Talking about Covid-19 (aka the Coronavirus)  
Updated March 19, 2020

As indicated in our original statement, we have worked hard to be thoughtful and balance panic responses with taking this situation seriously and following guidelines for how best to respond to minimize the harms done. We have worked hard to keep some in person supports available within the state’s guidelines, and because we know that there are many people who simply have no safe home in which to stay put. We are continuing to move forward with all that in mind, but have also had to face some limitations to our capacity and the changing recommendations from the Centers for Disease Control and the Commonwealth. Some of what’s new/shifted:

- **We are keeping our centers open, but on a more limited basis.** In Springfield and Holyoke, this means not having more than eight (8) people in the center at a time, and having a time limit on how long they can stay. At present, for both Pittsfield and Greenfield, the doors will be locked, and people will need to knock, and most support will happen at the door rather than in the center. In both cases, our focus will be on meeting basic needs including bathroom access, provision of snacks, coffee, and water as long as our supplies allow, and opportunities to warm up, dry off, charge phones or access the Internet as much as we can manage.

- **We are keeping our peer respite open.** We will also be conducting initial conversations to determine if a stay would be a fit by phone rather than in person, and will be asking more questions related to the current health situation. We will also be asking people to refrain from having visitors at the house, and encouraging them to avoid coming and going from the house as much as possible so as to minimize risk of exposure.

- **All in person groups and classes have been put on hiatus until further notice, though many have been moved to groups that can be accessed by phone or web.** (Listings of RLC-sponsored groups along with several other on-line and phone supports are available here: [http://tiny.cc/RLCTempgroups](http://tiny.cc/RLCTempgroups))

In all instances where in person support is happening, priority will be on people who do not have another safe place to be, and/or who are under serious threat of forced hospitalization. People who do have a safe place to be are encouraged to stay home, and make use of on-line or phone supports. And here’s what remains the same from our original statement:

- **Sick employees are being encouraged to stay home, and we are prepared to provide additional paid leave time in order for them to do so.** (Do bear in mind, however, that even people who don’t feel sick may have been exposed and infected by the virus and be able to spread it without realizing they’re doing so, so other precautions are still important.)

- **Team members are working on measures to increase cleaning of frequently touched items that may have been cleaned less frequently or are more easily overlooked.**

- **Everyone is being encouraged to wash their hands frequently (essentially as is good practice all the time, and particularly during flu seasons, and so on), and to avoid touching their faces.** People are being reminded that – when they have physical contact with someone else – they should pay special attention to washing their hands and avoid touching their face, or else avoid the physical contact and practice keeping space between themselves and others (the current recommendation for ‘social distancing’ is more than six feet apart).
• People in the community who have homes and are able to safely stay in them are being encouraged to do so and to use phone or on-line supports instead of visiting centers.

Again, all of these points are subject to change based on our ability to cover shifts, and changing guidelines. We will certainly be keeping an eye on new information as it becomes available. However, we will continue to hold awareness that people will not stop being homeless, needing support, or having other needs because this is happening.

In sharing this information, we would also like to offer several other points as follows:

1. **The major reason for closures, cancellations, and recommendations to increase safety precautions is to slow the spread of the disease.** This is because too many sick people all at once is more than our healthcare system is prepared to handle. It is *not* likely to be deadly to the majority of people, and is *not* a reason for everyone to panic, but an overwhelmed healthcare system really is a big deal and would lead to additional deaths. The graph pictured here does a good job of explaining this concept. In reality, some research has suggested that while the death rate is much lower, the need for medical intervention with the virus is around 15 to 20%. This means overcrowded Emergency Rooms and hospitals, and the inability to care for many who show up there due not only to the virus, but for any other reason, too. To read more on this point, read ‘What Does the Coronavirus Mean for the US Health Care System? Some Simple Math Offers Alarming Answers’ by Liz Specht. [http://tiny.cc/Covidmath](http://tiny.cc/Covidmath)

2. **The majority of people who are getting severely sick or dying from Covid-19 are older people or people with existing health issues that lead to their immune systems being compromised, but that doesn’t mean that older people or people with existing health problems don’t matter.** While it’s fair to evaluate your personal risks and practices based on your age and health conditions, it is not okay to say that the whole issue is “not a big deal” because only older or disabled people will die. Read the article, ‘Don’t Reassure People By Saying Coronavirus is More Likely to Harm the Chronically Ill & Elderly’ by Suzy Berkowitz for more on this topic. [http://tiny.cc/Coronasickelderly](http://tiny.cc/Coronasickelderly)

3. **Stop buying all the face masks.** There’s now conflicting information about the usefulness of face masks circulating. Some are feeling that the media has misled the public by saying face masks are of no use or even potentially harmful, and that masks can be somewhat helpful in stopping people from getting sick. (For more on this, read ‘Don’t Need Masks Backfired’ by Zeynep Tufecki [http://tiny.cc/FMTruths](http://tiny.cc/FMTruths) Many others have said that unless a mask is properly fitted and
specifically made for the purpose of preventing the spread of illnesses, it won’t work. (For more information, read ‘Masks can’t stop the coronavirus in the US, but hysteria has led to bulk-buying, price-gouging and serious fear for the future,’ by Scottie Andrew and Jessie Yeung. http://tiny.cc/coronamasks) In this sea of information that is changing every day and coming from all sides, it’s hard to be certain what the whole truth is, but at a minimum, we know that masks certainly enough on their own, and buying up all of any particular item isn’t enough to keep any of us safe. In the end, it leaves many of us in serious harm’s way.

