

Grassroots groups and civil society responses to pandemic

Nationwide there are somewhere between 2,000 and 4,000 new grassroots political groups that were formed by local volunteers in the wake of the November 2016 election and that continue to be active today.

- <https://democracyjournal.org/arguments/middle-america-reboots-democracy/>
- <https://www.americancommunities.org/grassroots-blossom-across-america-reshaping-countrys-political-geography/>

Many have members who have been spending 10-20 hours a week on face-to-face politics: door-knocking, protests, and political outreach events. How should their efforts be adapted, in a moment of epidemic when strict social distancing is required? **SCROLL DOWN TO PAGE 2: WE ARE COLLECTING SUGGESTIONS ON THIS THERE.**

More urgently: Are there things grassroots groups can be doing to turn their social/organizational capacity toward public health goals right now, quite separately from their electoral goals? Here are the suggestions that have emerged from conversations with practitioners & scholars so far:

Part 1: Things Grassroots Groups Can Do To Help (Non-Political)

1. This should go without saying but: be maximally supportive of efforts to limit face-to-face contact to slow the rate of COVID-19's spread. When public health authorities are urging cancellation of public or group events, cancel **all** public or group events. Do not push the envelope. Model for others what immediate action to "flatten the curve" looks like.
2. Push elected officials and employers hard, now, for action to get health care workers the Personal Protective Equipment they need, and for action on paid sick leave guarantees for all "essential workers," who include those keeping grocery stores, dollar stores, and more open for us.
3. Support each other within your group. Some group members will be at high risk due to their age, others because they are currently employed health professionals. Put together a group-care committee and have committee members divide up the full list of members and make calls to each to ask what their needs may be. SEE SAMPLE SCRIPT BELOW
4. Figure out what the main regional resource point will be for people with emerging needs. Eg, in SWPA, <http://pa211sw.org> (United Way). Connecting people to reliable resources is better than trying to improvise unreliable ones yourself. But, also: follow up to make sure those resources really did turn out to be reliable.

5. Set up a system of regular phone check-ins on elderly residents within your district: connect them with food drop-off (or provide if you can steadily do so) if needed, and provide human contact to protect against the emotional impact of isolation. Civic groups including neighborhood associations, churches and synagogues, food banks, and local associations for the aging like www.swppa.org/agefriendly are hurrying to set up such systems. Find out who else is doing this work locally and partner with them (or coordinate so you cover areas they aren't reaching): you'll be more impactful.
6. Identify areas where virtual volunteers are needed—such as phone/facetime tutoring for students if schools are closed. Again, building outward through your members' social networks, to match members with skills to offer with people who need those skills, will work most effectively.
7. Encourage financial donations to your local food bank. (That will help them more than drop offs, which can be complicated to receive and support even absent concerns about epidemic spread.) Local groups that support immigrants will also have multiple impacted families needing support. Give money.

SAMPLE SCRIPT FOR ASSESSING GROUP MEMBERS' NEEDS

This script was developed by my synagogue, which is full of amazing leaders. I received a check-in call less than 12 hours after face-to-face activities were put on hold in March. I'm sharing it here with their permission. The congregation president told me the one item they forgot to include was a question about whether the person being called might be available to help others. And even so, she told me, that came up voluntarily in call after call.

Instructions to those making calls:

In the spirit of caring for each other as a community motivated by our Jewish values, we will be calling all member households. **Our goal is to identify and assist those at risk and in need and provide information about the availability of reliable resources and information regarding the COVID 19 (Coronavirus).**

In making calls, please do your best to keep a calm and positive demeanor. Don't try to be an expert or answer all the questions someone may have. Do NOT try to answer questions about which you have any question yourself or in a manner that is not clearly factual and accurate. It is best to say "I don't know, but I'll have someone call you who can answer that accurately", or "that sounds like a question for your doctor".

If you identify a member of family at great risk or in need of immediate assistance, contact _____ at 412-_____ or _____@_____. right away.

This script is for calls to all members of our congregation. Keep in mind that the people most at risk with regard to COVID 19 are those who have chronic health conditions, suppressed immune systems, an/or are over the age of 60. That includes the great majority of our membership.

