## My Covid-19 Experience

My journey with the Covid-19 pandemic started at the beginning of March 2020. However, it did not start in the typical way. I had just returned from a 4-day trip to Washington, D.C. with the Multicultural Student Center at Appalachian State University in Boone, N.C that took place between January 29 and February 2nd. It was a trip meant to enhance cultural understanding across multiple cultures, and we spent a large portion of that 4-day trip exploring cultural museums and visiting cultural sites.

On March 2nd, 2020, I went into Appstate's Health Services office because a professor had, in passing, told me my cough sounded bad. At the time, I had no other symptoms, so I assumed that what I was dealing with was just a case of allergic bronchitis, which I get rather frequently (I have severe allergies). I went to Health Services, where I was told that I probably had bronchitis and prescribed an inhaler and steroids to loosen the bronchial tubes. Two days after I started the steroid treatment, I went back into Health Services because I was having trouble breathing. I learned then that I had pneumonia in my lower lung.

On March 4<sup>th</sup>, 2020, there were no Covid-19 tests available in North Carolina – at least, there were none available on Appstate's campus. To this day, I do not know if I had Covid-19, as I have never had the antibody test done. I do not intend to get it done, either, as I've done enough research to know that the antibody test has a large percentage of false positives. I have had a sneaking suspicion ever since I was diagnosed with pneumonia that I was really dealing with Covid-19. Two specific occurrences convinced me of that -1) Everything I ate the week that I had the worst symptoms tasted sweet, regardless of what I was eating (which was mostly chicken noodle soup); 2) I developed facial migraines as a result of the illness that required my allergist

to prescribe a first generation allergy medication for off-label use in treating those migraines. To this day, I still have complications because of the illness I had back in March.

Wondering whether I did or did not have it has been mildly concerning but not overly stressful because there's no way for me to learn the truth. Regardless of whether I contracted the virus or not, I have acted appropriately by observing masking and social distancing guidelines because my concern for the general public is higher than my concern for my dislike of face masks (I hate the way they feel and they constantly fog up my glasses – largely for this reason, I tend to stay home and order in rather than going out to pick things up).

When I said that my journey with the pandemic started a bit differently for me than for others, it was not just because I may have been among the first individuals in NC to acquire it (I self-isolate when sick anyway because I'm paranoid about getting other people sick). It was also because I became ill during what was supposed to be the last semester of my MA program at Appstate. It was also the middle of Spring Break, and I was determined to finish my Master's thesis by the end of the Spring semester because I had already been accepted into Arizona State University's PhD History Program. However, getting sick during Spring Break made it difficult for me to complete revisions on my thesis, and my advisor, \_\_\_\_\_\_, suggested I wait until the summer semester to defend my thesis. I took her advice, and I'm glad I did, because the world changed very rapidly.

For me, I left Appstate the week of Spring Break, expecting to return to campus at its conclusion. During the break, I developed pneumonia, and the announcement that Covid-19 had achieved status as a global pandemic occurred at a time that my thinking was hazy at best. I felt like I was swimming through mud, and, right as I started to feel better, Appstate announced a week-long extension on Spring Break. Rather than use that week for productivity on my thesis, I

devoured social media and news outlets for information about the pandemic, the virus and the way it worked inside bodies, and read countless stories of those who died. The stories of entire families who died tore me apart. Watching videos of the ice trucks in Italy overwhelmed me. Almost overnight, it seemed, the world had went from being chaotic to being both chaotic and traumatic.

Trauma was – and is – nothing new to me. I understand trauma because I grew up meshed in it. My mother was an alcoholic and abusive mentally, spiritually, emotionally, and physically. I have incredibly well-developed defense mechanisms for dealing with unexpected trauma – they aren't healthy, as defense mechanisms developed in the midst of trauma are rarely healthy – but they exist. One of those defense mechanisms I've already mentioned – the extreme amount of research into an anxiety-producing traumatic situation is a technique that I use to reduce my anxiety. Oddly, it gives me a sense of "this is literally the worst that can happen" so that I can measure the world against the worst possible outcomes. Because the worst possible outcomes usually don't happen, this works as an effective (although it can be rather morbid) way to minimize the stress of a traumatic situation.

The other survival mechanisms I tend to default to are isolation and repression. Isolation works out well since avoiding other people is necessary in a pandemic, but it is not healthy to be socially isolated. I know these things, yet still do them. I struggle a lot with the knowledge I have and acting on it. So, I know my approach to trauma isn't healthy – I'm working on that – but I also acknowledge that the defensive patterns learned in an abusive home gave me a set of tools to deal with the trauma of the pandemic. Isolation is useful, but repression is different. Repression is what I personally refer to as numbing myself out to avoid emotional overwhelm. I'm a very empathetic person, so hearing or seeing news about people suffering and dying is

incredibly difficult for me. Unless I numb myself out and essentially tune out the emotions of the world around me, I can and will get overwhelmed. So, tuning out the world became a key strategy of approach for me. I still largely do this.

The trauma-induced defense mechanisms helped me cope more easily with finding myself in an upended world. I'd had my world upended multiple times before. It was still very shocking; trauma always shocks before it numbs. My first trauma happened when I was 8 and my mom , started drinking, then blamed me and my sister, ]

, for her alcoholism. My mother went from a caring, compassionate person to a coldhearted, abusive person. I still deal with that legacy. Then, when I was 15, my mother died due to her alcoholism. That still impacts me. At 18, I was in a car accident so bad that it left me with two rods in my right leg and permanent disability. At 22, I moved in with my best friend, and she left one night in the middle of the night without a word, and I woke up to having been abandoned in an apartment, left to try to figure out how to pay rent on my own. There was also the trauma of two failed relationships that ended with my partner turning from me to my sister, as well as a failed long distance relationship with someone who ghosted me after a year. Needless to say, I've dealt with a lot of trauma.