4. **Toilet paper also won’t save your life, so stop buying it all.** It’s unclear why toilet paper is among the things that people are buying up, but the only effect it will actually have is leaving some people without toilet paper. Additionally, because everyone fears being the one left without toilet paper, now many of them feel like they have no choice but to try and buy it all up, too. According to Oregon State Police, some people have even started calling 911 for toilet paper. This is all unnecessary. Please don’t keep doing this. Toilet paper for all! For more on this topic, please check out ‘The Psychology Behind Why Toilet Paper of All Things, is the Latest Coronavirus Panic Buy’ by Scottie Andrew. http://tiny.cc/coronatoiletpaper There are now all kinds of toilet paper alternatives popping up. Here’s one of several: 15 Ways to Wipe Your Butt When The Toilet Paper is Gone http://tiny.cc/TPAlternatives

5. **While hand sanitizer does help, handwashing is actually more effective (and it doesn’t need to be ‘anti-bacterial’).** While hand sanitizer is helpful (especially if you’re not going to be near a sink), handwashing is actually more effective. Also, since Covid-19 is a virus and not spread through bacteria, antibacterial soap provides no extra protection whatsoever. For more on hand sanitizer, read ‘Coronavirus Has Caused a Hand Sanitizer Shortage. What Should You do?’ by Ganda Suthivarakom. http://tiny.cc/coronahandsanitizer

6. **The death rates being announced are probably not accurate, and are likely to end up being lower, but we won’t know for a while.** Right now, people are mostly just dividing the number of diagnosed (or strongly suspected) cases of Covid-19 with the number of people who have died as a result of it. However, because countries are varying widely in how many people they’re testing, and the availability of reliable tests has been shaky in places, we aren’t actually identifying or counting many people who’ve probably been infected. If many more people actually have been infected and just not gotten sick (or sick enough to require medical attention and be tested), then the death rate will end up lower. However, some people are still sick and its unclear how they’ll do moving forward, so there’s always a small chance the rate could also go up. We won’t know a more accurate percentage for a while down the road. For more on this topic, read ‘Did the Coronavirus Get more Deadly? The Death Rate, Explained,’ by Julia Belluz. http://tiny.cc/deathrateCorona

7. **It’s fair to worry about people who are homeless and what protections they have access to during this period, but it is not fair to use that worry to justify force.** In some areas, Covid-19 risks are being used to justify involuntarily detaining or forcing people into containment in order to ‘quarantine’ them. However, force is still force, and in actuality, forcing people into settings where they’re incarcerated in large groups is actually far more dangerous. This goes for psychiatric facilities, and homeless shelters, too. Read ‘The Incarcerated Population is Especially Vulnerable to Coronavirus’ by Alexander Lekhtman for more on this topic.
8. Yes, this appears to have started in China, but no, people of Asian heritage do not pose any more of a risk in this country than any other person present in this country. Many people of Asian heritage were born here, or came here long ago. Also, Asia covers a lot of ground and several countries, not just China. The risk posed by someone of Asian descent is exactly the same as the risk posed by any other average person. People who’ve visited certain parts of China very recently (as well as a few other countries at this point) may pose an additional risk, but you won’t know who they are just by looking at them, in part, because many of them are not of Asian heritage. Do not allow your fear to lead you to discriminate against and hurt others. Harassing other humans is not a vaccine for Coronavirus. Read ‘As Coronavirus Spreads, So Does Xenophobia and Anti-Asian Racism’ by Suyin Haynes. http://tiny.cc/Coronadiscrimination

9. No, it’s not necessary to close or cancel everything. It is necessary to cancel or close many things for the purpose of ‘social distancing,’ and certainly useful to slowing the spread of Covid-19 to temporarily limit the amount of time spent around other people overall. However, not everyone has a home to go to while staying away, and not all needs will stop during this period of time. Homeless shelters, domestic violence shelters, various group homes, and an array of other services will need to keep going in some fashion. Please, in any conversations had about closing or cancelling ‘non-essential’ activities, let’s remember the many people whose basic need for a home (etc.) simply aren’t being met. One place to look for recommendations on how to reduce risks in the community environments that can’t be closed can be found on the Centers for Disease Control (CDC) website. http://tiny.cc/CDCCorona

For a printable, one-page (back and front) info sheet, visit (including thoughts for drug users and sex workers): https://bit.ly/2QfJWLo

Again, if you are someone who has lost needed supports due to Covid-19-related closings, we have added several on-line groups that will run until further notice. We are also compiling other phone and on-line resources. For more info on those resources visit: https://bit.ly/3d5eEku

To learn more about any cancellations or closures we have had to make, visit: https://bit.ly/2QjdTu3