EXCLUDED IN THE EPICENTER

IMPACTS OF THE COVID CRISIS ON WORKING-CLASS IMMIGRANT, BLACK, AND BROWN NEW YORKERS

MAY 2020
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Our communities are reeling from COVID-19 and the crisis it has unleashed. This has been one of the most difficult periods in the more than two decades that Make the Road New York has worked to support and organize immigrants and Black and Brown New Yorkers. Speaking to thousands of community members each week in the communities where we work in Queens, Brooklyn, Staten Island, Long Island, and Westchester, far too many members and their loved ones have contracted the virus and died. We hear daily from workers who have lost their jobs, are excluded from accessing Unemployment Insurance and all other income supports, and do not know how they will be able to buy groceries or pay the rent. We hear, too, from front-line workers who face the risk of contracting the virus at their work sites, where they labor without adequate protections.

As a community organization dedicated to meeting the needs of our members and neighbors, while also fighting for policies that address structural problems, we have provided direct cash and food assistance. We have created virtual community spaces to maintain connection and purpose among our members. We have counseled families in their grief from a distance - one of the cruelest aspects of the disease. We never thought we’d have to provide step-by-step support for community members making final arrangements for their loved ones, but that is the reality we face.

But community organizations can only do so much given very scarce resources. As this report demonstrates, the public health, economic, and housing crisis continues, and the unmet needs of immigrants, Black, and Brown communities are simply staggering.

The report examines in detail the experience of working-class immigrant, Black and Brown New Yorkers during this crisis. Based on a survey of 244 primarily Latinx immigrants across New York City, Long Island, and Westchester, one third of whom are undocumented, it provides striking findings related to the pandemic’s toll on community members’ health, income and work, housing insecurity, and education.

As the only survey to date focused on the experiences of immigrant New Yorkers reported in their own words, the quantitative and qualitative data provide powerful insights into the scale of this crisis and the depth of its impact across immigrant communities.
The survey data lays bare the harrowing health impacts of this crisis on immigrant, Black and Brown communities. Well over half (58%) of respondents have been sick themselves or had a family member sick since March 1st, and 60% of those have either confirmed or believe that they were COVID-19 positive. In addition, one out of 6 respondents (16%) has lost a family member to COVID-19. The mental health effects of the crisis are stark as well. Close to two thirds (62%) of those surveyed report that they or someone in their family have suffered anxiety or depression since the start of the crisis, and close to half of those (48%) report not knowing where to turn for help.

The data further demonstrates the grave economic impact of the crisis. In 92% of households surveyed, 84% of respondents themselves are currently unemployed and 88% lost their jobs due to the pandemic. Meanwhile, only 5% of respondents received unemployment benefits in the prior month and only 15% report receiving any type of government assistance at all. Given the scope of the economic devastation wrought by this crisis, 54% of respondents shared that they were not able to pay their rent in April, and 90% were worried about being able to pay in May (the survey was conducted in late April).

The original data included herein speak to the enormity of the problems facing these communities, while identifying urgently-needed government solutions. Community members are dying from COVID-19 and, as one of our members recently shared, “if we don’t die from the virus, it will be from hunger.” As residents in the epicenter of the pandemic grapple with the grave risk of infection, the dramatic loss of income, and deep concern of displacement, they need urgent action from the federal, state, and local governments. The report thus concludes with a list of policy demands.

The Trump administration and its allies in Congress willfully excluded millions from economic relief. It is thus especially urgent for New York State—and particularly Governor Andrew Cuomo—to advance a true recovery for all by creating a $3.5 million fund for excluded workers, canceling rent, and addressing the public health crisis in the state’s jails and prisons by freeing at-risk detained and incarcerated people.
INTRODUCTION

THE CONTEXT

The coronavirus is devastating communities across New York. Ten weeks after the first confirmed case, the state has confirmed 340,657 infections and 26,656 deaths. COVID-19 has disproportionately impacted New York’s low-income communities of color. As of early May, Black and Latinx New Yorkers have died of COVID-19 related illness at rates more than two times higher than their white and Asian neighbors. And, as we demonstrate below, the economic toll in immigrant, Black, and Brown communities has been enormous.

Immigrant communities and communities of color throughout New York are the epicenter of the crisis -- home to many essential workers on the front lines of the crisis, helping to feed and care for others. In fact, immigrants make up a majority of New York City’s essential workforce and one-third of the essential workers statewide.

Immigrant, Black and Brown neighborhoods were marked by inequity well before this pandemic, with limited access to health insurance, healthcare and healthy food, low incomes, high unemployment rates, outsized rent burden, less healthy and more overcrowded living conditions, and, as a result, more chronic health problems.

One of the most extreme concentrations of COVID cases has been in Elmhurst, Corona, and Jackson Heights, Queens — home to thousands of Make the Road New York (MRNY) members. These neighborhoods have seen an enormous spike in infection, hospitalization, and death. But it has not just been immigrant communities in Queens, where 47% of residents are immigrants, that have been hard hit. The Bronx, where 35% of the population are immigrants, has the highest infection rate of any borough in New York City. On Long Island, the hardest hit neighborhoods have been Brentwood, Central Islip, and Hempstead, the region’s largest immigrant, Black, and Brown communities in the region.

NYC COVID CASES BY BOROUGH

<table>
<thead>
<tr>
<th>Borough</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Queens</td>
<td>54,121</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>46,579</td>
</tr>
<tr>
<td>The Bronx</td>
<td>39,878</td>
</tr>
<tr>
<td>Manhattan</td>
<td>21,662</td>
</tr>
<tr>
<td>Staten Island</td>
<td>12,380</td>
</tr>
</tbody>
</table>

NYC COVID DEATHS BY RACE/ETHNICITY

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>% COVID Deaths</th>
<th>% NYC Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latinx</td>
<td>34%</td>
<td>29%</td>
</tr>
<tr>
<td>Black</td>
<td>28%</td>
<td>22%</td>
</tr>
<tr>
<td>White</td>
<td>27%</td>
<td>32%</td>
</tr>
<tr>
<td>Asian</td>
<td>7%</td>
<td>15%</td>
</tr>
</tbody>
</table>

Data available as of May 8, 2020. Source: DOHMH.
This crisis has shone a light on the economic fragility of many immigrant, Black, and Brown communities across New York. In addition to being more likely to perform essential work, immigrants and Black and Brown New Yorkers are more likely to have lost work from this crisis.

According to a report by James A. Parrott and Lina Moe at the New School’s Center for New York City Affairs, 68% of job loss in New York City has been among people of color, with an especially high figure among Latinx New Yorkers. Immigrants have been particularly hard hit. The report finds:

*While foreign-born workers held 49% of all private jobs before the pandemic crisis, they account for 54% of the lost jobs...The 54% displacement rate among undocumented workers is twice that of the 27% overall private sector displacement rate.*

The report further estimates that 192,000 undocumented workers in New York City have lost their jobs or been unable work since the crisis began.8

Meanwhile, government relief has been scant and excluded many. The federal CARES Act included a one-time tax rebate to tax filers with social security numbers, as well as expanded unemployment insurance. But neither of these measures included the eleven million undocumented people living in the country, and the tax rebate excluded mixed immigration status families where the tax filer does not possess a social security number. In New York, nearly one million undocumented people were excluded from federal relief.9

At the same time, New York State has not taken substantial action to support excluded workers or to address the desperation that many newly out-of-work tenants feel about upcoming rental payments. In the midst of a pandemic, the message to these workers seems to be that they are good enough to clean streets and subways, stock grocery stores, deliver food to homes, and even care for the sick, but not good enough to access vital economic assistance, worker protections, and adequate health care.

Moreover, thousands of Black and Brown New Yorkers—who are disproportionately incarcerated and detained—sit in jails, prisons, and detention centers, where infection rates are sky-high. For instance, at New York City’s Rikers Island jail, the infection rate was 9.6% as of May 5, while the citywide rate was 2.1%, according to the Legal Aid Society.10 In the first five weeks of the crisis, there were ten confirmed deaths and 1,200 confirmed cases in New York City’s jails.11 As of May 10, the State’s Department of Corrections and Community Supervision reported more than 1,650 confirmed cases among staff, incarcerated people, and parolees.12 Experts say the number is likely much higher.13 Twenty-three deaths have been reported across the state system. One particularly tragic example is Darlene “Lulu” Benson-Seay, a 61 year-old sexual assault survivor who was almost certainly wrongly convicted in the first place and was incarcerated at Bedford Hills Correctional Facility.14 Ms. Benson-Seay passed away thirteen days before her 62nd birthday. Simply put, incarcerated and detained people like Ms. Benson-Seay are being kept in cages that could very well kill them.
### Pre-COVID Inequities in Hard-Hit Areas

<table>
<thead>
<tr>
<th>Area</th>
<th>Positive COVID tests per 1000 residents</th>
<th>% People of color</th>
<th>Severe rent-burden (50% or more of household income spent on rent)</th>
<th>Poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bushwick</td>
<td>17.5</td>
<td>90%</td>
<td>31.2%</td>
<td>25%</td>
</tr>
<tr>
<td>Pop: 112,388</td>
<td>$51.6k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elmhurst &amp; Corona</td>
<td>35</td>
<td>93%</td>
<td>35.9%</td>
<td>27%</td>
</tr>
<tr>
<td>Pop: 188,107</td>
<td>$52.9k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Bronx</td>
<td>30</td>
<td>98%</td>
<td>32.5%</td>
<td>29%</td>
</tr>
<tr>
<td>Pop: 98,403</td>
<td>$21.4k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Port Richmond</td>
<td>32</td>
<td>61%</td>
<td>35.6%</td>
<td>21%</td>
</tr>
<tr>
<td>Pop: 181,484</td>
<td>$51.1k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brentwood</td>
<td>36.6</td>
<td>82%</td>
<td>29.3%</td>
<td>16%</td>
</tr>
<tr>
<td>Pop: 62,132</td>
<td>$67.7k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hempstead</td>
<td>36.2</td>
<td>95%</td>
<td>33.2%</td>
<td>20%</td>
</tr>
<tr>
<td>Pop: 55,454</td>
<td>$56.2k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White Plains</td>
<td>28</td>
<td>32%</td>
<td>28.2%</td>
<td>12%</td>
</tr>
<tr>
<td>Pop: 57,925</td>
<td>$87.6k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Upper East Side</td>
<td>9.6</td>
<td>22%</td>
<td>19.7%</td>
<td>7%</td>
</tr>
<tr>
<td>Pop: 225,914</td>
<td>$133.9k</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New York City</td>
<td>21</td>
<td>66%</td>
<td>28.1%</td>
<td>20%</td>
</tr>
<tr>
<td>Pop: 8.5 mil</td>
<td>$57.8k</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources: DOHMH Community Health Profiles, 2018; Furman Center; U.S. Census Bureau (2016). American Community Survey (ACS) 5-year estimates; City of White Plains NY Analysis of Impediments to Fair Housing Choice 2020-2024; https://nassaucounty.maps.arcgis.com/apps/opsdashboard/index.html#/3545ec3d3a3e4ac1babe7d4714fedb56
THE WHOLE STORY

As we move past the initial impact and toward recovery, we know that how our nation recovers from the crisis — who is supported and how — will determine whether we increase inequity or take this opportunity to rebuild a nation where we all can thrive. In order to do that, we must understand the impacts on those communities that have been hardest hit.

