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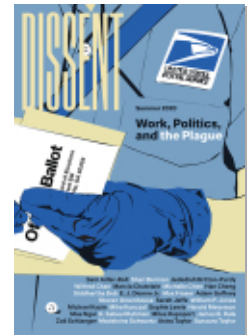
Work in the Time of Coronavirus: Belabored Stories

Sarah Jaffe, Michelle Chen

Dissent, Volume 67, Number 3, Summer 2020, pp. 125-148 (Article)

Published by University of Pennsylvania Press

DOI: <https://doi.org/10.1353/dss.2020.0042>



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Work in the Time of Coronavirus

Belabored Stories

Sarah Jaffe and Michelle Chen

As the COVID-19 pandemic spread, it became clear that for many in business and government, working people are worth only what we can contribute to the accumulation of profits; if we're not productive, we're expendable. While many have been forced to stay home and worry about how to pay the bills, others are working longer and harder in newly dangerous conditions. Since March, we have been collecting short stories about what workers are facing during the crisis, and how they have been fighting back, eight of which you can read here. For more stories, visit the Dissent website, where we continue to bring you the latest updates.

Let's Shut It Down

Food service and retail workers in North Carolina, organizing with NC Raise Up, the local chapter of the Fight for \$15, are on strike today after being deemed “essential workers” yet treated as anything but. Jamila Allen, who works at regional fast food chain Freddy’s, told me she’s striking “because we need healthcare for everybody.”

At Freddy’s, she said, only the drive-thru is currently open and the workers have been given some cleaning supplies, but she’s heard from others that they’re being denied the basics. It’s been a year since she’s been part of the Raise Up campaign, and she worries about family members without access to healthcare. “Paid sick leave is also something that we need,” she said. “Not just the coronavirus but if somebody just gets a cold or the flu or whatever, they have to be out of a job with no pay.”

Other workers, she said, have had their time cut back—she’s one of the longest-standing workers at her store, so she is essential, but others are losing hours, which means losing money. The drive-thru remains busy, she said. “A lot of people are still coming but a lot of those people might have the virus. They might be scared of me because a lot of people keep their windows rolled up every day. I have to touch money every day. Even though I might have gloves, a lot of people touch money. That’s the part that really scares me.” She also worries about using public transit in this time.



Bertha Bradley (Molly Crabapple, Instagram: @mollycrabapple)

“I ride the bus. Just in case somebody has the coronavirus, they don’t know that they have it, they touch something on the bus, and I have to get on the bus and then go to work with my coworkers and other people in the drive-thru.”

Bertha Bradley has been working in food service for decades, currently at a local chain called The Dog House and before that at Wendy’s. A customer of hers actually gave her a medical mask to wear on the job and her boss told her she couldn’t wear it. “He said that would intimidate the customers,” even though a customer had given her the mask.

“We were telling them they’re standing less than six feet in front of us and leaning into the window to give us their orders. And then we’ve got this exhaust fan on, which is pulling in the air so it’s more likely we can get the virus from them. They’re more a danger to us than we are to them.”

She noted, “You know what my sanitizer’s made of? Clorox and water.” Working in the time of pandemic, she said, has been

really rough. We don’t get paid sick time. We don’t have the proper protection that we really need. It’s just like they’re only worried about making their money. I work with a lady that’s sixty-seven years old. I’m sixty myself, so we’re the old women who work in this place and it’s like they’re not concerned about our safety. They’re more concerned about making a dollar. I talk to other workers in fast food restaurants, at McDonald’s and Burger King. They’re telling me they’re going through the same thing.

When I asked when she decided to go on strike, Bradley laughed. “I decided forty years ago to strike whenever I could.” She grew serious, though. “This one here, this one really touches the heart. The world is in quarantine basically and they’re not taking it seriously. They call me an essential worker; what’s so essential about me getting sick with no health-care? They’re not out there serving the hot dogs. We are.

“We’re nobody when it’s not essential. We’re just workers. They could care less about us if this virus wasn’t out here,” she continued. “They could do better by us than they’re doing but they don’t seem to care. I don’t get health benefits. I don’t get sick time. I don’t get paid vacations. I don’t get living wage. So what do they want from me? What more would they do? If I die right now their business is still going to go.”

Bradley wound up with a call to other workers to join the action: “I want people to know here in Durham, North Carolina, we’ve got to keep striking. We’ve got to strike around the world. We need to strike more than today. We need to strike every day. We need to shut it down, that’s what I want people to know, and let them know we are not just essential workers, we are humans. Let’s shut it down.”

—Sarah Jaffe, March 27

How Can We Bounce Back From This?

Inder Parmar's Uber car has been idling since mid-March, when New York City went into lockdown. The streets have emptied, business is down about 90 percent, and the Uber app on his phone—his portal to the rideshare giant's market of passengers—also went dark.

Parmar said that if the lockdown drags on indefinitely, drivers like him across the city, who were already struggling to eke out a living before the virus hit, will be devastated. He said his adult children have decent jobs, and his household will get by for now, but in the coming weeks and months he cannot afford to fall behind on the insurance and car payments that he needs to hold onto his business, on top of his mortgage and health insurance bills.

With so little traffic, Parmar said, "a lot of drivers, literally, they're hand to mouth, and they're suffering."

One major reason is that Uber treats its drivers as mere app users, not actual employees. It has announced that it would offer two weeks of paid leave for workers who are diagnosed with or quarantined for the coronavirus. However, whether they fall ill or not, drivers' earnings are plummeting while their car expenses pile up.

In the coming weeks, any for-hire vehicle drivers—whether they drive an Uber or a traditional yellow cab—will face being infected, or infecting others, every time they pick up passengers. They may have to wait until they are diagnosed before Uber offers them any relief.

"We are the drivers," Parmar said. "We make billions of dollars [for] Uber. If they gave every driver one week or two weeks' salary, Uber would not lose their pants and shirt."

Augustine Tang, who drives a taxi he inherited from his father, has also seen his livelihood evaporate in recent weeks. Yellow cabs rely on street hails rather than an app, but like with Uber, the drivers are considered self-employed and thus largely excluded from typical employment benefits like paid sick leave policies and unemployment insurance.

Many drivers are opting to stay in rather than pay for gas to drive around an empty car. Tang said he tried working one recent evening and ended up giving a free ride home to an elderly woman. During the ride, she told him she had just gotten fired from her retail job. "My heart just broke," he recalled.

As the citywide lockdown intensifies, he said, "I'm trying to do my part and not go out there. I might be asymptomatic, and I don't want to be the one who's infecting other people as I'm working."

Taxi drivers were already struggling before the pandemic, with the collapse of the medallion market—a licensing system that drove many cabbies into deep debt—and competition from Uber and Lyft cars. These days, after paying off all his expenses each month, Tang is typically left with \$1,000 or even less. Currently, drivers' groups like Rideshare Drivers



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Augustine Tang (Molly Crabapple)

United and the New York Taxi Workers Alliance are demanding comprehensive aid for both rideshare drivers and cabbies, including unemployment benefits and sick leave. The hope is that the coronavirus crisis might finally spur corporations and the government to recognize drivers' labor rights.

"I know a lot of drivers, and I speak to them daily," he said, "and we all feel helpless right now. The hardest part for me is seeing them stressed out even at times like this. . . . A lot of them—they're hopeful, but the reality of it is, how can we bounce back from this?"

Though Tang, at thirty-five, is relatively young for a cabbie, older drivers, many of whom struggle with lack of adequate healthcare, face a much more dire situation. "These guys—their health is already an issue. If they get sick with this, it's a high probability that they're not going to be coming back to work."

—Michelle Chen, March 28

Domestic Workers' Lives Turned Upside Down

Before the pandemic forced millions of people to hunker down indoors, the home was a different kind of workplace. Domestic workers were cleaning houses, caring for young children, providing social and medical support to the elderly and people with disabilities, and getting dinner on the table for their employers, even as they struggled to afford meals for their own kids.

For many nannies, housekeepers, and home-care aides, COVID-19 has turned the domestic sphere upside down. Many are out of work and do not know when it will be safe to enter their clients' homes again; others continue to work but constantly risk being exposed or exposing others to the virus.

Before Philadelphia went into lockdown, Maria, who has been a domestic worker for twenty-four years, spent every day shuttling in and out of people's homes. In the morning, she cared for a ninety-four-year-old woman who lived alone, cooking her breakfast, doing her makeup, and making sure she was well looked after, before cleaning another two houses and then picking up her children from school. On weekends, she cleaned Airbnb apartments. In mid-March, as the city shuttered businesses and social activities, she suddenly was cut off from her twenty-five clients.

Speaking in Spanish through a translator, she said, "My life has been closed off. . . . I wasn't prepared for this. I'm really sad and really hoping that they find a cure. But my greatest sadness is that I'm closed in. I'm away from my clients and the families that I take care of."

As for her own family, she said, "there's also a fear of running out of food and basic necessities." Due to her "extreme panic about getting sick," she was staying indoors. Her husband, the head chef of a restaurant, had to go out to work a few hours each day, but "he's really scared of going outside and getting sick" and then exposing Maria and their son.

Only two of her twenty-five clients had fully paid up the wages they owe; none had been in touch about when she can return to work.

Maria had enough food for about two months. But when asked what she would do if the stay-at-home orders dragged on for months, she said, “I’m worried about not having enough food. I’m afraid of getting the virus. I don’t have emotional energy to think about what’s going to happen if this lasts for another [several] months. . . . I’m just in a really big panic right now.”

The National Domestic Workers Alliance is collecting donations for a coronavirus care fund to help support workers whose jobs are disrupted by the crisis. In addition, the NDWA is advising domestic workers on how to protect themselves if they are still working. They could, for example, try to limit exposure to others and visitors and ask their employers “if anyone in the home has any flu-like symptoms or may have been exposed to someone who has, and wait to resume work until after a doctor has cleared that person for contact with others.” But domestic workers, who typically earn extremely low wages, will struggle with the tension between keeping themselves and others safe and going out and earning a living.

Many have no access to unemployment benefits, paid leave, or overtime pay. Those who contract COVID-19 will likely have to cope without access to basic health insurance or Medicaid. And the many domestic workers who are undocumented immigrants will be almost completely excluded from the relief measures in the CARES Act recently passed by Congress.

