order help call	
LGBT support	
Legal Aid	
National DV Hotline	1-800-799-SAFE
National Sexual Assault Hotline	1-800-656-HOPE
National Teen Abuse Hotline	1-866-331-9474
National Suicide Hotline	1-800-SUICIDE

■ Help after sexual assault:

If my partner or anyone else has forced me to have sex when I did not want to, I can:

Go to a local hospital emergency room.

Call the local or national 24-hour sexual

assault hotline:

Other resources:		



My Safety Plan developed by LEAP 09/2009. May be used unaltered without permission as long as you credit LEAP (Look to End Abuse Permanently), c/o Maxine Hall Health Center, 1301 Pierce St., San Francisco, CA 94115 www.leapsf.org

LEAP thanks San Francisco Kaiser Permanente and La Casa de las Madres for their contributions to this safety plan.



9-1-1

You deserve to be safe and happy.



My Safety Plan

Do not take this with you unless it is safe to do so.

My Relationship and My Safety









Being in a relationship that
is hurtful can cause a lot of
different feelings. It is
normal to have some or
all of these feelings.
•

Check all that you feel:

• • • • • • • • • • • • • • • • • • • •	oon an mar you room	
	Ashamed	☐ Confused
	Hopeful	☐ Sad
	Afraid	☐ Love
	Angry	☐ Numb
	Hopeless	□ Нарру
	Trapped	☐ Alone
	nat do I think	him?
au	out my relations	nip?
	I'm not sure how I for relations	•
	I'm not sure how I fo	eel about this
	I'm not sure how I for relationship.	eel about this
	I'm not sure how I for relationship. I think this relations	eel about this
	I'm not sure how I for relationship. I think this relations I want to end this re	eel about this
	I'm not sure how I for relationship. I think this relations I want to end this re	eel about this
	I'm not sure how I for relationship. I think this relations I want to end this re	eel about this

■ Many people love their partners and also feel that their relationships put them in danger.

Does my relationship have any of these signs of danger?

My partner has injured me badly
enough that I needed medical
treatment.

	My partner	follows	me	everywhere	I go.
--	------------	---------	----	------------	-------

Му	partner	has	threa	ateneo	d to	hur
my	children					

	Му	partner	uses	alcohol	or	drugs.
--	----	---------	------	---------	----	--------

My partner has forced me to have sex
when I didn't want to

	My	partner	has	threatened	to	kill	me
--	----	---------	-----	------------	----	------	----

My partner has threatened to	kil
himself/herself.	

My partner	has a	gun	or	can	get	а
gun easily.						

Other things	my	partner	does	that
concern me:				

■ Safety during a fight:

Move away from:

Weapons (guns and knives)

Small and dangerous places (car, kitchen, bathroom)

Move toward a safer place such as:

Room with exit

Room with phone

Public place

Police/fire station:

If I need to call the police:

I will give them **my address** and tell them if there is a **weapon**.

■ The closest place I can go if I need help or need to leave:

T Olloo/file station.
Hospital/clinic:
Friend's/neighbor's/family member's house:
(name/address/phone number)
Other: