Letter from the Director:
Sunday, March 15, 2020

The COVID-19 pandemic is everywhere in the news, and in our daily lives.

Although the World Health Organization declared the outbreak a “public health emergency of international concern” on January 30, a general sense of complacency prevailed in the US, and precious time was squandered, with limited to no screening or preventive measures put into place. In the interim, thousands died in Wuhan and surrounding Hubei Province in China, and the epicenter shifted to Italy, which is currently under lockdown and faces an overwhelmed healthcare system.

Most experts suggest that the US is very likely to follow in Italy’s footsteps, and that we are just 1-2 weeks behind them. The entire US had fewer than 500 confirmed cases one week ago, but today that number surpassed 3,100 across 49 states. School systems and restaurants are closing, concerts, shows, and sporting events canceled, and hospitals are gearing up for the inevitable crush of patients. Meanwhile testing remains woefully inadequate, and there continues to be no systematic screening for signs of infection in vulnerable hubs.

As pointed out in today’s NY Times, in addition to the infectious disease crisis itself, we also face a uniquely American problem: lack of any centralized public health policy or authority. Our country’s emphasis on individual rights and limited federal power means that key decisions affecting public health are left to the patchwork of state and local governments. Many of us have experienced a process that feels reactive, ad hoc, and at times completely arbitrary. Various institutions have attempted to step up and fill the leadership void, but it can be overwhelming to filter through the cacophony of different voices and perspectives in such a rapidly changing environment.

All of this ambiguity exacerbates everyone’s understandable fear and anxiety about the virus, which in turn feed feelings of helplessness, mistrust, anger, and blame. Just as in the prior examples of SARS, Ebola, and MERS, we are seeing with COVID-19 that infectious diseases often quickly become racialized, with the result that innocent people from minority backgrounds are targeted, bullied, and verbally and physically assaulted. Social media can contribute to the spread of misinformation and anger-inducing “clickbait,” fanning the flames of xenophobia and racism that only further worsen an already frightening situation.
Our Center believes that the antidote to fear is understanding, and we take an evidence-based approach to education, prevention, and community engagement. In that spirit, we have curated the list of resources below to support you, our community. These include: trustworthy sources for learning about COVID-19; articles describing how to talk to young people about the virus; strategies for managing anxiety; information in different languages and adapted for different cultural groups; multimedia resources for youths and adults alike; information for schools as they transition to online learning platforms and work to support students from diverse backgrounds; and resources related to xenophobia, racism, and examples of helpful institutional responses. We will continue to update this page with more information and resources over time, so please check back.

Additionally, our Center is acutely aware that times like these pose unique challenges for students. Schools have a very important role to play as institutions that possess both authoritative and supportive roles, but they also are under significant pressure to take decisive action in the absence of sufficient information. This pandemic poses immediate logistical challenges while also hastening our entry into a new era for education that relies on technology and distance-learning platforms. Low-income and international students are particularly vulnerable in the midst of these changes. Many members of the latter group are currently enduring a “double trauma,” having already helplessly witnessed loved ones in Asia combating the initial wave of the epidemic, and now having to relive this experience a second time as the US struggles with insufficient strategies and supplies. We will continue to provide updated resources to schools as they attempt to support all students through this difficult time.

All of us have a role to play in stopping the spread of both coronavirus and “coronaracism.” We must educate ourselves and practice evidence-based public health measures such as hand-washing, social distancing, avoidance of large groups, and self-quarantining in case of symptoms. Additionally, we must come together as a society to “flatten the curve” and preserve precious medical resources for those who need them most. To paraphrase Graham Medley, a Professor of Infectious Disease Modeling: Behave as though you already have the virus. Don’t think about changing your behavior so you don’t get it; think about changing your behavior so you don’t give it to somebody else. Additionally, we can all speak up about injustice and make it clear that racism and xenophobia are unacceptable responses in our communities.

The COVID-19 pandemic is everywhere in the news, and in our daily lives. But it didn’t have to be that way. And we are hoping that with your help, it won’t remain so.

Sincerely,

Justin Chen, MD, MPH
Executive Director, MGH CCCSEW