We are all flooded by a barrage of information that paints the big picture of COVID, but critical data are missing. Data on racial disparities, on housing and mental health impacts, on youth and education, on detainment and incarceration — and especially on how people experience these disparities — has too often been left out of the story. MRNY and Hester Street set out to fill in the gaps, to tell the stories of hard hit communities — in their own words.

METHODOLOGY

Community organizers surveyed 244 adult and youth MRNY members, students and clients in Queens, Brooklyn, Staten Island, Long Island and Westchester County over the course of one week in late April, 2020. Surveys were conducted by telephone in English and Spanish. Respondents were paid $20 for their participation to compensate them for their time. The survey consisted of 56 questions, the majority of which were yes/no questions. The time to take the survey ranged from 15 minutes to nearly 2 hours. Many of the survey conductors know the respondents they contacted, and in many cases the survey call turned into an opportunity for the respondents to talk through the experiences they were having and the challenges facing them and their families. Many of their open-ended responses are included throughout the report to provide a clearer sense of their experiences during this period.

The survey data were anonymous — we did not connect names to responses. The quotes that appear throughout the report are thus not attributed to respondents’ names. In addition to race, age and gender identity, we also asked respondents for their zip code. In the event that individual survey questions were not answered by all of the respondents, we adjusted the percentages based on the number of responses per question. Here we analyze the major findings* — complete findings and survey questions are available on request.

The report proceeds with a presentation of key findings across various dimensions: health, job and income loss, housing, education, and community response. Throughout, testimonies from community members provide an insight into the quantitative findings. An analysis of specific geographies where a critical mass of community members were surveyed is included, as well as spotlights on the suburbs (Long Island and Westchester) and the experiences of youth during this crisis. The report concludes with policy recommendations to meet the scale of this crisis.

*Note — in early March, Make the Road New York organizers conducted two additional, shorter surveys — one for their Domestic Workers Project, and one for their emergency relief program. The former consisted of calls to close to 200 household cleaners in Queens and Brooklyn, and the latter, 4,197 members, clients, and program participants who were applying for food and/or cash assistance. We highlight select findings from the Domestic Workers survey. The data from the emergency relief survey were focused on job and income loss and were consistent with the results presented.
SURVEY RESPONDENT PROFILE

RACE/ETHNICITY
- 93% Latínx
- <1% Asian
- 1% White
- 5% Black

IMMIGRATION STATUS
- 79% are immigrants to the United States
- 69% live in mixed-status households

AGE
- 24 years and under: 33%
- 25-44 years: 29%
- 45-64 years: 33%
- 65+ years: 5%

GENDER IDENTITY
- 63% Female
- 33% Male
- <1% Non-binary
- 4% Transgender

GENDER IDENTITY RACE/ETHNICITY
- 62% of respondents live in a household with children

WHERE SURVEY RESPONDENTS LIVE
Vulnerability Index
- High Concentration of COVID cases
- Low Vulnerability Index

Vulnerability Index is defined as areas with high:
- POC population
- Service Worker Population
- Overcrowding Households
- High Rent Burden

Survey Responses
- High COVID-19 Case Density
- Low COVID-19 Case Density

LONG ISLAND
- Concentration of COVID cases
- Low
- High

WESTCHESTER
- Concentration of COVID cases
- Low
- High

*The estimated undocumented data highlighted throughout this report refers to survey respondents who indicated they were immigrants to the United States but not US citizens, lawful permanent residents, DACA or TPS recipients, or individuals with any other work authorization or asylum status.
**PERLA SILVA** is a Deferred Action for Childhood Arrivals (DACA) recipient, Brooklyn resident, and Make the Road New York member. The coronavirus first hit her family financially. Her brother, her sister-in-law, and her father all lost their jobs. Then the virus took away her mother.

Perla and her siblings had convinced their mother, Concepción, who had prior health conditions, to stop working so that she could stay home and take care of herself and avoid getting sick. Around March 10th, Concepción started to show symptoms of the virus. The family listened to the advice of the doctors and the city and state: don’t go to the hospital unless it’s absolutely necessary. Eventually, it became too difficult for her mother to breathe and they called the ambulance on March 23rd. When the paramedics saw her, they were dismayed at how sick she was and that she had not received medical attention earlier.

They took her to the hospital, where she was isolated. The family couldn’t see or hear from her. Perla recalls, “We were desperate to hear news from the doctor. We understood that the hospital, and the whole system, was overwhelmed. But it was still shocking that the only regular calls we got were from the hospital’s finance office—several times a day—asking us how we would pay.” Days later, Perla heard from the doctor that her mother had passed away. The family was heartbroken.

Perla explains that mixed immigration status families like hers are being hit very hard by this crisis, and yet have been excluded from most government support. Perla explains, “We need a Recovery for All. One that puts people first by making sure everyone has access to the health care they need, without huge hospital bills. One that provides the relief we need to be able to feed our children during this crisis. And one that cancels rent to make sure we don’t get kicked out of our homes. This crisis has taken away the most precious person in the world to me: my mother. Nothing can make up for that. The least that our elected officials can do is respond with a real recovery for all that treats us with the respect and dignity that we deserve.”
FINDINGS:

KEY TAKEAWAYS

Health System Failure
- While three out of five respondents report that someone in their family has been sick since March 1st, 60% of which report it was likely from COVID-19, less than half received the medical attention they needed.
- A full 16% of respondents — one out of six — has lost a family member to COVID-19.
- Almost two-thirds of respondents (61%) have experienced anxiety or depression over the past 8 weeks, and close to half (46%) did not know where to go for help.

Overwhelming Job Loss & No Safety Net
- 92% of respondents reported that either they or another earner in their household has lost their job or income as a result of the crisis.
- 84% of respondents are now themselves unemployed, with 88% of them reporting job loss due to COVID-19.
- Only 5% of respondents received unemployment benefits in the last month.
- 90% of household cleaners had lost their jobs. Those that were working had fewer clients than usual and had lost income.

Nowhere to Turn
- More than half (53%) of respondents couldn’t pay their April rent and 89% were worried about being able to pay the May rent.
- The majority of respondents are sheltering in place in overcrowded (63%) and unsafe conditions (58%) in their homes.

Education Emergency
- Almost two-thirds of respondents (65%) rate their remote education experience as fair, poor, or very poor, with close to a quarter (23%) rating their experience as poor or very poor.
- Most respondents face barriers to remote learning due to a lack of necessary devices (42%), internet access (38%), and translation/language services (37%).

Powerful Community Response
- 67% of respondents had received income replacement or cash assistance from community-based organizations. Only 15% have received such assistance from the government.
- 65% of respondents name community-based organizations as one of their main sources of information.
FINDINGS:

HEALTHCARE

Overall, survey respondents are getting sick at substantially higher rates than average New Yorkers, with more than 58 percent reporting they or a family member was sick since March 1, and 60 percent of those confirmed or believed to be COVID-19. The death count, too, has been frightening. A full one in six respondents (16%) has lost a family member to COVID-19. This tragic tally is consistent with the experience across MRNY’s broader membership. As of the time of drafting this report, 59 MRNY members, clients, and students have passed away due to COVID-19. The report includes some of their pictures below to honor them. (A full list is available online at memorial.maketheroadny.org.)

Meanwhile, less than half of community members report receiving the medical treatment they and their loved ones needed. These residents report facing multiple barriers when accessing care: primarily from a lack of health insurance, overcrowded neighborhood hospitals and health clinics, and a lack of translation and other language services. On top of that, the physical and economic stress of the crisis are taking a severe toll on the community: close to two-thirds of those surveyed report that they or someone in their family have suffered from anxiety or depression during this time – and nearly half did not know where to go for help.

58% of respondents report that they or a family member have gotten sick since March 1,

60% of those have either confirmed or believe that it was COVID-19.

52% were not confident they had received the medical treatment they needed.

"Nos ha afectado mentalmente y emocionalmente, especialmente a mi por que yo estaba en terapia por depresión. Ahora las terapias son por teléfono, pero no es lo mismo y he tenido que lidiar con crisis de depresión fuerte."

"It has affected us mentally and emotionally, especially me because I was in therapy for depression. Now the therapy is over the phone, but it is not the same and I have had to deal with a crisis of severe depression."
“Nos está impactando económicamente, anímicamente—hay tristeza, preocupación, miedo y angustia entre mis hijos por el hecho de que nosotros, sus padres, podamos morir. A nosotros como padres nos preocupa la inseguridad económica y no saber cuándo vamos a regresar al trabajo.”

“It is impacting us financially, emotionally—there is sadness, worry, fear and anguish among my children because of the fact that we, their parents, could die. We as parents are concerned about financial insecurity and not knowing when we will return to work.

“Pues, en caso de mi familia esta muy asustada, por que nos toco en carne propia la pérdida de mi hermano que falleció debido al coronavirus y todos en el mundo estamos con miedo por esta pandemia que nos ha tocado vivir aislados, sin trabajo y sin dinero y con mucho miedo.”

“Well, in the case of my family, we are very scared, because we had the loss of my brother who died from the coronavirus. And everyone is scared by this pandemic that we have had to live in isolation, without work, without money and with great fear.”

**CHALLENGES ACCESSING HEALTHCARE**

![Graph showing percentages of uninsured, overcrowded hospital, language barrier, perceived discrimination, and physical disability.]

- **64%** Uninsured
- **52%** Overcrowded Hospital
- **33%** Language Barrier
- **9%** Perceived Discrimination
- **3%** Physical Disability

*Rates of uninsured residents in hard-hit NYC neighborhoods:*

- Corona/Elmhurst: 25%
- Bushwick: 18%
- NYC: 12%

44% of NYC survey respondents are NOT paid when they are on sick leave, compared to 30% of NYC workers.

**MENTAL HEALTH AND ANXIETY**

- **58%** of those surveyed report that they or someone in their family have suffered anxiety or depression;
- **46%** did not know where to go for help.

Of the five respondents with loved ones detained or incarcerated, all of them expressed concern for the health of that person and three reported having trouble contacting their loved ones since the crisis began.
HOMENAJE A LXS CAMINANTES
MEMORIAL TO THOSE WHO WALKED WITH US*

*some of whom are pictured here
FINDINGS:

INCOME & JOB LOSS

The crisis has been economically catastrophic for immigrants and Black and Brown New Yorkers. Nearly every single survey respondent has either lost their job or is part of a household where a primary breadwinner has lost their job. In many cases, all income earners in the household are now without work.

Without income to feed their families and pay their bills, survey respondents are faced with limited options for support. Almost none (just 5%) have received unemployment insurance, and two-thirds believe that they do not qualify for government assistance.

 Immigrants make up a disproportionate number of New York’s essential workers – risking their health and that of their families to care for all of us. Of those respondents still working, a full one-third do not believe that their employer is adequately protecting workers.

“I’m worried because my dad lost his job and my mom is the only one working. She’s working at a laundromat. She’s risking her health to work, and I’m scared my parents will get sick because they also are undocumented.”

84% of respondents were out of work at the time of the survey.

88% report losing their job due to the pandemic.

Of those still working, 45% are working fewer hours and 34% report that their employer is not doing enough to protect workers.

WHERE RESPONDENTS WORK

21% Domestic work

21% Restaurant

14% Construction

8% Retail

2% Warehouse

23% Other

4% Healthcare

4% Sex work

1% Landscaping

2% Factory

*Federal law excludes workers without work authorization from receiving unemployment insurance (UI) or pandemic unemployment assistance (PUA), regardless of how much they may have paid into the insurance system.
Nationally, one study indicates that Latinxs are **TWICE AS LIKELY** as whites to have been laid off or furloughed during the crisis.17

"I have been very worried because I have 3 children to support. I don't know if I will have a job and my family depends on me."

"Estoy muy preocupado porque voy a tener una hija y no tengo trabajo—ni dinero para pagar los gastos en este país ni mandar a mi familia en México."

"I am very concerned that I am going to have a daughter and I have no job — no money to pay for expenses in this country or to send my family to Mexico."

"Me he sentido muy preocupado porque tengo tres niños que mantener. No sé si voy a tener trabajo y mi familia depende de mi."

"I have been very worried because I have 3 children to support. I don't know if I will have a job and my family depends on me."

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**NYC HOUSEHOLD JOB LOSS BY RACE/ETHNICITY**18 as of April 19, 2020

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latinx</td>
<td>44%</td>
</tr>
<tr>
<td>Asian</td>
<td>40%</td>
</tr>
<tr>
<td>Black</td>
<td>35%</td>
</tr>
<tr>
<td>Multiple/Other</td>
<td>36%</td>
</tr>
<tr>
<td>White</td>
<td>32%</td>
</tr>
</tbody>
</table>

**NEW YORK’S IMMIGRANT WORKFORCE**19

<table>
<thead>
<tr>
<th>Location</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>of New York State overall workers</td>
<td>28%</td>
</tr>
<tr>
<td>of New York State essential workers</td>
<td>33%</td>
</tr>
<tr>
<td>of New York City essential workers</td>
<td>54%</td>
</tr>
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</table>
FINDINGS: HOUSING

Housing inequities in the neighborhoods that survey respondents call home existed long before the coronavirus came to New York. Sheltering in place has shone a bright light on the challenges – from outsized rents to overcrowding to shoddy construction – and, especially when it comes to housing costs, has exacerbated them. Over half of survey respondents were not able to pay April’s rent and almost all were worried about being able to pay their rent and bills in May. One out of six respondents have been harassed by their landlords since the crisis began.

On top of that, quarantining in cramped apartments, where proper social distancing is impossible to maintain, poses significant health risks to community members, makes remote learning for students very difficult, can lead to tension, and, at its most extreme, domestic violence.

Finally, while we did not specifically target this population for the survey, MRNY organizers have shared recent anecdotes of the struggles of community members who are homeless during this pandemic. Homeless New Yorkers have no way to shelter in place, and are particularly vulnerable to the pandemic. More than two dozen deaths of homeless people in New York City alone were recorded in the first month of the crisis.

<table>
<thead>
<tr>
<th>WORRIES ABOUT UPCOMING PAYMENTS</th>
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</thead>
<tbody>
<tr>
<td>Rent</td>
</tr>
<tr>
<td>Utilities</td>
</tr>
<tr>
<td>Food</td>
</tr>
<tr>
<td>Medicine</td>
</tr>
<tr>
<td>Debt</td>
</tr>
<tr>
<td>none of the above</td>
</tr>
</tbody>
</table>

63% of respondents are sheltering in place in overcrowded homes

58% in homes with unsafe conditions.
José* is an immigrant tenant in Elmhurst, Queens a Make the Road New York member who has lived in the country since 2004. José has diabetes and is thus at particularly serious risk of COVID-19. As the crisis began, he was in the hospital suffering from a diabetic coma. As the outbreak worsened, especially in his neighborhood in Queens, his doctor sent him home as soon as she could to prevent exposure to the virus, though a test later showed he had antibodies for it (meaning he had contracted it at some point). José earns his living in construction and interior decorating. Since the crisis began, he has not had any work. As a result, he hasn’t been able to pay rent. Last week, José got a letter from his landlord demanding the rent. But without income, José doesn’t know how he will manage. He explained, “So many of us are without work, without any way to earn money. I’m alone, and it’s hard for me. And many more are supporting their children. The Governor needs to take action to help tenants and cancel rent.”

*José preferred not to share his last name because of his immigration status.
SPOTLIGHT: SUBURBS

Much attention has been focused on New York City with the highest number by far of infections and deaths in the state. That said, Black, Brown and immigrant communities in the surrounding suburbs are also suffering from COVID and related economic distress. Nassau and Suffolk counties in Long Island are second and third after New York City with the highest infection rates. Westchester county is fourth in the number of cases per 100,000 people, and third in the state in the number of deaths.

All three counties are home to large Latinx and immigrant populations. The maps show a prevalence of COVID cases in census tracts that have high concentrations of low-income people of color. According to Newsday, Latinx communities in Suffolk and Nassau counties “are among the Island’s hardest hit based on the prevalence of infections, the speed at which the number of cases has risen or their gross numbers of cases.”25 As in New York City, many Latinx and immigrant community members are essential workers and cannot afford the luxury of working from home.

My mom has respiratory problems from cleaning houses. We fear going out freely, we fear the virus, we fear coughing and sneezing in public and getting bad looks.

OF SUBURBAN SURVEY RESPONDENTS:

- 88% of those that have lost their jobs have NOT received unemployment insurance
- 97% of those that have lost their jobs have NOT received unemployment insurance
- 44% could NOT pay rent in April
- 85% are worried about paying the rent in May
Losing my sister who lives in Nigeria to this virus. We are trying to cope with it.

My dad owns a construction business, and my family is employed by that business. We are all scared about our workers being exposed to COVID-19.

Economically we are very unstable, and we are scared about what the future holds for us.

**SUBURBAN VULNERABILITIES**

Vulnerability Index

- Low
- High

Vulnerability Index is defined as areas with high:
- POC Population
- Density of Low income

Survey Responses

- Low: 1-5
- High: 6-10
- Very High: 11-15

**LONG ISLAND**

**LATINX POPULATION**

- Nassau: 17%
- Suffolk: 20%
- Westchester: 25%
- NYS: 19.2%

**COVID CASES / 100,000 PEOPLE**

- Nassau: 2,771
- Suffolk: 2,412
- Westchester: 3,170
- NYS: 1,733

**COVID DEATHS / 100,000 PEOPLE**

- Nassau: 172
- Suffolk: 107
- Westchester: 135
- NYS: 111
FINDINGS:
EDUCATION

The lives of New York students were turned upside down with the closing of schools on March 16th. Overnight, young people shifted to a new, untested reality of remote learning and sheltering in place. As schools scrambled to train teachers and set up students with the necessary tools to learn from home, parents and students in low-income and immigrant communities had to grapple with radically constrained resources, including food and medicine, family responsibilities including child and elder care, less than ideal learning conditions, fear for themselves and their families, and isolation. Parents are struggling to help their children get through their remote learning plans, while juggling work and other responsibilities. Almost all of the young people who responded to our survey talked about the toll the crisis is taking on their mental health.

As students are struggling mightily with threats to their families' well-being, remote learning is leaving many behind. Most respondents, parents, college and younger students alike, report facing multiple barriers to remote learning – everything from limited or no internet access, a lack of translation or other language services and limited school support. Only one-third of survey respondents rate their remote education experience as excellent or good, with close to a quarter rating their experience as poor or very poor.

"It’s been a great challenge for the family especially for my kids...online class is difficult and the teachers don’t speak Spanish so it’s difficult to communicate. It’s been really frustrating. I used to pick up food for my kids at the school, but the lines have grown too long and I can’t stand outside for too long. It’s very cold."

"We don’t have enough supplies. We have three children and we only have one computer that does not work well. One of my children wears glasses but the optic store is closed and she can’t see and do her work."
MARIUXI LALA is an 18 year old resident of Central Islip on Long Island, a student at Central Islip High School. Mariuxi is the daughter of Honduran immigrants and a youth member of Make the Road New York. The COVID-19 crisis has significantly reduced the family’s income. Her father owns and operates a construction business and earns most of the household’s income. Due to COVID-19, his customers have cancelled large upcoming jobs. His hours and days have been cut short, resulting in substantially less income. Mariuxi’s cousin, who lives with the family, has also lost income during this period. Thus far, the family has received no financial assistance during the crisis.

The family is especially worried because Mariuxi’s aunt and uncle were recently detained by Immigration and Customs Enforcement (ICE) and held in cages. Her uncle remains in detention. With regular reports of COVID-19 spreading in immigrant detention facilities, Mariuxi and her family are extremely worried about her uncle’s health. And despite their best attempts to maintain communication, they have found it very difficult to communicate with him to make sure he is okay. Reflecting on the situation facing families like hers, with detained or incarcerated loved ones, Mariuxi says, “we need to depopulate jails, prisons, and detention centers. The Governor must take action to free them all, and begin immediately to release those who are most vulnerable to COVID-19 from these jails, prisons, and ICE detention centers. As this pandemic rages, we need a halt to ICE activity across New York State, so more people don’t end up in these deadly cages.”
SPOTLIGHT: IMPACT ON YOUTH

While young people have not contracted COVID-19 in large numbers, the crisis is having a profound effect on their wellbeing. The socio-economic impacts and the mitigation measures – closing schools – will continue to impact young people now and long into the future. The harmful effects of this pandemic will not be distributed equally, and immigrant youth and young people of color who are already vulnerable due to economic and/or immigration status will be among the hardest hit.28

One third of survey respondents are young adults (age 24 and under) who have had to balance the challenges of remote education with additional responsibilities caring for family on top of the stress of constrained resources – from food to medicine to rent – and deep concern about those family members that are still working contracting COVID-19.

With the coronavirus, my little siblings have been struggling with the remote learning and because my parents and I work, it’s hard to take care of them.

COVID-19 has financially and emotionally impacted us. Now I have to become the head of the house since my parents are undocumented and it will be hard for them to look for a job.
It’s been hard! My brother and I are in college and my younger brother and cousin are in high school and elementary school. It’s very stressful. All of us are at home so it’s packed and it’s hard to concentrate. A sleep schedule has been hard to maintain. Dad and Grandma tested positive for COVID-19 and there are people in the house that are not obeying the social distance norms. Mental health issues as a student have been hard for me to deal with and getting help has been difficult because it’s not something I’ve navigated before.

For me, my anxiety has gone up since this pandemic has started. I finally got used to adjusting to college and now I am not able to leave my house. So what can I do?

The pandemic has affected my education because in my house there are a lot of people and it’s hard to study. I’m worried about my grades and now that my parents have lost their jobs I’m extremely stressed.
We saw it after Hurricane Sandy and we are seeing it again now during the COVID crisis: community-based organizations (CBOs) stepping up when government does not, supporting families, workers, vulnerable populations, and whole neighborhoods—both in the face and in the wake of disaster. CBOs play a vital role in the neighborhood ecosystem — providing essential services, building local power and unmistakably holding our communities together. During this unprecedented crisis, CBOs are raising funds for laid-off workers, effectively disseminating life-saving information, delivering food to seniors, supporting students, and advocating for system-wide change.

Very few survey respondents (only 15 percent) report receiving any government assistance during the crisis. Among respondents, MRNY and other community groups were by far the most frequent sources of financial support (67 percent).

In addition, community members reflected on the importance of non-financial support, such as adult literacy classes. Many adult respondents reflected on the importance of these classes, which MRNY and other community organizations statewide continue to offer remotely, to their continued learning, mental health, and ability to communicate with teachers now conducting remote learning with their children.