Keep a log of your calls using the script as a checklist.

If after three attempts you are unable to reach a member on your list, inform _____ at _____.

If your contact refuses to talk with you or is suspicious that your call is a scam, inform _____ at _____.

SCRIPT FOR CALLERS

1. Hi _____, this is _____ from Congregation [name]. I'd like to talk with you for a few minutes. This is about the Coronavirus and the preparations that our congregation is making for when it arrives in Pittsburgh, so I have a few questions, OK?
2. Have you gotten the emails our congregation has sent out about the virus?
3. What is the best way for the congregation to stay in contact with you?
4. The CDC information says that the people most at risk from the coronavirus are people over the age of 60, or people with chronic health conditions like suppressed immune systems, lung and heart conditions and things like that. Do you mind if I ask if you or anybody in your household falls into any of those categories?
5. Do you have family to help you or someone in your home were to get sick?
6. Do you have a way to get food, medicine, and basic needs if you are not able to get out of the house for a while?
7. May I stay in touch with you or connect you to another member of the congregation to check in with you while the virus is still a threat?

Part 2: I am also compiling suggestions for things grassroots groups can be doing to move their political outreach agenda forward in the face of full-scale social distancing. What is your group doing? Please add suggestions here!

1. Here's a great list of examples from Run For Something:
<https://airtable.com/shrlBkMw2j7h9vHqm/tblm5qjFyut8zcwjk?blocks=hide>
2. Voice of Westmoreland says: Step right ahead to schedule a zoom or conference call with all members who want to join in. Don't wait to be confident the tech is going to work perfectly, or to have the perfect agenda. Just getting folks together to share what they are seeing and thinking, talk through goals and targets for action, think about who's going to need what kind of help: all this is calming and empowering.
3. Get yourselves trained (virtually) in deep canvassing (by phone), by Changing the Conversation Together: <https://www.ctctogether.org/ctc-events>
4. [Pennsylvania groups specifically] Push out through all your channels the message that folks should request their mail-in ballots for the (now) June 2 PA primary

immediately—and should urge everyone they know to do the same. More requests now means less last-minute overload at the Boards of Elections. Also, at the end of the on-line request form, people will be able to choose to have their upcoming (November) general election mail-in ballot mailed automatically. Getting as many people signed up now for November mail-in ballots—and with experience in how the mail-in process works—will be a big boon come November.

<https://www.pavoterservices.pa.gov/OnlineAbsenteeApplication/>

5. Down-ballot campaigns currently underway have shifted to phone-banking, text-banking, video-streamed town halls, dial-in calls with candidates, etc. Channel supporters to help them.
6. Campaigns are also ramping up yard sign drop off. (Will yard signs become more important as a piece of signalling outside of media bubbles, given that most other forms of communication that cut across existing social networks are barred?)
7. @PhillyResistNow reports: If we have to temporarily suspend rallies, we have planned things such as livestreaming members making calls to Toomey from their homes, tweet storms, and other activities that both keep pressure up but also provide a continuity of the community we've built. [Update: TuesdaysWithToomey will hold virtual rallies via Facebook and Twitter, every Tuesday at noon starting today. --LP] Example here!
<https://twitter.com/TuesdaysToomey/status/1245037776099213316>
8. ?? Suggestions welcome here!

Part 3: Mutual Aid organizing in response to COVID-19

Aggregate list of mutual aid initiatives (not comprehensive; already impressive!)

https://docs.google.com/document/u/0/d/1uP49OQGhosfBN4BOYQvyy_Mu3mpCSOYzip13LksC-S8/mobilebasic#h.ep6ylhlannkh

Map of mutual aid initiatives (also not comprehensive, also impressive)

<https://www.mutualaidhub.org>

List of local news coverage of coronavirus mutual aid initiatives

<https://mutualaiddisasterrelief.org/in-the-news/>

Mutual Aid: How to Build a Network in Your Neighborhood (great guide developed by Mutual Aid Medford & Somerville)

https://docs.google.com/document/d/1ca-sz4DRNvUg8ezcrfd6awH-ahxBDJwnbdzxm4_qDVVs/edit?