But beyond the immediate economic concerns domestic workers now face, the COVID-19 crisis will likely do irreparable damage to the livelihoods and relationships that people like Maria have formed over the years. Even when locked down at home, she kept thinking about the people she cared for:

My hope is that they find a cure so that we can go back to our normal life. . . . For domestic workers, it’s important for us to raise our voices. Because we need a lot of help right now; there are a lot of people that don’t know how to get help. . . . I want to tell the world to be patient and that we’re going to move forward. I have faith that we’re all going to get through this together and come out more unified. I’m in a really good position to share and I want to take care of others, and we have to help each other, but this virus is really making me depressed and sad, and it’s completely turned my life around.

—Michelle Chen, March 31

Will Workers' Gains Outlive the Crisis?

Many businesses are suffering, but grocery stores are booming as customers stock up. The workers in those stores are now deemed “essential,” but the treatment they’ve been expected to accept for years has made them feel anything but. Travis Boothe is a pharmacy technician in Beckley, West Virginia, at a Kroger grocery store and a member of United Food and Commercial Workers Local 400, and he’s been noticing changes in the workplace as the crisis grows.

“There’s been a real interesting change in peoples’ mannerisms, and in the ways that we see the public interacting with each other and with us,” Boothe said. West Virginia is only beginning to experience the pandemic, he noted, as testing is starting to confirm more infections, and as that’s gone on, he’s noted “a pretty marked difference in the looks of fear and unease in the public.”

He’s also noticed

almost a sense of desperation for public interaction. The elderly really, really want to just speak and talk with anybody who’s willing to listen, and I think that’s a really interesting part of this entire epidemic that people haven’t really quite touched on fully yet. I had one gentleman who wanted to talk—six feet away from me, but just talk. I never met him in my life but he wanted to tell me his entire story, and where he grew up and everything. People just really want attention. I think this isolation is starting to get to people.

Working in the pharmacy means that people treat him with a level of trust, Boothe noted:

We’re the people that they come to with questions about their medicine; we fill their medicine, we know them on a first-name basis. So it makes sense that they would be coming to us for social interaction, too. But it was not what I expected, to this degree. For pharmacy technicians like myself, we’re not specialized medical personnel, we’re generally there to support the pharmacists in their job, but people still look to us in a sort of medical capacity. Minus the pay.

Boothe, like many of the workers he knows at Kroger, is part-time, but he’s working steadily. The company uses a “lean retail” model—inspired by “lean production” in manufacturing—but for now, the workers are getting overtime and working hard, Boothe said, to do “the best we can to take care of people.” So far, they’ve been able to keep up with his customers’ needs.



Travis Boothe (Molly Crabapple)

But the workers' minds are starting to change. "There are some people who are happy to have a job, in this environment. There are others who are frustrated at the least, and angry at worst over the fact that we're now deemed 'essential,'" he said, yet aren't getting "the compensation and benefits and precautions that are necessitated with such a qualification. And I think that as things develop that might bring some tensions to the forefront, and I think we're starting to see that across all sectors right now, in the economy. As these workers are realizing just how essential we are to the very foundations of this country's economy."

He continued: "We are doing extremely well. Rather, the company is doing extremely well. Profits are up, sales are up. They pretty much have a guarantee that those profits will continue throughout this crisis." As of March 31, the UFCW negotiated hazard pay, additional precautions, and paid sick time for Kroger workers, as well as additional healthcare benefits that include, importantly, mental healthcare. But he's not sure how long that will last. "Originally, Kroger did not want to give in to hazard pay. The only reason we have that is through rank-and-file activism," he said.

I see this as a truce, and not a victory. I think that the key for us right now is to understand that it's going to take consistent pressure to make sure that Kroger and other companies across the country don't try to backslide on these gains they've been giving to these workers. Which should've been deserved in the first place—the right to a living wage is non-negotiable. But building the power necessary to make that a reality is a different question entirely.

The spirit of activism, though, is growing in his store. "Coworkers who never would've thought about the idea of refusing work or potential strike actions have been saying to me, 'What do we have to lose? They need us. We're essential, we're necessary. Their profits don't exist without us showing up to work,'" he said. "I think it's definitely changed the consciousness of working people within this company, at least, and I'm sure that holds true across the board as we see as workers are staging actions, you know, at Whole Foods or Instacart."

He expects that militancy to continue as the crisis builds and is looking toward his local's next contract fight.

Our contract here, in West Virginia, through Local 400, is actually set to expire in August. What I want to stress to my coworkers with this is that, not only does this give us the leverage and power right now, but I think it's absolutely necessary for us to continue that momentum forward and say, come contract renewal, if they can afford this hazard pay right now, and these other benefits and this compensation, talking about child care or paid leave, maintaining

our health fund, what is to stop them in August from doing the exact same thing? We can't settle for anything less than what we actually deserve.

—Sarah Jaffe, April 7

Update

In the weeks following this first story, we spoke to a number of Kroger workers about their working conditions. Notably, in May the company decided to end the extra \$2 an hour “hero pay” that the union had won, and some workers even reported being asked to return “overpaid” emergency pay to the company. “They are taking it away from those people, which is ridiculous as far as I’m concerned because they’re still going to require them to wear masks,” Veronica Copeland, one of those workers, told us. “If it’s dangerous enough that you have to require them to wear masks, why wouldn’t you continue that extra pay? It is only \$2 an hour, Kroger.” After we reported this story, Kroger announced it would no longer seek repayments from workers.