"Es el miedo de morir en el hospital por eso no fuimos a chequarnos. Todos nos quedamos en casa y nomás una persona sale a recoger comida caliente y mi hermana que todavía va a la secundaria va recoger comida en la escuela. Gracias a dios que hemos recibido una dispensa de Se Hace Camino Nueva York y una amiga familiar, como sigue trabajando, nos pasó a dejar comida adonde trabaja."

"It’s the fear of dying in the hospital, that’s why we didn’t go get checked. We all stay home and just one person goes out to pick up hot food. And my sister who is still in high school is going to pick up food at school. Thank God we’ve received support from Make the Road New York and a family friend — since she’s still working, she was able to drop us off food."

"Es momento de entender las necesidades de la comunidad inmigrante indocumentada porque nosotros somos seres humanos y trabajamos en este país y pagamos impuestos."

"It is time to understand the needs of the undocumented immigrant community, because we are human beings and we work in this country and pay taxes."
"Gracias a las clases de inglés, me comunique mejor con las maestras de mis hijos. Me ha ayudado mucho en estos momentos el platicar con la maestra y obtener información sobre el virus."

"Thanks to the English classes, I communicate better with my children's teachers. Talking with the teacher and getting information about the virus has helped me a lot right now."

SURVEY RESPONDENTS' INFORMATION SOURCES

<table>
<thead>
<tr>
<th>Information Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>TV/Radio</td>
<td>83%</td>
</tr>
<tr>
<td>Non-profit</td>
<td>65%</td>
</tr>
<tr>
<td>Online</td>
<td>59%</td>
</tr>
<tr>
<td>Friends/Neighbors</td>
<td>24%</td>
</tr>
<tr>
<td>Children's School</td>
<td>17%</td>
</tr>
<tr>
<td>Newspaper</td>
<td>16%</td>
</tr>
<tr>
<td>Church/Synagogue/Mosque</td>
<td>7%</td>
</tr>
<tr>
<td>Doctor/Hospital</td>
<td>7%</td>
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</tbody>
</table>

WHERE SURVEY RESPONDENTS ARE GETTING SUPPORT*

- Non-profit: 67%
- Family: 7%
- Faith-based group: 8%
- Government: 15%

*Mutual Aid Groups*

- **Brooklyn - 41**
- **Queens - 17**
- **Manhattan - 23**
- **Citywide - 38**
- **Staten Island - 2**
RINA CUMMING is a single mother of two children who emigrated to the US from Liberia in 1997. Rina, a Make the Road New York member, works at an Amazon warehouse on Staten Island, where she covers a 12-hour overnight shift from Thursday to Sunday. During the COVID-19 crisis, Amazon has seen its business surge, and the pressure on workers has been more intense than usual, at the same time workers are extremely worried about getting sick.

Even before the crisis, work in the warehouse was grueling. Rina's joints would throb in pain in the middle of her shift. Her fingertips at times become numb. And she developed digestive problems since her time at Amazon because she has to shove food down her throat, and then run back to her station. She explains, “A robot will write me up if I am late to my station. They don’t care whether I was able to have my lunch or not. They don’t care if I faint or fall at my station - they are just counting my rate. We are humans, not machines.”

In the first few weeks after COVID-19 came to NYC, the warehouse operated as usual. People started getting sick, and workers knew it, but Amazon wasn't giving them information. The company said they sent people who were confirmed to have had contact with the virus home with pay, but most people who were sick were not able to get tested. Meanwhile, Rina and her colleagues kept working, standing next to each other on the floor of the sorting department, in the break room, and on the crowded buses taking us to the warehouse.

Rina has been temporarily out on medical leave, but she worries about catching COVID-19 when she returns to work. The company has now staggered workers' shifts, but there is no real social distancing in the warehouse. Workers get gloves and masks, but have to keep wearing them over and over again because the supply is limited. When she gets home from work, Rina jumps in the shower right away, even before hugging her kids, because she doesn't want to spread the virus.

Rina wants the public to know that Amazon workers are demanding more protections. “Amazon warehouse workers throughout the country are standing up for their rights,” she explains. “We don’t have job security. Our bodies are being destroyed by these jobs, and now we are at risk of getting the virus every day when we go to work.”
CONCLUSION

This report lays bare the overwhelming damage that the COVID-19 pandemic has wrought on working-class immigrant, Black, and Brown communities. Survey data and the lived experience of community members reveal extraordinarily high rates of illness, death, and economic devastation. Community members—healthcare workers, food delivery workers, janitorial and maintenance staff, warehouse workers, cab drivers, construction workers, and more—are not only worried about protecting themselves and their loved ones from the virus, but are also worried about being able to pay for food, rent, and other essential utilities.

Meanwhile, most of these New Yorkers have been largely excluded from the government’s recovery funding. At the federal level, the Trump administration and Congressional Republicans willfully excluded undocumented immigrants from cash assistance and expanded unemployment assistance in the CARES Act, and failed to take any significant action for renters. At the state level, Governor Cuomo has not taken meaningful action to support excluded workers or renters. And all levels of government have failed to act swiftly to free at-risk detained and incarcerated community members who are currently sitting in deadly cages.

Community members are hungry because they have no money to buy food. They are worried about being displaced because they cannot pay their rent. Beyond renters, 92,000 New Yorkers today are homeless – living shoulder to shoulder in shelters or sleeping on our streets. Meanwhile, thousands sit in cages in jails, prisons, and immigrant detention centers like Rikers Island, which has recorded the highest infection rate in the country.

**Urgent action is needed to ensure a true recovery for all in New York.**

We must continue to push Congress to advance a federal recovery package that prioritizes working-class people over big corporations and includes everyone regardless of immigration status. At the same time, we must demand that New York Governor Andrew Cuomo, as well as local government leaders, take immediate action to protect immigrants and Black and Brown New Yorkers who are most likely to be working essential jobs or to have been left unemployed by this crisis.