Podmapping for Mutual Aid (create March 9, 2020)

https://docs.google.com/document/d/1-QfMn1DE6ymhKZMpXN1LQvD6Sy_HSnnCK6gTO7ZLFrE/mobilebasic

How-to Neighborhood Pod

https://docs.google.com/document/d/1j8ADhLEuKNDZ1a_opmzudywJPKMXcNKu01V1xY2MiIA/edit

A Neighborly Invitation:

https://docs.google.com/document/d/1walh2V3ziWUCXgrBW9O4UaYu8u5oPWx8vvhTcGng_GA/edit?fbclid=IwAR0kJlyPsBoXyH0xnOrR927s5-dwsgl5tLdKfFpZBEDWSjsS_FYpDTg-z1E

Another crowd-sourced aggregate list

<https://docs.google.com/spreadsheets/d/1M9Y46lhZSVIRyE1Qh74Tj5uu91VKs5nhFCUudnFOqOg/edit?ts=5e6d3843#gid=776187552>

Mutual Aid Medford and Somerville

https://docs.google.com/document/d/1j8ADhLEuKNDZ1a_opmzudywJPKMXcNKu01V1xY2MiIA/preview

Chicago Mutual Aid

<https://docs.google.com/forms/d/e/1FAIpQLSd0MK1dnny1BTIzvohuRInlC6fHqXKgez0hrZJLuZ6F4-qu9w/viewform>

Tacoma Mutual Aid Collective

https://docs.google.com/forms/d/e/1FAIpQLScQLH-RwSCAVCAm310EF91j74mvjIG49Za0F__8Mb1S3ZFEwA/viewform

Seattle Mutual Aid

<https://docs.google.com/forms/d/e/1FAIpQLSdgbAX21UARi98rKKX6b6mpvpVHW4b63F2n2beJIHielcdU2Q/viewform>

Mutual Aid LA (from @groundgameLA)

https://docs.google.com/forms/d/e/1FAIpQLSdGfypKKirsvUQCX5eVix86nlrTaf5atsnhn8bWxpCRn_IM9Q/viewform

NYC resources (including list of multiple mutual aid initiatives)

<https://docs.google.com/document/d/18WYGoVIJuXYc3QFN1RABnARZlwDG3aLQsnNokl1KhZQ/edit>

Pittsburgh Mutual Aid

<https://docs.google.com/spreadsheets/d/1FQO1uLpHQgc3VU1GgFq1MnjhiGzQhpSN8GwKgHtbvdM/edit#gid=1942870066>

Pittsburgh Student Mutual Aid

<https://docs.google.com/spreadsheets/d/1M5AsXP15FEeLNLj3s2oV38hO-TCpl2-eut6aue8KuF4/edit#gid=0>

Pittsburgh Cares Buddy System

<https://docs.google.com/forms/d/e/1FAIpQLSerpDDs6ZPe6oxQ9kuWi3a8c1pO8GP8o2ghUmrnKriYH7DBNA/viewform?fbclid=IwAR0sRz77yyCZ91p9EYgYcU6P4Ne817VUaiPmDezzLyFSu9jN6vnFCThNYvA>

Sharpsburg Urgent Needs Assessment

https://docs.google.com/forms/d/e/1FAIpQLSdl3ZPUOmzXTcim5Aj8KSM_F-49j-VSxLHlf5_4o08bTF3eOA/viewform

Curated, crowdsourced local resources document (Pittsburgh COVID-19 Resources):

https://docs.google.com/document/d/1oL6ju8kEQd_cWltkufZvVq1tMGetsY92ZVDzlwPa35l/edit?fbclid=IwAR0UZhGG1OBg1n0HKnezsmKd2f4MC1Jq95vybwmS7puKBItkvnfXNGbrmc

Personal Protective Equipment local exchange (Pittsburgh):

<https://www.ppeconnectpgh.com/home/#page-section-5e75cb9f9ba3bf5a8dbe8104>

State governments recruiting virtual volunteers for public health response (Michigan):

https://newmibridges.michigan.gov/s/ct-public-volunteer?language=en_US

Part 4: Background and context:

The idea of this list emerged from a conversation that began between [Lara Putnam](#) (History, Univ. Pittsburgh) and [Jessica Pickett](#) (MS Health Care Management, PhD Managerial Science/Applied Economics), on Twitter, March 8, 2020. It provides more information and context, and is reproduced here in edited-to-be-readable form.