Even global trauma is not incredibly new to me. I dealt with the Y2K scare as well as the 9/11 attacks during middle school, as well as the horrors of LGBTQ hate crimes across the nation. Then there was the 2008 recession and the constant occurrence of natural disasters across the world, including Hurricane Harvey, Hurricane Irma and Hurricane Maria. One of my best friends, \_\_\_\_\_\_\_, lives in Texas, another in Puerto Rico (\_\_\_\_\_\_\_\_), so Harvey and Maria were especially concerning. Irma actually reached the mountains of NC, so it was a bit scary, but I was more concerned about friends in coastal areas. Prior to the announcement of the

pandemic, I had had plans to go to Puerto Rico until my friend told me that there were consistent earthquakes happening.

A conversation that I had a couple weeks before the announcement of Covid-19 as a global pandemic still haunts me. Me and three of my friends (]

) went to Troy's Diner, which is a local diner in Boone, N.C., and we were discussing what was happening in the world. Someone said (paraphrased), "All these things that haven't happened in a 100 years keep happening," and my response to that was, "Yes, now the only thing that hasn't happened in 100 years has been a global pandemic." Two weeks later, the Covid-19 pandemic was announced.

As far as I know, I don't have any prophetic abilities. There are people who do, but I don't count myself among them (I'm Pagan, so the "supernatural" is my "normal"). Still, that I said that sentence in a conversation only to have it echoed later really freaked me out. I suffer from a common ailment in trauma survivors, which is that I blame myself for things that I literally have no control over. There were moments when I legitimately asked myself whether saying such a sentence out loud brought the reality of the pandemic into existence. However, I eventually worked through that because I realized that the very idea that me saying one sentence could someone cause a pandemic was giving myself far too much credit and bordered on arrogance. Trauma responses are weird, as are the thoughts that they produce.

Anyway, by the time the Second Spring Break ended, Appstate had decided to host classes online for the rest of the semester. Luckily, since I was writing my thesis, I did not have any Zoom courses to attend. The professor I was TA'ing for decided to do his course asynchronously, so I just had to grade essays. I finished my Master's thesis and defended it in June, then I moved across the country from NC to AZ at the beginning of August. One of my best friends, Logan Riley, came with me – both for moral support and to make sure I didn't get lost – and we drove through several states, being very careful with our health. While we did eat in a few dine-in restaurants, I always made sure we wore masks and had hand sanitizer on us at all times. I also purchased a UV sanitation wand for use on our phones and high-touch surfaces, and we also used Lysol wipes in the hotel rooms where we stayed for extra safety. We made it to Arizona without incident, and I moved into my apartment after my friend took his flight back to NC. I've been in my apartment since, and I have completed the first semester of my PhD program at ASU.

Most recently, I have learned that my great aunt, , 82, passed away from Covid-19 three weeks ago. She was already in poor health and had a no-ventilator clause in her medical file. My grandmother, , 98, is currently dealing with Covid-19 while in a rehabilitation facility (where she was admitted after taking a nasty fall prior to my move to AZ). My aunt, , has not told my grandmother that she has Covid-19 or that her sister has passed away from the virus. I don't know if I agree with that decision or not, but she is the one who currently has to make the hard decisions. [Great Aunt] is the first family death I've heard of from the virus, and that saddens me but doesn't surprise me. Unfortunately, I was never close to her, as evidenced by the fact I can't remember her last name, but there is also a weird comfort in knowing that the distance blunts the blow of her passing.

The other people I'm currently worried about who are dealing with the virus is my friend,

, who is back in NC. She works in healthcare (at an extended living facility) and tested positive a few days ago. I'm extremely worried about her because she may be living out of her car. Her mother, who is a meth addict, lost their house, so Steph is basically homeless and forced to couch surf. Because she's conscientious, she most likely wouldn't be comfortable exposing anyone to the virus, so it would not surprise me at all if she is trying to deal with the virus by living in her car. Since it's the middle of winter and NC can be brutal, I am worried about her.

The other person I am concerned about is my professor, 1 She sent the class an email on the first day we were supposed to meet telling us that she was getting tested because she wasn't asymptomatic. She apologized for putting class on hold. I don't care about that; I would rather she take care of herself first. We really need to move from being a society that prioritizes work to one that prioritizes health. That someone feels guilty they can't work because they are sick speaks to a much deeper societal issue that needs to be addressed.

For now, my Covid-19 experience has mostly been recounted. I am scheduled to get vaccinated on January 29<sup>th</sup>, since ASU fought for TAs to be counted among essential frontline workers. Part of me is incredibly grateful for that and part of me is incredibly frustrated that so many people who are true frontline workers – grocery store clerks, fast food workers, restaurant staff, maintenance staff, janitorial staff – the true backbone of our society – are being shafted, as per usual, out of a vital resource yet again.

If anything, Covid-19 has exposed the societal problems that lay at the heart of the United States. Racism, classism, sexism – all the isms – still dominate society. The elderly are disparaged, the disabled mocked. Those who are different are bullied, while those who do societally foundational work are relegated to the backrows while the upper and middle classes are privileged at the expense of the poorer classes. All I see, anywhere I look these days, is pain. Pain, and people turning to addictions of every sort to try to numb it out. This society is not a healthy one. The systems that serve as the integrating parts of this world are inherently flawed, as they privilege power and wealth over compassion and understanding. How do we repair relationships with the world when the world of relationships we've crafted in the Western world are built on exploitation and cruelty? Though the pandemic is devastating and it is awful that so many people are dying, the truly traumatic realization is that the world I live in is founded on cruelty and division rather than compassion and mutual recognition.

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