Moving Through Contagion Fear, Preparing for Recovery

Note: This essay builds on a March 7, 2020 essay by Larry Kleinman entitled *Organizing in a Time of Approaching Pandemic: Campaigns and Contingency Planning Amid the Effects and Fears of Coronavirus*.

A pandemic is no longer approaching. The World Health Organization announced on March 12th that it’s arrived. But you already know that, since you’re most likely reading this from home where social distancing has stationed you indefinitely.

Officials have shutdown events and gatherings, schools and public venues. Cultural events are canceled; sports leagues at all levels have stood down, most for the rest of their season. Tens of millions of workers are suddenly working from home—those who can. Waves of layoffs are just beginning; the stock market is gyrating like few times in its history.

In short, it feels now as if March is canceled. Some have quipped that “March Madness” has become “March Sadness.” April is canceled, too, or all but; likewise, May and June.

As this all unfolds at a dizzying pace, the questions dominating our world today are no longer “if” or “when” but “for how long?”, “how bad?” and “when will we get back to ‘normal’?” Not to mention “will I or my loved ones fall ill or...?” And for us, as social justice organizers, “what can and should we do?”

The big ideas of this essay:

- We have not, as a country or world, experienced this broad—near universal—sharp and sudden social disruption. **We should plan for it to last for months, not weeks.**
- In these early days, the “shutdown” measures are far more sweeping than the (so far) very limited instances of visible health danger; this disconnect distorts—both too high and too low—popular understanding of the threat and the strategies to combat it.
- Social distancing—self-imposed and institutionally declared—will become an engrained norm that societies and communities will struggle to reverse, even after authorities assure us that it’s safe enough to return to our customary routines.
- A key tipping point on the path back to “normal” will be what I call “lived recovery”: **when people have their own personal sense of acceptable threat proportionality.** We resume our routines only when we reach that point. Our individual senses of acceptability will factor in both mega-scale information (statistics) and micro-scale experience (people we personally know or in our immediate environs).

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They are also posted at The Forge, an organizers’ journal, [www.forgeorganizing.org](http://www.forgeorganizing.org)
Social change movements broadly have a unique and universally-shared opportunity to fashion and test new tactics to advance our missions as we engage/defend our communities.

Catching up to Today (March 16th): the collapse of the in-person eco-system

In my March 7th essay, I suggested that organizations evaluate whether planned events, actions or gatherings would still be viable. If they were in-person based, the answer now is a definitive “no”. I also had proposed that, for activities 30 day away or longer, deciding now whether to cancel seemed too speculative. With college commencement ceremonies already beginning to cancel (which I cited as an early “indicator”), 30 days has proven too optimistic. Whether you’ve declared or not, your event this spring isn’t happening. That’s how fast events are moving.

Students will not return to campuses. Public school systems are shutting down for the rest of this school year, switching where possible to home/remote instruction. Offices and most retail businesses may not re-open after this initial closure period or may operate in dramatically different ways. The Pope canceled Holy Week gatherings and local church services will go online (if they haven’t already).

Every family, community, organization and institution need plans for the consequential direct and indirect impacts that have begun to land. As outlined below, we can start by sketching some key underlying elements: contagion risk/fear management, economic impacts, and emotional tolls. We then apply our understandings to meet the “Must Do” challenges as we begin to visualize the paths to recovery in its many facets.

Contagion: factors, dynamics and fears

Here’s some of what seems relevant to a grounded sense of how bad it will get, how quickly, and when/how we might know that the worst has passed:

- “Flatten the curve”. That’s the term public health officials use to describe their principal strategy for impacting contagion. (Google it to find ample explanation and graphics.) The fundamental goal is to spread over a longer time the number of people falling ill, especially seriously so, and thereby lessen the chances of overwhelming the health care system.
- “Containment” and “mitigation”. Public health officials project that some 100 million or more people in the U.S. will be infected with the virus. Only a small fraction will require hospitalization and a fraction of those will be fatal. “Social distancing” is a “mitigation” strategy to reduce exposure. We’re beyond the point of preventing exposure. In many localities, health officials no longer have capacity to trace the social contacts of an infected individual (a/k/a, “containment”). They are especially focused on vulnerable populations: the elderly and those with chronic health conditions, for whom illness and fatality rates will be higher. Vaccination—the ultimate prevention tool—is thought to be a year off.
- “Health care shock”. This is how officials and analysts describe what they fear are looming shortages—bottlenecks in the system—of hospital beds, ventilators and even non-quarantined medical staff.
● **Summer could help.** Viruses flag in heat, possibly occasioning a warm-weather lull. However, the number of patients, a lagging indicator of infection, could continue to rise, feeding public leeriness, as well as a generalized fear of a cold-weather resurgence.

In sum, as we struggle to discern threat levels from ever-present “breaking news” statistical reports, a core truth is that, *for most people, risk of serious illness or death is very low.* Even so, individual stories in the mass media, our social networks and our families will impact our fear levels both positively (recoveries, especially without hospitalization) and negatively (deaths).

**The economy: how far down and for how long?**

Even assuming that health trends gradually lower our fear of illness, *the economy is very unlikely to bounce back swiftly.*

● The collapse of in-person events—sports, cultural, conferences, political rallies, graduations ceremonies, even weddings—plus travel, hospitality and, increasingly, retail has delivered an earthquake-type blow across a huge expanse, generating cascading waves of layoffs. Some economists have described this as a “demand shock” which suddenly shuts off consumption, which drives 70% of all economic activity. One analyst termed it the “most widespread, abrupt cessation in history.”

● We should assume that this shutdown *will last for an extended period and not the month or two initially announced.* As a thought experiment, try imagining a baseball stadium even half full of fans in June while contagion and illness are reported to still be on the rise. Micro-scale operations (e.g., small business) may resume sooner than large scale public activity.

● The economic blast zone will promptly widen to include real estate, vehicles and appliance sales, and beyond, repeating the unraveling experienced in recessions and depressions.

As with every cataclysm, the most acutely affected will be workers, tenants, low-income people, immigrant communities, communities of color, and the homeless, among others. (More on that in the “Must Do’s” section, below.)

**Our daily realities and evolving mindset: drivers of how we feel**

Taking the earthquake analogy a step further, it may be useful to think of our current reality as the aftermath of a catastrophic *social* (not just economic) earthquake, one which brings down or badly compromises the structures that undergird our web of in-person interactions. After actual quakes, people avoid being inside buildings, lest an aftershock suddenly level them. Today, we are similarly living outside of key social structures. And like earthquake survivors, we don’t know long it will be.

Fortunately, most of us have intact connectivity via internet and/or cell service, and, for now, our daily provisions. We’re grateful for that and we mobilize ourselves to adapt. Soon, though, the *distancing* will feel more like isolation and even confinement. “Cabin fever”, may set in,
compounded by uncertainty and ongoing fear, exacerbating pre-existing chronic anxiety about, well, everything.

A central part of our work, personal and organizational, is managing our well-being, generally, and our emotional stability, in particular. We can better sustain ourselves and each other if we stay aware of our expectations and proactively adjust them. Here are a few other ideas and perspectives:

- **Anticipating triggers.** We have already been in a near constant state of “triggered” throughout the Era of Trump, so we proceed with few “good nerves.”
  - *Trump has made—and will continue to make—this crisis worse and more long-lasting.* He will continue to fulfill his “Aggravator-in-chief” role in every way: dismantling (and then denying/disowning) the centralized infrastructure for pandemic response preparedness; suppressing and discouraging proactive response (once the virus emerged in China); confusing the public by exhibiting risky personal behavior; forfeiting (long ago) the leadership potential to restore a reliable basis of confidence
  - *The daily tally.* Media reports on numbers of infected, ill and deceased will be on our screens and in our conversations. Hard though it will be, we do well to also take a longer view and follow the broader trends.
  - *“Atypical” fatalities.* High profile—but anecdotal—reports of nonelderly dying of COVID-19 intensify a Russian Roulette mentality even though such deaths will eventually be recognized as highly unusual and/or possibly explained by medical analysis. We should expect, though, that, in the moment, such reports will be jarring.

- **Internalize the proportionalities.** The prevailing lack of awareness or appreciation of the influenza mortality baseline will intensify reactions. We occasionally (and more so now) hear statistics about several tens of thousands who die of flu annually. Yet practically no one ever hears someone say: “my elderly relative died of the flu.” We have a vague notion that flu is a threat to the elder and frail, but we somehow assume that folks die of some other condition like pneumonia. In other words, flu—in the guise of coronavirus—suddenly seems lethal. This contributes to our disproportionate thinking, reaction and, in turn, to fear.

- **“Let’s talk.”** In a time of social distancing, hearing a friend, loved one or colleague’s voice (or also seeing their face via FaceTime) is intrinsically central to our new or expanded routines of interactivity. Consider making a deliberate effort to promptly increase the proportion of calls (versus texts, and emails), rather than waiting for isolation to set in.

Our meta-challenge in the coming months is moving ourselves and each other from fear to caution. This navigation will be fraught, nonlinear, and, at times, completely subjective, but we will must continually move forward toward right-sizing expectations.

**Imagining “recovery” in many dimensions**

Admittedly, it may seem premature to devote ourselves in any meaningful way to visualizing a time when the worst is clearly behind us. Some might argue that our duty requires full focus on immediate and near-term response. Our social justice mission, however, also calls us to prepare to assert our vision and plan for deep and structural change as our nation restores, repairs and
re-builds from the ravages of both coronavirus and Trump. Here are thoughts on those challenges:

- **Health recovery.** This arc extends from individual patients to the macro-system, including permanently eliminating barriers to equitable access. It includes stronger standards for health worker safety, the chronic (now acute) health worker shortage, and progress toward universal health care. COVID-19 response will be both a system “stress-test” and a spotlight on gaps and inequities.

- **Recovering our government** …or at least some crucial aspects of it. This meta-crisis has driven home (literally) the indispensability *on a personal level* of competent, trustworthy and effective government.

- **By the (rough) numbers.** We won’t need to wait for “final” health and economic numbers. Tens of millions will need support and, ultimately, nothing less than a comprehensive approach will do. There are powerful “new deal” initiatives already proposed that can be expanded and re-worked to address the impacts of the pandemic.

- **A “V” versus “U” recession.** Analysts hope that the economy will bounce back as swiftly as it fell, i.e., that consumer demand will have simply been put on brief hiatus. That’s a “V” recession: a quick down and up. A “U” recession connotes a much longer period at the bottom and a much longer climb out (think 2008-09). Whether it’s “V” or “U” depends predominantly on restoration of consumer confidence which defends on fear subsiding.

**How to do the “Must Do’s”: updated**

In the March 7th essay, I cited the Census and elections as “Must Do” work, focusing us on the “how” not “if.” As of now, there is no call to postpone the Census, especially given that its initial phase is online. A few governors have announced delays in primary elections; others may join. Primaries that are exclusively for presidential nomination may be canceled or postponed at request of the political parties. This summer’s political conventions may well be canceled or delayed.

- **To state the obvious, there is an emerging set of mega-tests directly tied to the effects of social and economic shutdown, including:**
  - access to testing and to health care;
  - access to childcare, including neighborhood-level collectives and/or recruiting of college students returning from now-closed campuses;
  - effective education engagement (gaps and failures in current on-line approaches)
  - income support, eviction protection; utilities no shutoffs (some already announced, including major internet service providers, an acknowledgement that internet service is now a basic necessity);
  - rapid deployment of free mobile WiFi in underserved areas to facilitate on-line education, tele-medicine, basic communications, Census participation and more.
  - expansion of voting at home (along with expanding relational voting work)
  - moratorium on ICE activity;
• Seeking re-affirmation from local officials (and enlisting new ones) of non-cooperation with ICE, a step newly urgent to serve public health and safety;

Finally, the social justice movement community has a radical opening for organizations, networks and allies to put aside “frenemy” turf and brand frictions to address the age-old critiques about tired organizing tactics. Mainstay tactics, such as marches, have been suspended for all of us simultaneously; none of us are to blame or blaming others. Now, we have the space to unleash creativity and collaborate widely on fashion/test new ones.

Census engagement are May 1st seem like good places to start. I offer these two ideas by way of example. For May 1st, coronavirus has upstaged the traditional “day without…” call. Schools will be closed. Immigrants who are working will likely feel more urgency to maximize their earnings; we would want those in health care to stay on the job in the community and national interest. In place of mass marches and work stoppages, what if we amassed and posted selfies of individuals, families, neighbors, co-workers (observing social distancing) with brief individual messages of pride, resilience, safety, contribution, and re-dedication to achieving an inclusive society?

On the Census, could we convert “assistance centers” into mobile operations? An organizer could visit an apartment complex courtyard (preferably having notified at least a few residents known to live there), bringing a hotspot and tablet, possibly a loudspeaker, inviting residents to approach (no closer than six feet) and provide data for completing the Census form? Alternatively, the resident could bring a smart phone and, standing at a safe distance, get on-the-spot guidance working through the form? The free community WiFi stations could figure in as well. So could actual conversations about how folks are doing and what our organizations are fighting for in this moment.

On closer analysis or when tested, these two ideas might prove impractical or ineffective. Above all, we need the widest, most vibrant spaces for conjuring, vetting and operational planning for the strategies and tactics that will meet this moment and quite possibly transform the way we work and engage when this time has passed.

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2 One example of a product of such a process: Eli Pariser’s Medium post March 6th laying out two dozen ideas and considerations under six headings, synthesized principally from six strategic thinkers.