



## People of a Pandemic

MULTIMEDIA AND  
ARTWORK

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### ABSTRACT

People with marginalized identities were disproportionately affected by the COVID-19 pandemic. There was an increase in overdose-related mortality and an overall higher mortality rate among racial minorities. The pandemic also led to increased isolation among older adults, which has been linked to negative health outcomes. These issues were exacerbated in rural Appalachia when combined with existing health and socioeconomic disparities.

In Spring 2021, interviews were conducted with older adults, Hispanic individuals, African American individuals, and people who use drugs in Virginia's New River Valley, with the goal of understanding how the pandemic impacted these populations. Sixteen of those stories are presented here. A thematic analysis revealed major themes: 1) financial (in) security and unemployment, 2) access to resources, 3) internet and technology, 4) public health policies, 5) mental health and isolation, and 6) resilience.

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During the early days of the COVID-19 pandemic, misinformation and mistrust were rampant. Discussions surrounding the efficacy of masks, vaccination ethics, and health effects of the virus were plentiful yet tinged with fear and frustration on all sides (Caceres et al. 2022, 272). As quarantines were put in place and daily activities changed, so did the dynamics of social relationships, including social networks and support (Long et al. 2022, 129). The pandemic separated people and their loved ones, both through an intangible feeling of disconnection and physical separation imposed by distancing guidelines.

While nobody was spared from the consequences of the pandemic, people with marginalized identities were disproportionately affected by the virus and the resulting changes to their communities. In 2020, racial minorities experienced a higher COVID-19 mortality rate due to a variety of factors including occupational exposure, housing risk factors, pre-existing health conditions, access to healthcare, and structural racism (Rossen et al. 2021, 68). Rural counties across the U.S. with larger Black and Hispanic populations, specifically, were found to have a higher COVID-19-related mortality rate than rural counties with primarily White residents (Cheng et al. 2020, 603). In addition, the Centers for Disease Control and Prevention reported that both COVID-19-related cases and deaths were exponentially higher amongst older adults compared to the general population throughout the pandemic (CDC 2023).

Negative repercussions of the pandemic did not always stem from direct transmission. The COVID-19 pandemic amplified the impact of existing social and health disparities within marginalized populations. Among rural Illinois residents who used drugs, for instance, there was an increase in the risk of drug overdose as well as other dangerous behaviors, such as using drugs alone and buying from less familiar sources (Bolinski et al. 2022, 6). One study found that approximately one-fifth of Black and Hispanic participants reported experiencing discrimination due to their ethnicity during the COVID-19 pandemic in 2020 (Su et al. 2022, 555). The pandemic also led to an increase in isolation for older adults, which has been linked to negative health outcomes (Wu 2020, 2). Lack of health access, food insecurity, and unemployment are issues that are prevalent in rural communities and may potentially magnify the effects of the pandemic on these groups (Mueller et al. 2021, 5).

Despite the challenges of misinformation, lack of access to services, discrimination, and isolation faced by marginalized groups, people within these populations still found strength through their communities. People of color, especially Black individuals, demonstrated high levels of resilience and adaptation in response to the stressful conditions brought on by the pandemic (Dush et al. 2022, 126). Research has pointed to the importance of social support during unprecedented times (Li et al. 2021, 8).

In this paper, we share stories from members of the New River Valley (NRV) community with marginalized identities. The main goal of the project was to deepen understanding of the needs of these individuals and how the pandemic affected their lives; specifically, understanding their health disparities and barriers to resources. These stories were collected in an effort to elevate often untold and unheard stories.

In addition to this academic publication, the complete collection of stories from this project, along with pictures provided by participants, will be shared with the New River Health District, the Town of Blacksburg, and beyond through an online booklet that will be published to share the stories with a wider, practice-based audience. The narratives will help community stakeholders, decision makers, and lay audiences in the New River Valley appreciate the struggles experienced by people with marginalized identities during the COVID-19 pandemic. By sharing these stories, we hope to inform and facilitate access to care for future health crises. Ultimately, these stories could play a role in impacting the efficacy of local and state policies by improving health outcomes for individuals with marginalized identities.

## METHODS

In the Spring of 2021, students in the Virginia Tech Masters of Public Health program set out to document the impact of the COVID-19 pandemic on those living with marginalized identities

in Virginia’s NRV. The students called their project “People of a Pandemic.” They conducted interviews<sup>1</sup> with African American individuals (n = 9), Hispanic individuals (n = 12), people who use drugs (PWUD) (n = 11), and older adults (n = 12). Research team members recruited participants through local NRV organizations and community networks through phone calls, distribution of digital and paper flyers, emails sent to various NRV listservs, and posts to NRV organization pages and community groups on Facebook. In order to reach those who did not have access to phone and internet, on-site recruitment occurred by visiting local organizations and locations.

Interested participants were instructed to contact a team member by phone or email to discuss eligibility, the purpose of the study, and schedule a time to meet for the interview, if eligible. Eligibility requirements included being 18 years or older, living in the NRV, and identifying with one or more of the groups of focus (African American, Hispanic, PWUD, and/or older adults). Interviews lasted an average of 45 minutes and were conducted in-person, on the phone, or over Zoom, and all participants chose a pseudonym to share their stories publicly. Some participants submitted a picture to accompany their narrative. All contributors received a \$25 gift card for their time. The research team acknowledges that self-selection bias may have influenced who participated in the study. The intent of collecting interviews was for thematic review and not statistical analysis.

In the Spring of 2023, a new group of students set out to finish the project. Students listened to the interview recordings, transcribed the interviews, and used these transcriptions to write narratives, focusing on stories of transition, resilience, and hope that emerged from the interviews. The research team chose to craft narratives from the transcripts to emphasize key highlights about people’s experiences, helping to distill the context (Nasheeda et. al. 2019, 4). However, one limitation to this approach is that only a portion of each person’s story could be told; some material from the full transcript was not included.

Each student crafted two narratives and edited two other narratives, one student ensured everything was consistent by reading through the whole manuscript and providing edits, checking tense, etc., one student wrote the introduction and conclusion, and two students wrote the thematic synthesis. Another limitation to this approach is that there may be some inconsistencies in the way each story is told because the stories were written by multiple authors. The research team aimed to minimize these inconsistencies by having one person review and edit the entire manuscript as described above.

Demographics were collected for the sixteen participants and are compared with demographics for the NRV in Table 1 (Onward NRV 2022).

	PARTICIPANTS	NEW RIVER VALLEY
<b>Median Age</b>	59.5	38.3
<b>Biological Sex</b>		
Female	9 (56%)	91,775 (50.5%)
Male	7 (44%)	93,620 (49.5%)
<b>Race</b>		
White	7 (44%)	159,356 (86%)
African American	5 (31%)	8,272 (4.5%)
Hispanic	4 (25%)	6,206 (3.3%)
<b>Household Income</b>		Median Income for NRV: \$50,836
\$0 – \$10,000	5 (31%)	–
\$10,000 – \$25,000	3 (19%)	–
\$25,000 – \$50,000	4 (25%)	–
\$50,000 – \$100,000	1 (6%)	–
\$100,000 – \$250,000	2 (13%)	–
Missing	1 (6%)	–

(Contd.)

1 A list of interview questions used for all participants is provided in Appendix A.

	PARTICIPANTS	NEW RIVER VALLEY
<b>Highest Level of Education Completed</b>		
No High School Diploma	1 (6%)	9,375 (5.1%)
High School Graduate	3 (19%)	33,300 (18%)
Bachelor's Degree	5 (31%)	20,631 (11.1%)
Bachelor's Degree and Higher	7 (44%)	40,638 (2.2%)

**Table 1** Participant Demographic Summary (n = 16).

## STORIES

A selection of the stories is included here and through them, the authors share experiences of loss, isolation, inequality, and discrimination; but these are also narratives of resilience and hope. Despite the increased risk of various adverse effects throughout the pandemic, the participants found the strength to adapt and persevere in a world that was already marginalizing them. Their stories are told to show how communities and individuals in the NRV transitioned and found hope in uncertain times.

We chose to organize the narratives by a single type of marginalized identity because although participants across the groups experienced the pandemic in some similar ways, ultimately, telling their stories by marginalized identity helped present the nuances among them. Several of the themes ran across marginalized identities, and most individuals had multiple themes represented in their narrative, making it hard to organize the stories by theme. We therefore decided to organize our stories by identity and then include a thematic analysis to show how the themes overlapped between groups.