You can find the UFCW’s statement on these events, as well as more stories about Kroger workers, at dissentmagazine.org/tag/belabored-stories.

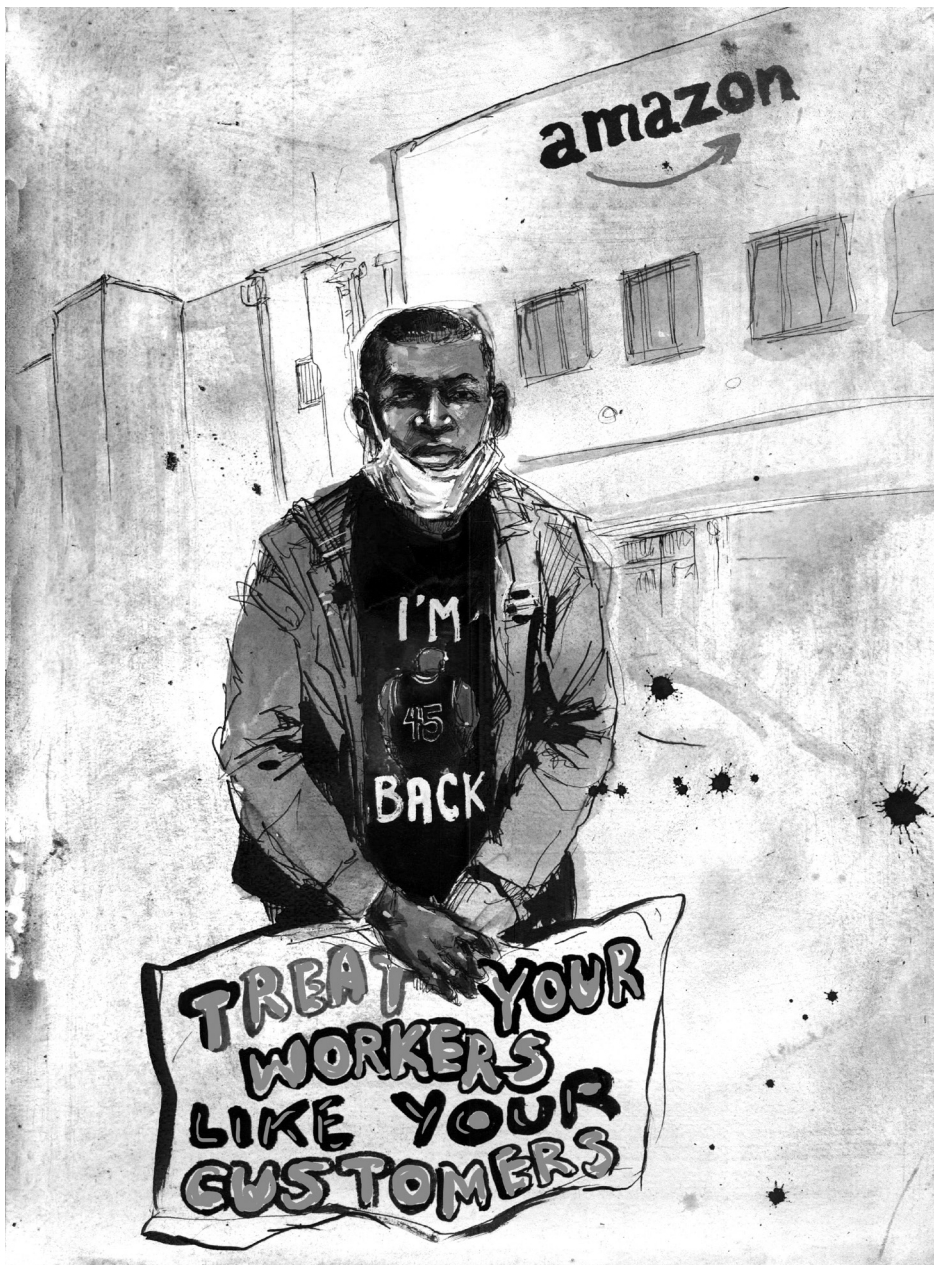
—Sarah Jaffe, May 18

The Amazon Walkouts Continue

Amazon workers are tired of putting their health on the line to keep their employer’s profits flowing during the coronavirus crisis. It started with a few dozen workers at the JFK8 fulfillment center on Staten Island who walked out after becoming wary about coworkers getting infected. That initial protest was followed by walkouts at fulfillment centers in Chicago and Detroit. And on Monday, April 6, workers at JFK8 walked out again. While only a small fraction of the total workforce at each facility participated in the actions, they made headlines with their unified demands for safe workplaces and a voice on the job.

