

**Notes: Intersectional Solidarity: Weathering the COVID-19 Pandemic  
Discussion on April 14, 2020**

**Experiences of people during this time of COVID-19 lockdown:**

**Open Discussion with Guiding Questions:**

**Q: How has COVID impacted your work?**

**Community Organizing:**

**Challenges**

- It is more difficult to do group /relational organizing, relationship building, since people can not meet one-on-one, face to face.
- It is harder to “show up”
- Some organizations who used Zoom before COVID-19 now are competing with others as everyone is using zoom and now people have conflicts or are on Zoom frequently.
- Visitors are not allowed in the prisons and jails any longer so face-to-face meetings can not happen. Organizations who meet with detained individuals to get issues out to the community can not do that now. Zoom is not allowed for those on the inside, so activists are using snail mail. It is not the same. This takes much longer. It is harder to get the word out, to continue to do the actions, to conduct on-line rallies. You can not rally on-line like you can in person.
- It is difficult to create a rally on-line.

**Opportunities**

- Now I have the time and opportunity, through Zoom, to meet with others across the country and hear from people in different cities what is happening.
- This time allows for organizing across agencies and issues.
- We are having community meetings on-line. We are able to connect the people to lawmakers by pulling people together virtually and then inviting lawmakers to join.
- People are noticing that the health system wasn't working for them until this pandemic. Those who have lost their jobs have now lost their health care. Some are reaching out to their MCOs to advocate from computers/phone; access is more open from the safety of their homes.
- Increased opportunities to connect with community organizers. This has been an excellent opportunity for folks to see, understand and recognize each other's strengths in planning actions.

**Institutionalized Racism**

- This is an assault on the spirit. It is offensive that the media and politicians are surprised about the impact of COVID-19 on black and brown people. Structural racism has been around for decades.
- Upset at Cuomo thinking the disproportionate impact of COVID-19 on black and brown people is new/surprising and that it needs to be studied. This is offensive.

- Communities everywhere should have seen this coming and should have planned for it.
- There was a media story about a white mother, who was sick, shared that she needed help to care for her children. If a black mother said that she would be accused of abuse, neglect. Most black mothers would not have the freedom to say they are sick, and that they need help; that they could not take care of their kids. They would risk having their kids taken. Feelings of anger and disgust that this white woman who could express this and get sympathy and had nothing to fear. Mad, but empathetic. Living within the system of all this is a constant struggle.

### **Fragmented Response**

- People are being released from jail/prison with no support services in place for them. The public knows full and well that releasing folks is not the only thing to do to decrease incidence in jail/prisons, they need to do more. This is about the systems that we have neglected; that they have neglected.
- Advocates are feeling stressed for those who are released from jail with no connection to care. For those in recovery, we don't have the opportunity to know if we have a safe, supportive place to go and don't have a way to check. Some can not go home because home does not want them.
- As folks are released from jail and prison, this presents an opportunity to do a lot. We should get ahold of those who are returning and get their stories now. We should be sure they are getting the services they need. We should tell the real story before social media gets ahold of the release and turns it negative.

### **Q: How has harm reduction work, real public health work, how has that changed?**

- Outreach has grinded to a halt. Workers have family and need to take care of them. It is a delicate balance to find those who can go out to do outreach. Those who live on the street are lost. The pay to do outreach is not enough to ask them to risk their lives by getting sick. Some outreach is happening, but not nearly as much as it was before. And then even with the outreach, it is hard to get people to the resources they need. Buses not working. Harm reduction services are not happening.
- It has been heard that a lot of folks hired to do outreach have a history of drug use and thus have health issues that put them at higher risk. They have to weigh whether to go out and put themselves at risk or not do the work.
- Many HR programs operate under ground. Therefore, they don't have access to some necessary PPE materials, so they put themselves at even higher risk. Perhaps we can use this as an opportunity to advocate for Syringe exchange in spaces that don't have it; Legal syringe exchange would allow folks to get the support and resources they need to safely do the work.
- There is a shortage of naloxone in many communities.

### **What is happening with overdose nationally?**

- Real time data collection on fatal and non-fatal ODs in ERs is decreasing because hospitals are moving staff to deal with COVID; counting ODs is lacking. Tracking of OD is now difficult.
- There is a jump on ODs across the country.
- In TN they have shut down HR.
- Drug supply has changed and it is harder to get drugs through common shipping routes. People are using different or 'dirty' drugs and may be overdosing because of this.
- The on-line recovery groups have brought people out of just NA and into some other type of helpful groups. This has been a positive outcome of COVID on the recovery community.

**Q: What are the rapid responses you all are seeing? Things you have asked for that are now happening?**

- In PA, they have ramped up naloxone distribution significantly. Demand has skyrocketed. There are requests from underground programs as well as from corrections. However, we are not reacting fast enough. We are seeing deaths.
- COVID-19 has brought to light problems that already existed, like overcrowding prisons.
- Folks of privilege are struggling and not getting paid and it is hard to listen cuz they had it so good for so long and now they are getting a taste of what those who are marginalized in our society have dealt with every day, all the time.
- Perhaps we can respond by keeping some of these changes that are good, stick. I worry about those in recovery.
- Black and brown is getting left behind, yet again; we don't need studies and research; we need action. This is an opportunity for change. Letting people out of jail is an opportunity to show that release and fewer in jail is good. Crime rates are low right now.
- All these proposals that we have been fighting for, like releasing non-violent folks from prison, they are doing it.
- Telehealth Bup, we should do more of this.
- We need to advocate for older folks who are in jail. Advocate to have them released. We should collect stories and data.
- Mutual Aid - there is a new understanding of mutual aid: Communities acting for their own communities
- Urban survivors union in NC has drafted a list of demands. Coalition of United for Survival and Beyond also has a demand list to address lives in rural areas and concerns about homeless. Some are working with hotels to get people in shelter, but some are only offering shelter to people who need quarantine. Only offering after sick, not before.
- In some jurisdictions, city and county community services dept found \$\$ to put people in hotel rooms before they were sick. Also, city has used an old college campus to house people.
- City gave money for contracts among grassroots orgs to help their constituents. What happens when this ends? How can we keep these fund in the community helping those vulnerable populations?

**Resources:**

<https://aapcc.org/data-system>

<http://opioidmappinginitiative-opioidepidemic.opendata.arcgis.com/search?collection=Dataset>

Urban Survivors Union Demands Doc:

[https://drive.google.com/file/d/1W\\_mZv4M62Vyz6BsyY3Qd61ci929RgSC3/view](https://drive.google.com/file/d/1W_mZv4M62Vyz6BsyY3Qd61ci929RgSC3/view)

Local OD Info:

<https://nemsis.org/>

[https://www.cdc.gov/nchs/ahcd/ahcd\\_database.htm](https://www.cdc.gov/nchs/ahcd/ahcd_database.htm)