## AFRICAN AMERICANS

### ALEX WILLIAMS, 35

During the pandemic, Alex, a full-time graduate student from Montgomery County, decided to postpone his graduate studies to address the demands from his job as IT support at a college within the NRV. He shared that he experienced “some frustration of not being able to complete [his] dissertation” as quickly as desired. He noted that because of having to deal with increases in workload at work, “the desire to sit and write anything in relation to my dissertation has dwindled immensely.” Alex postponed his graduate studies at the start of fall 2020 to earn money during the pandemic.

Alex had not worked remotely before the pandemic, but due to the demand of services for IT support during the pandemic, he worked an average of twelve hours a day. He was grateful his job was flexible in providing all the resources needed to adjust to working remotely (Figure 1):



**Figure 1** Alex's Everyday View Working in IT Support from Home.

“So as far as work community, that’s been pretty good...And as far as, like, resources or things I’ve needed to work from home. They’ve been very free and providing those to make sure that I can do my job as well as possible while not being onsite.” Although he liked the flexibility of working from home because he was able to run errands and do household chores, Alex had a hard time adjusting to working solely at home. “So, [if] anything, that has probably been the largest impact and probably the most negative one... that I’m just chained to a desk for long periods of time. Happy that I’m still employed, but still a little frustrated with being at a desk all the time.”

As he worked in IT support, Alex saw firsthand the struggles that both professors and students experienced during the pandemic. Alex noticed many students had major hindrances to virtual learning, such as inconsistent internet access. Alex stated that he had to advocate for students when speaking to professors about how they could better provide virtual instruction. “We did have to talk with some of the faculty [about] alternative means of providing instruction, a lot want to do, kinda like, a synchronous live session, which is great if you have a very strong and stable internet connection and equipment that can handle that. Though that may not be the case for everyone. [Students] might’ve been using computers inside of the library or other locations or even borrowed laptops. And once the campus and other things shut down, they no longer had access to those things.”

Alex plans on completing his graduate degree and hopes that some of the technological advances created during the pandemic will continue as students return to the classroom. “They’re definitely positives that can come out of this because it did accelerate the utilization of technology... However, it also kinda disenfranchised a whole bunch of people, too. So, trying to find a good balance between the two is what I’m hoping to see.”

## **ASHLEY, 29**

Ashley was a graduate student in her last semester studying psychology when the pandemic started, causing her to be unable to complete the clinical hours necessary to complete her degree. Unable to get all of her required clinical hours, Ashley could not apply to some of the internships she desired. She shared, “I had to be mindful of who [internship programs] was modifying those requirements because I wasn’t going to apply somewhere that I knew I wasn’t going to be picked. So that was really, really stressful, trying to keep up with that in addition to paying for the applications, which is not cheap. I spent a good 700 bucks total applying to places.” During that time, Ashley lost her assistantship and was struggling to find money to pay her bills. She shared that it was hard to find remote work because she did not want to compromise her health by possibly being exposed to COVID-19. “I was kinda in a bind and a couple of friends of mine encouraged me to [apply for] unemployment [benefits]. So, I did that last year to get by and through the summer and through the fall. I got lucky enough to teach a couple of classes last fall, so that helped. But yeah financially, it was awful. I don’t think that I would have made it without the unemployment last year.”

Ashley had a family member pass away from COVID-19 in April 2020, causing her to be vigilant about taking all the necessary precautions to keep herself safe. Ashley had a roommate, and found it difficult to share a space and follow social distancing guidelines. “I think adjusting the comfort levels was a little tricky because I didn’t want to, like, boss her around or feel like I was trying to control what she could do. But at the same time, I was also like, well, if either one of us gets COVID, we can’t go anywhere and neither one of us have family here.... but I think that was probably the only issue that we really had was figuring out comfort levels and also trying to give each other autonomy.”

Because Ashley was aware that many people, especially those who are Black and Hispanic, were being impacted by the COVID-19 virus, it was hard and frustrating for her to see people not following the mask mandate. “I think what was most hurtful and, like, painful for me emotionally was, like, knowing that there were so many people out there who just didn’t care about other people and so they were just continuing to go out... I think that really devastated me the most just because I knew that in terms of who would be the most affected by that, it would be Black and

Brown people and who's going to help them when they go to the hospitals and they go to seek care. We already know about the kind of gaps that exist in the health disparities."