Jordan Flowers, one of the JFK8 workers who engaged in the walkout, said the second protest was a direct response to dozens of reported cases of COVID-19 that had emerged in recent days:

We actually had around forty or fifty walk out, but this time our message was even bigger, because we’re up to, like, thirty cases. [Twenty-five] were confirmed. But there’s Human Resources telling people to be quiet about it; if you have it, they want you to be quiet. . . . Our message now is: We have to get our demands. We



Amazon Walkout (Molly Crabapple)

have to make sure that our warehouse is clean, and we should feel safe at it, because we're there every day. Like I said, 5,000 people walk in and out [of the facility]. . . . You shouldn't have to be, like, "Oh, I don't know if I should go to work." . . . We should feel like, "Hey, I want to wake up, go to work, make money. . . ." At times like this, we shouldn't be working. There are thirty COVID cases, and we're still operational.

While working alongside infected coworkers is risky, so is protesting. In late March, another employee at JFK8, Chris Smalls, was sacked after participating in the first walkout. Amazon argued that Smalls was fired for allegedly breaking the company's quarantine policy, but labor advocates, including the Teamsters and the national coalition of Amazon workers, Athena, say Smalls's dismissal was blatant retaliation. Asked if he feared retaliation, Flowers said, "There possibly could be, but I'm not too worried about it."

Flowers has other reasons for staying away from work for now; he has lupus nephritis, which makes him especially vulnerable to infection. He said he was taking time off but was not using Amazon's special paid leave scheme, which requires a formal diagnosis or quarantine due to COVID-19. "Every day," he said, "I put in that I have an underlying condition, and I'm not coming to work until the place is clean."

In Detroit, Tonya Ramsay participated in another walkout at her fulfillment center, DTW1, which was triggered in part by news of three confirmed cases of COVID-19 at the facility. Describing the hygiene provisions at her workplace as inadequate, she said, "Everyone's scared to go to work."

Although the management had provided workers with hand-washing stations, she said, given the size of the fulfillment center and the pressure to process orders rapidly, "It's definitely a challenge to be able to wash your hands and get back in a timely manner." Meanwhile, she is on unpaid leave, forgoing wages until she feels safe going back to work. With a child to support at home, she said, "I'm the only means of income in my house, so it's going to be a struggle."

Athena has demanded that all Amazon workers be given full paid leave if they are affected by COVID-19, including having to care for a family member at home.

Amazon claims it is stepping up efforts to protect workers and keep facilities sanitized, like temperature checks and disinfectant wipes. But Flowers wants JFK8 to be totally shut down for two weeks and thoroughly disinfected, with two weeks' pay for the workers. He added, "We should at least have testing nearby where [you will know] if you're positive or negative, and then the people that are negative, they can go back to work. But as of right now, they're acting like they don't want to clean it, and they're just going to keep hiring people every other day."

Indeed, Amazon has announced plans to hire about 100,000 new people to keep up with soaring demand from housebound online shoppers. That could mean more workers getting exposed daily to infection as the company ramps up production. But it might also mean more workers choosing to walk out when they feel that they are risking more by going to work than by refusing to show up.

—Michelle Chen, April 9

What If Nurses Ran the Healthcare System?

Nurses and healthcare workers across the country took part in a day of action on Wednesday, April 15 to demand proper personal protective equipment (PPE)—for their own and their patients’ safety. Elizabeth Lalasz was one of those nurses, and we spoke shortly after the action concluded in Chicago, where she is a nurse at John H. Stroger Hospital and a member of National Nurses United.

“We had about fifteen or twenty nurses. I was actually pleasantly surprised,” she said. Many of the nurses who came out worked in the emergency room, and they wanted to express what they’d seen, working on the front lines of the pandemic in a big safety-net hospital in a major city. Working at a safety-net hospital, she explained, means that “We don’t refuse anybody.”

In that hospital, nurses are being told to reuse N95 masks, sometimes for up to forty-five days. “Three months ago or less, we were told one-time use per patient.” Maybe, she said, you’d use the same one through a shift, but never for multiple days. “We’re told to put them in a paper bag and hold them in our lockers. . . . How you can take it out without somehow contaminating yourself or anyone else or another patient is kind of a mystery.”

The nurses were also discussing the price increase for the masks. “It was under a dollar prior to this and now we’re talking about six, seven, eight dollars a piece,” she said. “So it becomes really difficult to obtain [masks] because there is so much competition across states because of the federal government telling states to act on their own.”

But the cost of masks was just a symptom, she said. The real problem was that the whole system was failing. “My chief steward was talking about how the federal government has really failed us, that the system is broken, which is obviously one of the hashtags for today’s national day of action,” Lalasz said. The “feeling is that there is a great inequality that exists across this country from those who are in power. Then, the rest of us are clearly on the front lines and experience some really frightening situations where we feel very uncertain going into work every day.”

In Chicago, as elsewhere, the inequalities of the broader system were showing, and the nurses were already planning future actions, including



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Elizabeth Lalasz (Molly Crabapple)

one on Friday at Provident Hospital, where the emergency room was shut down in the middle of the pandemic.

“It is actually the first African-American hospital in the United States,” Lalasz said. “There wasn’t much explanation except that there was one worker in the ER who was COVID positive, so they shut it down and they gave the union about three hours’ notice on a Friday afternoon. There are a lot of African Americans dying from COVID in the City of Chicago.” Roughly 70 percent of the people who have died from the virus in the city are African American. “This is an ER that is not as busy as the one at my hospital, but clearly serves an African-American population that is working class and poor,” she said. “So, not having access to that ER means they have to go, potentially, to my hospital, which is about a twenty-minute drive away, which could be the difference between life and death, especially with COVID and issues around breathing or anything else that is going on. It comes on suddenly and is very deadly.”