We propose a bold action plan to confront the legitimate threat of our economic, housing, and health care systems collapsing and ensure a recovery for all. This list of policies is not exhaustive, but would provide urgently needed relief and support to immigrant, Black and Brown communities across New York.
PROVIDE IMMEDIATE RELIEF TO IMMIGRANT WORKERS EXCLUDED FROM THE CARES ACT

**Federal:** Amend the unemployment insurance and the Pandemic Unemployment Assistance (PUA) in the CARES Act to include all workers, regardless of immigration status or work authorization.

Renew cash assistance at a level of $2,000 per month, recurring for the remainder of the crisis, and remove the exclusion of ITIN-filers and some mixed status families.

Enact the Paycheck Guarantee Act, proposed by Rep. Pramila Jayapal, which would create a simple system to guarantee paychecks, stop mass layoffs, keep businesses stable until they can safely reopen, and facilitate a speedy recovery.

**State:** Create a $3.5 billion Excluded Workers emergency fund, already proposed by State Senator Jessica Ramos and Assembly Member Carmen de la Rosa, to provide emergency income replacement for workers excluded from Unemployment and similar programs, and immigrants who have lost the family breadwinner to COVID. Begin immediate distribution of weekly or monthly benefits pegged to the amount that a typical low wage worker is eligible to receive now in Unemployment Insurance or PUA - approximately $750 per week.

**Federal and State:** Tax billionaires and mega-corporations like Amazon that are profiting extensively at this moment, in order to resource supports for epicenter communities and halt additional consolidation of monopoly power as main street is shuttered.

**City / local:** Create supplemental Excluded Workers emergency funds to provide emergency income replacement for workers excluded from Unemployment and similar programs and immigrants who have lost the family breadwinner to COVID. Begin immediate distribution of recurrent benefits, utilizing the new Municipal Liquidity Facility at the Federal Reserve to enable cash distribution in the immediate term.

**Federal, State, and City/local:** Adopt an Essential Worker Bill of Rights to protect essential workers - including protection against termination except for good cause to shield whistleblowers from retaliation; mandatory worker-elected health & safety committees to support independent monitors in ensuring safe practices at workplaces with an impact on public health; premium pay for workers employed by wealthy mega-corporations; emergency health & safety standards; and fully-paid time off for workers who test positive, are seeking medical care for COVID-like symptoms, or who are caretakers of children whose school or care arrangements have been disrupted because of COVID.
CANCEL RENT AND SUSPEND MORTGAGE PAYMENTS

**Federal:** Create a payment moratorium, retroactive to cover April 2020 payments, for all rent and primary residence mortgage payments for the duration of the current national emergency declaration. The moratorium must constitute full payment forgiveness, with no accumulation of debt for renters or homeowners. The federal government must provide relief funds to landlords and lenders, allowing them to recoup their losses, if they agree to fair renting and lending practices for five years. The federal government should create an optional fund to fully finance the purchase of private rental properties by non-profits, public housing authorities, or municipalities.

**State:** New York must extend eviction moratorium for the duration of the emergency plus two extra months after the emergency. The state must also cancel rent for all those impacted by COVID who have lost income, including undocumented households. Finally, the state must disallow all forms of rent hikes during this crisis and provide all tenants the right to renew their leases.

**City/local:** The New York City Rent Guidelines Board should adopt a rent freeze. Additionally, every homeless person in a congregate “dorm-style” shelter and those living on the street must be offered a single hotel room with a private bathroom. Law enforcement must be removed from all homeless outreach, and “street sweeps,” diversion programs, and abusive police targeting of homeless New Yorkers must end.

DEPOPULATE JAILS AND PRISONS

**Federal:** The federal government must dramatically reduce the number of detained people in federal jails and prisons, as well as in immigration detention facilities, and provide states and localities incentives to do the same. The federal government must also provide adequate funding for people released from incarceration to support their needs including transportation, housing, and access to healthcare, food and necessities.
**State:** The state should immediately release all aging and vulnerable people in jails, prisons, and detention centers. The state should also prohibit the use of electronic monitoring or home confinement and rescind all civil and criminal fines related to social distancing.

**City:** To stop fueling mass incarceration that’s even more deadly during this crisis, New York City and other localities should place an immediate moratorium on all police enforcement of low-level and “quality of life” offenses (aka broken windows policing), all unnecessary summons and arrests for non-broken windows offenses, fare evasion, low-level drug enforcement, “crackdowns” on informal economies, and NYPD homeless sweeps. The police should also be removed from homeless outreach and social distancing enforcement.

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**HEALTH CARE**

**Federal:** Pass the Health Care Emergency Guarantee Act, which would empower the government to leverage the existing efficiency of Medicare’s payment infrastructure to ensure COVID-19 relief funding goes directly to patient care, without changing families’ insurance coverage or touching the Medicare trust fund. Under the bill, the federal government would pay all of the costs of treatment for the uninsured, and all of the out-of-pocket costs for those with public or private insurance, for as long as this pandemic continues. No one in America who is sick, regardless of income or immigration status, should be afraid to seek the medical treatment they need during this national crisis. Congress must ultimately pass a full Medicare for All bill.

**State:** Ensure immigrant healthcare access, as proposed by State Senator Rivera and Assemblymember Gottfried, by allocating $532 million to create a state-funded Essential Plan for all New Yorkers with income up to 200% of the federal poverty level, regardless of their immigration status. This will include New Yorkers who are currently excluded from health insurance because of their immigration status and those who may lose their insurance if they lose Temporary Protected Status. At the same time, New York should move towards a comprehensive solution, such as the New York Health Act to improve the affordability of health coverage.
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CREDITS

Thank you to all the survey respondents who are on the front lines of this crisis and took the time to share their experiences with us.

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