People and Places

It started off small, as things often do. It was March, 2020. I was on a spring break mission trip in the Dominican Republic when the notices started to trickle in. Classes may no longer be in person upon our return. We might have to wear masks on campus, in stores, maybe even outdoors? But for how long? No one knew with any real clarity. There was an air of uncertainty.

The summer came and went. The lockdown was real – far more real and far longer than I had anticipated. What is a “quarantine,” I asked – I’m not sick, it must not be for me. But it was for all of us – millions of Americans, not to mention the billions of world citizens were asked to stay home and stay safe. As it turns out, this little blip that came to be known as the pandemic was very real, and very dangerous.

Not everyone thought so, however. Though some of us in the medical field were unfortunately privy to the devastating state of the hospital ICUs, the mere existence of the COVID-19 virus was a polarizing topic. It’s hard to imagine that something we cannot see could be causing so much harm; for some, it was too hard to imagine. Against the backdrop of social unrest and political mistrust that this past year had in store for us, this was too much for far too many of us. In such a short span of time, the pandemic grew to be one of the biggest parts of our lives.

It’s tough to say that we ever really got used to it. “The new normal” was a phrase that sent chills down my back. When I first heard it, it had been months since I had shaken someone’s hand. Instead I did the awkward dance around what is and is not acceptable like so many others. The social encounters, when we were privileged to have them in person, were the toughest parts. It can quietly eat away at you when you realize that you hadn’t seen someone smile in so long. That you’re scared to see your friends and loved ones. That a hug may mean endangering someone. This can’t possibly be “normal.”

Fortunately, it didn’t have to be. After months of dedicated efforts, the scientific community came through with a potential light – the development of vaccines. For many of us, the first word of this was a breath of fresh air. We just need to get a shot or two, then we’ll be home safe. It’s almost over, I thought.

Well, as it turns out, there was still much to be done. We needed to get those shots, and get them to others. I was fortunate enough to be part of those efforts.

It started off small, as things often do. At first, there was only enough vaccine for the careworkers. Small groups of my classmates and I went out to public hospitals to ensure that
they had ready access. It was the first time some of us had seen each other since we were first asked to quarantine. It was nice to see familiar faces again.

As time went on, our efforts grew and grew. As supply increased we were asked to expand our volunteer efforts. Our next stop: the public shelters. Now, before I go any further, I want you to know that I used to think I cared about our community. I used to think that I knew how the most underprivileged of our neighbors lived and experienced life. I used to think that I had a passion for public health. I was wrong.

I had never really been to downtown Worcester. I had never really been to the heart of our city, where our community lives and breathes. On the first day, it hit me like a ton of bricks: the people we were working with here may not have homes, they may not have food to eat, they may not have all the things I took for granted. I saw places I didn’t know existed, despite calling Worcester home. I didn’t know it until I was there, and until I met some remarkably good people.

Some of these people were my colleagues. Though we attended the same schools and meetings, we really met in the community. In our service. I watched as these people I came to call my friends sat with eager ears as elderly patients voiced their concerns. I walked alongside them as they marched down the streets offering their services to all who sought them. I worked with them as we did everything in our power to connect with our community.

Some of these people were my patients. Just as we met for the first time, at these clinics, so did they. At the YMCA, I watched as neighbors hugged after receiving their vaccines. In small, local markets, people encouraged one another to come together to protect their community through herd immunity. “We’re the herd,” they shared, “we’re protecting each other.” And it’s true – as we were volunteering in this supermarket, I thought of how important it was that everyone be vaccinated so we can get groceries without fearing that they’d bring something home.

On occasion, I made house visits. One will forever sit in my memory. I arrived at a doorstep in Worcester one evening after clinic with a cooler full of additional vaccines. A smile greeted us at the door. As we stepped inside, that smile was paired with tears streaming down this mother’s face as we explained where we came from: we had additional vaccines available at the end of clinic and heard that they had been having trouble getting appointments using the signup sites. She beckoned to her husband to come downstairs, and to her daughter to join us. During the observation period, waiting for the unlikely event that one of them had a reaction, we sat in their living room and got to know one another. Their family played tennis at the same courts I did. We went to the same schools. We knew many of the same people in the community. We found, unexpectedly, that despite having never met, we shared some connections.

That night, there was excitement in the air. As we learned, that’s not always the case. When the J&J vaccine was withdrawn, many of our community members grew increasingly afraid to receive the same vaccines that had previously given so many of us hope. The trust that we had developed with them was now dissolving. All the while, that political unrest that lingered at the
start of this all hadn’t disappeared. During a public clinic held on the corner of Pleasant St., a patient walked up for his vaccine. One of my colleagues pointed out his shirt: Trump 2024, it read. Our political opinions aside, he came to us for care. When we offered him the J&J vaccine, he expressed his concerns, and I talked to him as though he were my father, my uncle, my neighbor. As if we shared the same beliefs. The kindness didn’t go unnoticed, he thanked us profusely. He was so appreciative of our work, of our willingness to come to him and his community to provide for them. Then, another man came over, a black man. He shared many of the same concerns, but wasn’t quite as convinced when we shared our good intentions and trust in the science. Suffice it to say I was surprised when the first patient came over. “I was scared too,” he said “but I trust them.” The two men talked and talked. Several minutes passed, several laughs shared, and a comforting hand was extended from one to the other before we were able to care for this second man. There were few interactions I can honestly say have touched me in the same way. Despite all the fears and unrest in our world, both of these men were human. Both want what’s best for us all. Both, like each of us, care about people.

Though there were difficult times, and more may lay ahead, living through this pandemic has been an eye-opening and heart-warming experience. The small changes that tumbled into led way to opportunities for us to make changes and learn with our neighbors. This has been a beautiful reminder of the whole human beings behind the medical care we provide. It started off small, but then it grew and grew, and we did too.