In the discussions leading up to the day of action, she said, the nurses had also been talking about what the system should be replaced with.

With this crisis coming up and really hitting us front-on, we were talking about why there needs to be much better coordination in the healthcare system, that the system is run for profit, and that it just doesn’t make any sense. If there was a need to have PPE—let’s say in New York when things were and have been apocalyptic or Detroit where things are getting much, much worse and it is definitely affecting the African-American population exponentially—especially [with] all the crisis around water that pre-exists within Detroit—we would shift things like N95 masks to places where it was needed.

A functioning system, she continued, would have seen use of the Defense Production Act to manufacture necessary equipment already. The conversation the nurses were having, she noted, was moving beyond Medicare for All and

building on that idea and saying that we need to actually talk about nationalizing healthcare and that we should be the ones running it, meaning frontline healthcare workers, because it’s been stunning to see how little our hospital administrators have any idea about what makes sense and what doesn’t make sense—basics about infection control and [not] putting patients who are COVID positive with patients who aren’t COVID positive. We have to change this healthcare system after this pandemic.

For the nurses to get out and express themselves, Lalasz continued, was important because many of them feel isolated on the job. “They work

twelve-hour shifts and . . . a number of them in sections of our ER that are COVID only, the isolation rooms.” There are probably between 950 and 1,000 nurses at the hospital, she said, and the conversation they’re having has grown rapidly. “There were a couple of us who have been longer-standing union activists. But the other people that were there, it is clear that it really shakes you. My chief steward has said that nurses are calling her having anxiety attacks on the way to work. It just hits you right in the face.”

It is really hard to fathom, at one level . . . the reality that we are just cannon fodder. We just keep going back in. I was just on quarantine, and I’m coming back in and my unit, in the last two-and-a-half weeks since I’ve been gone, has been turned into a COVID-only unit for the inmates at Cook County Jail. The reality is so in your face. It is radicalizing people quite quickly. We are finding a lot more people willing to say something and to fight, because it’s our lives.

Lalasz is used to working in a hospital where inmates from the jail are taken when they’re sick, but it’s a big shift to have enough of them ill that they’re an entire unit. “Under a month ago, I remember asking some of the Department of Corrections officers, because they’re there with the patients, ‘So, what is the plan for the jail?’” she said.

I said to my immediate supervisor, “Do you understand the risk inmates will have at the jail?” The Department of Corrections officer said, “There is no plan.” I said, “What do you mean there’s no plan? You can’t do social distancing in the jail.” I did a paper on this for one of my classes in nursing school . . . [Cook County Jail] has historically been extraordinarily overcrowded for as long as it has existed over the last 100 years. Every jail is like that, and the fact that there is no plan means that it is going to spread really quickly, and it is going to affect the people who already don’t get the kind of healthcare that they actually need in that jail just because they’re incarcerated. Then, the response from my immediate supervisor was like, “Oh, well, you deal with underserved populations all the time.” I said, “We are talking about COVID where we don’t have a cure! We have no vaccine!”

The protocols around the patients from the jail, she said, make her job more difficult. “I am in and out of my patients’ rooms a lot. That is part of being a nurse. But we’re really limited because the protocol is not to go in more than two to three times, and that means I don’t really know what’s going on with them during the course of a twelve-hour shift.” Many of those patients were in jail for petty offenses, because they can’t afford bail, or even because they were detoxing. “These are human beings. It puts

me in a situation where I can't take care of them in the way that I need to, and it's not even just the PPE issue." And nurses are not supposed to give family members of the incarcerated patients any information. "Now you've got people who have family members who are seriously concerned about 'Is this person there? How are they doing?' And we can't talk to them about the patient because there are restrictions on that."

The crisis is pushing healthcare workers in a way that Lalasz sees as similar to the recent waves of teacher organizing and striking. "We take in a lot and don't talk about it, and there's been sort of an assumption that if you're in healthcare, that's what you do: you just accept the reality of what you're doing and the short-staffing and the lack of supplies and the long hours and all the paperwork and the bureaucracy and all the blaming of us as nurses because we are predominantly women, so we are to blame for everything because we are there with the patient all the time," she said. "Now, it is hard to really get yourself ready to go through your day because you've got COVID on top of that. It just feels so, so uncertain."

The newness of the virus means that caring for patients, she said, is an ongoing experiment. "We are figuring it out as we go, how to do the best we can for these patients while trying to figure this disease out and what it looks like." Through the union, she said, they can share and demand more information on best practices and figure out what's working in other parts of the country and the world.

"We are certainly trying to figure out what works and doesn't work, which is what we should be doing—which, also, is why we should run healthcare, because we have the skills," Lalasz continued. "Collectivizing helps us to be able to talk to each other about what seems to be working better and trying that on our patients to try to save them."