Jesica @pickettjessica :

Thoughts on how local electoral campaigns can / should adapt strategies for social distancing, or ramifications for likely turnout?

Lara:

We should be asking *you* instead. In a nation with very little slack in its social-organizational systems, I am telling you that you have available the following: about 3,000-5,000 active local groups comprised of largely middle-aged & retired women, & some men, many w/experience in helping professions: teachers, health care, social work, admin. What does epidemiology tell us is the best use of this kind of civic capacity in a pandemic?

I'm going to list some of their possible assets here, not knowing which may be relevant. They are

1. unusually knowledgeable about the social geographies of their counties, state house districts & congressional districts;

2. willing to make phone calls to acquaintances & strangers;
3. high level of trust in experts;
4. first-name familiarity w/decent # elected officials & some knowledge of which are responsive to (which) constituents;
5. self-selected for flexible schedules & some economic means, & for willingness to invest time & money in collective good;
6. dense internal communication systems & informal but pretty strong systems for sharing strategies & best practices between groups;
7. w/in each group, ~dozens of people who had budgeted ~10-20 h/week from now to Nov for face-2-face electoral outreach that may not be happening. ???

@PhillyResistNow:

I'd also add: -- contacts with local journalists -- known amongst (non-active) friends as reliable source of political information/opinion -- willingness to try new things, learn from mistakes and try again

@PhillyResistNow:

We also have a plan for if we need to cancel our weekly rallies -- continuing to have an online presence and calls to action. Your tweets have spurred me on to make sure we also ask people to check on those around them. Thanks!

Jessica Pickett:

Awesome! You raise an important point: it's not just re-optimizing the potential for wider social impact but also enabling sustained participation within the movement itself. How can you use Zoom and other tech tools to keep momentum & enthusiasm while setting a positive example?

@PhillyResistNow: Exactly! We've been talking about how to expand our definition of & opportunities for TWT participation beyond just people who attend our protests*. The virus has just pushed us to do it more urgently. *We recognize that ability to attend can depend on privilege. If we have to temporarily suspend rallies, we have planned things such as livestreaming members making calls to Toomey from their homes, tweet storms, and other activities that both keep pressure up but also provide a continuity of the community we've built.

Jessica Pickett:

I (obviously) really like this reframing - especially insofar as your long-term goal has always been to repair the country's civic fabric rather than a narrow focus on elections per se. In that case: could grassroots groups serve as a volunteer army of community health workers?

Lara Putnam:

Jessica, yes exactly this is the shift in question I meant. You basically have a core of people primed & eager to dive in & *help*, if there is any clear guidance that can be given about what actually would be helpful: & complement official steps rather than obstructing. People who would be not just willing but eager to collaborate in public health response in a non-partisan &

election-talk-free way: who understand that in the long run, achieving goals is about building ties outward, & sometimes you have to stash formal politics on the shelf

@PhillyResistNow:

Being able to listen in as the two of you discuss this is social media living up to its potential -- and very helpful to TWT as we think of our role in this moment. Thank you!

Lara Putnam:

(Replying to @PhillyResistNow @pickettjessica and @TuesdaysToomey)

All the examples you give of ways to keep the TWT community engaged w/ each other & Our Senator are great. They also highlight what I think may be a kind of systemic issue. Virtual communications are really effective flowing among people who've already decided to connect BUT some of the key strategies grassroots groups have innovated have been ones to pull in not-yet-connected (protests; deep canvassing). & for that outreach piece the non-face-2-face counterparts are starkly less valuable. So instead of directing all this human capacity towards hand-lettering postcards that are only marginally more impactful than printed mailers: figure out what crisis-appropriate action-in-the-community needs doing. So @pickettjessica: "How to Turn Your Grassroots Group into a Useful Public Health Auxiliary When Pandemic Hits"—what should a document like that include?