—Sarah Jaffe, April 17

The Buses Are Busy in the South Bronx

Before the coronavirus crisis hit New York, the Metropolitan Transportation Authority (MTA) was running massive budget shortfalls, groaning under monstrously crowded subway cars, and wrestling with chronic service delays that could add hours to daily commutes. But now the quotidian frustrations of the under-resourced system have yielded to an eerie sense of foreboding among transit workers in the epicenter of the pandemic. As of late April, more than sixty transit workers had died of COVID-19 [by May 20, the number had jumped to 123] and thousands had tested positive for the virus.

Transit ridership, meanwhile, has plummeted, and subway and bus services have been cut sharply. But the workforce—comprised largely of working-class people of color—keeps showing up to help get the city's essential workers to their jobs, despite the health hazards.

Charles Quinn, a custodial worker for the Long Island Railroad (LIRR), sanitizes the rails, doorknobs, and escalators on each platform twice a day. Though the LIRR has provided protective gear like gloves and masks, he said, “Still, in the back of your mind, you don’t want to bring it home to your family. I have two young girls, ages fifteen and ten, and I don’t want to bring it home to them.”

Since the commuter rails are considered essential infrastructure, he said, “we put ourselves at risk everyday when we go to work. The jobs that we have—it’s a task that you’ve got to do. . . . We were all given great training. [But] it’s scary.”

At the other end of the transit map, in the South Bronx, bus operator Wayne Lizardi is operating on a reduced schedule, but his bus is still crowded. He assumes this is because, in contrast to the relatively empty affluent neighborhoods like Midtown, people in the South Bronx are still working during the lockdown.

Lizardi still drives many workers to the Hunts Point market, for example, which is still a key supplier to local supermarkets. “And there’s a lot of hospitals where we cover as well,” he said, “so those workers need to get there. And then also, the people that we serve need to get to the pantries and stuff and get their food. So we’re very busy.”

At the depot, he said, the atmosphere is “very, very tense,” and workers have expressed anger and frustration with the health risks they are forced to brave every day. After several weeks of sporadic mask wearing, on April 17 the MTA finally made masks mandatory for its employees. That rule should have been in place three weeks earlier, Lizardi said.

The week before Lizardi spoke with *Dissent*, a fellow bus operator—a father of five—died from COVID-19. “That was a shock,” he said, noting that while there is an underlying awareness among bus operators that many of their coworkers are having to call out sick, those illnesses and deaths are not widely announced. News circulates quietly among workers. “It’s not like they’re throwing everybody’s names around. . . . It’s more hearsay,” he said. “But bus operator McKnight was one of the ones that did pass away from that. Once that happened, the word got out.”

Currently, city buses are trying to minimize infection risk by putting barriers around the driver and directing people to enter from the rear door, rather than the front. But when the bus is crowded, it’s crowded. Lizardi said that ideally, customers would also wear masks when they board his bus, but it’s not up to him to police his passengers.

“I leave it up to the customers,” he mused. “I mean, if they don’t feel comfortable with somebody getting on the bus, they’re going to say something. This is the South Bronx! They’re going to say, ‘Where’s your mask?’ . . . So, you let the public handle the public sometimes.”

For now, Lizardi is resigned to the routinized chaos of his bus route.

Am I nervous? I'm definitely nervous. Are all of us nervous? We're all nervous getting on this bus and taking this bus out. . . . I believe transit is doing a great job of disinfecting these buses every day. I see [maintenance workers] out with the hazmat, they're wiping everything down, they're doing what they need to do. But once we take that bus out and there's sixty people on it for one trip—[multiply] that by how many trips I do—we're talking about 1,000 people I'm moving in a day. I don't know which ones have this virus.

And workers never know how close the virus will strike next time. His father, also a longtime bus driver and retired union member, died in early April of COVID-19.

"This is something that we've . . . never experienced before," he said. "And hopefully, we don't experience again. Maybe it's one of these hundred-year things. I don't know. What's up is down, what's left is right, and it's very strange."

—Michelle Chen, May 1

Sephora Makes Plans to Reopen

When the crisis first closed retail stores, Sephora employees, according to a worker who wanted to remain anonymous, were told that the company was in good shape and that employees would be taken care of. "And then they called all the part-timers in to a Zoom chat, with very little notice, and fired everyone who had not been there for five years or who was part-time." According to *Business Insider*, that was some 3,000 workers.

"When they announced the closure of the stores, we knew a few days in advance," the worker, who is based in New York City, said. "They announced that we're going to close at 5 p.m. on such-and-such day, so they knew how dangerous it was." Yet the morning workers were still expected to come in. "The last day I was there, we had clients who were deeply upset that we were not doing [makeup] applications. We were not provided with any PPE, despite what they say. The PPE that was available was completely inadequate. We were not given masks—it was only gloves." They were allowed to decline to apply makeup to customers, the worker said, but some customers got quite angry.

After this story went to press online, *Dissent* received the following comments credited to Satish Malhotra, EVP, Chief Retail and Operating Officer, Sephora:

While stores were still open in the beginning of March, we did provide all employees with gloves and hand sanitizer to be used

during their shifts. This was in accordance with guidance from the CDC, which at the time recommended that individuals not wear masks unless they were healthcare providers or potentially infected with COVID-19.

Those who are still employed have been, the worker said, doing online learning and watching brand videos. The employee said they were also being pressured to “do makeover looks on ourselves and post them to social media for their use. We’re being asked to be models and spokespeople for the company with our personal resources.” That work, they said, was not being compensated or recognized the way actual modeling work would be. “What they’re asking is, be the model, be the makeup artist, be the photographer, sell your image, sell rights to your image, for whatever your hourly base wage was.”

They continued:

When Sephora started using employees as models in their ad campaigns, they’re paying people to fly out to wherever and do their own makeup and do all this and they’re paying them a retail wage. And their big push before all this, when the new CEO came on . . . was, “Be happy.” Not be pleasant, be a good worker, have reasonable expectations, but, in this very gendered industry: be happy. Make sure the clients see you . . . smiling like “It’s a Small World” at Disney. We know that part of the job is putting on makeup, and everyone knows the expectations when you’re doing the emotional labor that you do in a retail job, but on top of that, be happy.

It’s hard to be happy right now, though. Technically, the workers have still been getting paid but, the worker said, “They’ve had us using our PTO [Paid Time Off]. Those employees who did not have PTO available to them were forced to go into PTO debt, which they will be expected to work off like indentured servants after. . . . And the communications from management was that everyone had to make sacrifices for the company—the company which bragged about having no debt.”

Malhotra of Sephora said,

While stores remain closed, our employees have had the option of participating in Sephora @ Home online learning modules, which cover a variety of relevant training topics and are offered several times per week. Employees were told that none of these trainings were mandatory and they have continued to be compensated during this time. . . . Separately, Sephora does have a national program in which we involve employees as influencers, and they are compensated above and beyond their field pay via a separate

influencer contract with the same compensation principles as our external influencers.

LVMH, Sephora’s parent company, the employee noted, is quite successful, growing their revenue 16 percent in 2019. “There’s basically multiple ways they could’ve bailed us out, and saved workers a little more, and saved more workers, because the people who were not full-time were mostly trying to be full-time.”

But the thing that made the employee reach out to a reporter was the store’s plan to reopen, which did not strike them as safe. They were told that they would be expected to return to work as soon as the city allowed them to reopen. “They’re claiming that there will be [PPE] available,” they said. “Our CEO’s communications that go out to all employees said that Sephora employees would be taken care of through the end of May or until stores opened, whichever comes sooner. If the stores don’t open, we all get fired. And if the stores do open, we have our health put on the line for people who want to return makeup.”

The workers, they said, have been told to expect a lot of returned products, as customers would be trying to save money.

They plan on taking returns from clients, but that physically puts workers, especially in cashier positions, in danger, because we know the virus can live on surfaces for x number of days or x number of hours, and it’s not like they’re going to scan a barcode and then throw it in the garbage outside. There’ll be multiple people in our operations team handling these and our cash wrap team handling these. Even with PPE, we just don’t have the resources for everyone to stay physically safe from harm.

Returns, the worker said, normally go in the trash if it cannot be verified that the product has not been opened. “In this case, they have said that everything will be thrown out. But they’ve also said that there will be testers made. And that when we go back to stores, a lot of our work will be making testers”—communal samples for customers to use in-store.

At the best of times, makeup testers are, the worker noted, “pretty gross. You can’t trust anything that anyone else has handled.” But in this situation, they noted, “For the safety of employees, for the safety of clients, it’s unconscionable.”

Malhotra of Sephora said,

We are still in the process of finalizing our plans for reopening and have not yet announced our plans publicly. . . . Our stores will remain closed until we can safely welcome clients and employees back into our spaces in accordance with local health guidance. . . . in order to

protect our employees, all products returned in our stores will be destroyed until further notice.

With many of the part-timers laid off, the workers were expecting to have a lot to do when the stores reopened. “I’ve been warned that we’re expected to do everything. Which means, if I am someone who typically works in the beauty studio, I will be expected to take returns on the cash register, if that’s what they need. I will be stacking shelves, I will be doing whatever.”

The worker also worried about the cleaning workers, who were subcontracted and many of whom were recent immigrants. “They are expected to handle trash, and I don’t know if they will be offered or even told what their options for safety and hazmat handling will be. Again, it’s the most vulnerable people who are going to be doing the most dangerous work. Because this virus is not going away, not anytime soon.”

There are other basic worries about returning to work in New York City, where most of the employees rely on public transit and do not live near enough to their workplace to walk or bike to work.

Not everyone has health insurance. . . . It’s available [through the company], but it’s not achievable with the wages that we typically have. They have very unrealistic expectations of workers sacrificing their health so that people can buy makeup. Or return makeup. No one’s giving hazmat suits to the workers who handle this. These people have kids, they have lives, they have rent to make, and I don’t want to see people die because of a company that can afford to take the hit.

—Sarah Jaffe, May 8

Sarah Jaffe is the co-host of Dissent’s Belabored podcast and the author of the forthcoming Work Won’t Love You Back: How Devotion to Our Jobs Keeps Us Exploited, Exhausted, and Alone.

Michelle Chen is a historian, a member of Dissent’s editorial board, and co-host of its Belabored podcast.



In Hilary Leichter's novel *Temporary*, "being successful at work requires all-in emotional investment in the performance of the work." Artists Space staff, 1979, photographed by Cindy Sherman, then the gallery assistant and receptionist, as part of a photo shoot for *Cover Magazine*. (Courtesy of Cindy Sherman and Metro Pictures, New York)