Jessica:

I think that the biggest question - which will vary by state policy, politics & medical market concentration - is whether to aim for a semi-formal info role in the healthcare system (e.g. partnering w/ @HCofWP or @JHForg here) vs "meal trains on steroids" for vulnerable groups.

Lara:

Re semi-formal role I would think that part of the problem is that by definition, once support is needed all official systems are necessarily in crisis mode w/no time or capacity for creating any new relationships of delegated authority. who can vet? who oversee? Not gonna happen. So what are the lessons from previous epidemics about effective civil society response? Like is there a classic text like Stewart Brand's brilliant "Learning From the Earthquake," but for epidemic disease? http://sb.longnow.org/SB_homepage/Earthquake_Lessons.html...

@BorosNorth:

During the 1918-1920 flu pandemic, the Pittsburgh region had the benefit of women-led community organizing & shared sacrifice related to the war effort. #pgh #epi #history #flu

The Women's Division, Influenza Epidemic Committee

The Women's Division performed an immense amount of detail work, it having in charge the actual work of enrolling the nurses and sending them to hospitals and private homes, furnishing emergency motor service to the Red Cross and to the hospitals, sending volunteer aids, inexperienced in nursing but able to help in the general work of both the regular and the emergency hospitals, visiting the foreign settlements and giving instruction as to how to avoid contagion and many other valuable lines of work, most of which were fully summarized in the monthly reports of the local Council.

During November alone, 385 volunteer assistants were enrolled and put to work; 45 teachers were enrolled, 64 members of the Mothers of Democracy went into the battle against the disease, and every possible agency was brought into activity, 728 dependent children were located and were given such care as was necessary.

The Emergency Influenza Committee continued its activities from the Central Office until November 16th, and after that devoted itself to follow-up work, prevention of tuberculosis and the visiting of new cases which continued to appear.

Details of this work will be found later in the report of the Child Welfare and Educational Divisions of the Women's Council.

FOREWORD

IN PRESENTING this report of the activities of the Council of National Defense and Committee of Public Safety for Allegheny county, we desire to call attention to several noteworthy facts:

In the first place, while the work of the Committee ostensibly began in May, 1917, there was no provision made for any financial support until the latter part of July, and then only a small sum to provide for the clerical work, postage, etc., up to February, 1918, when the Committee after some months of effort succeeded in arranging a budget and had an appropriation authorized for the same.

As a consequence of this the actual organization of the separate divisions and local community councils was greatly delayed, and it is with considerable pride that we record the fact that in nine months, covering the period until November, 1918—to the signing of the armistice—we had established 98 township and borough committees, and 109 Community Councils in all, with a total membership of close to 15,000 workers; and in addition to this enrolled as co-operative units, such as the Women's organizations, the Boy Scouts and other bodies having an additional membership of close to 10,000.

By December 1, 1918, we would have had a list of active workers numbering close to 30,000, but for a falling off of all efforts caused by the influenza epidemic and the sudden signing of the armistice, which put an end to all activities.

Adia Benton, @Ethnography911:

I'm thinking grassroots organizing folks in health ed, risk assessment, community check-in roles could be good (and they wouldn't necessarily need to be unpaid, if emergency funds can be used for this).

Lara:

Are there guidelines for what an effective community check-in program should look like? Given grassroots' experience w contacting all selected voters, @ home, on a regular cycle this seems a great fit for acquired skills. Links to best practices, examples? Would something like a phone tree or an assigned phone-calling older residents of their neighborhood weekly to see if they are well or need drop off of groceries or ?? be useful?

Jessica:

Unfortunately, this pandemic is likely to last long enough that even with best practices some of us will fall ill. Post-recovery (confirmed by either negative tests or an eventual antibody test), though, that may mean we can leverage that immunity (however temporary) to more actively support those still at risk. (There is a lot of historical precedent for how recovered smallpox patients played a key role in nursing others in subsequent epidemics. I'm envisioning a bit more companionship, or at least helping with grocery shopping, etc.)

Mari: If one of your group's members already has ties to public health officials, you could have them reach out and let them know your group exists, so they can add you to their list of community contacts for health information messaging or other outreach.