## LUCY, 71

Lucy is a retired educator from Pulaski County. She is a wife, grandmother, and active member in her church ministry. Lucy is an integral part of her household, saying, "I do [the] majority of the work, I might add. I do the grocery shopping and the paying of the bills and the house care and housekeeping. Also taking care of the grandchild. I do it all." Lucy's grandson, Teagan, lived with her and her husband during this time.

In addition to these daily household duties, Lucy took on a new role during the pandemic: a teacher for her grandchild. Lucy retired from teaching and did not anticipate returning to the profession. But, as the pandemic forced schools to shut down and schooling to become virtual, Lucy's grandson stayed home from school for the year.

Lucy helped to teach her grandson through his online classes. "Grandmother is not an easy teacher," Lucy stated as she talked about the challenges she and her grandson faced in the new learning format. She continued by saying, "I expect him to pay attention and listen, and do the work and get it done quickly... he doesn't necessarily want to do that." Lucy said Teagan had good days and bad days of virtual learning, but he primarily wanted to see his friends and wished to go back to school.

As a mother and a former teacher, Lucy is no stranger to the many germs that come home from school, and how fast a virus can spread in a school. On this topic, Lucy shared one of the few upsides to the pandemic: "My grandchild has been healthier this year than he has in past years, being here at home. I've not had to take him to the doctor's office with all the constant nasal drips and etcetera that he would have." Lucy said she feels blessed that she and her family have remained fairly healthy.

On top of her already busy schedule, Lucy is the musician and chairperson of worship at her church. She sings and plays the piano. The church moved to a drive-in, distanced format during the pandemic to keep its members safe, but Lucy was grateful they are still able to have church (Figure 2). Her church held a ministry to distribute boxes of food to their members and to the community. This food program was ongoing through the pandemic, and was useful to Lucy and her family. Being involved in her church has been key to keeping Lucy grounded and contributed positively to her mental well-being during these unpredictable times.



**Figure 2** Lucy's Church Persevered Through the Pandemic by Holding Drive-In Services.

## MAXWELL, 33

Maxwell is a resident of Montgomery County and explained during his interview how the African American community and broader Christiansburg were impacted by the pandemic. "It is a loss of connectedness and community. Not being able to physically touch someone, and not being able to be present and just to sit across from someone. There's a lot lost. Missing that has impacted our ability to show up and care for one another. There's a lot lost." Maxwell works as a community organizer in his town and is father to a two-year-old son. As a leader in his community, Maxwell has a unique and insightful perspective on the effects of the COVID-19 pandemic.



It is clear that for Maxwell, community and connection are priorities in his life. Maxwell had moments during the pandemic when he felt isolated, scared, and alone. He had to reconcile with the fact that the pandemic required him to slow down. He opened up about his introspective journey saying, “I had a lot of time to sit quietly...and to go inward and become more contemplative. I feel like I’ve grown as an individual during the course of the pandemic through that intentionality and contemplation.”

In addition to his self-reflection, Maxwell opened up about starting therapy for the first time in the midst of the pandemic. “Speaking with a counselor was necessary for me... I needed some support in this, and I found that in therapy.” Although it was difficult to face at first, Maxwell found a silver lining of the COVID-19 pandemic was that he became more thoughtful about how he cares for himself.

Maxwell also touched on ways he made an effort to connect with his friends and community. He said the pandemic caused him to reconnect with an old friend, and their relationship “became much deeper and closer than we maybe ever have [had].” As a community organizer, Maxwell helped put together a Juneteenth celebration in Christiansburg during the pandemic. “We were able to do some outdoor, physically-distanced, masked, COVID-safe gatherings... still being able to physically gather and at least see each other from a distance is something we try to offer [the community] ... so it wasn’t all lost.” Maxwell said his innovative ways to connect with others, while remaining safe, were quirky and awkward at times, but they were key to preserving the feeling of community (Figure 3).



**Figure 3** Black Lives Matter Supporters in Maxwell’s Community Peacefully Protest Against Police Brutality.

Maxwell continues to reflect on what was learned from this pandemic and what can be done moving forward. He hopes we have a better approach to creating opportunities to relate to community members, and remember to think critically about the history and legacy of where we come from. Maxwell ended with, “hold on to the reflections and the lessons learned in the pandemic. Come out of this pandemic with a renewed sense of hopefulness... and thinking of how our systems can work better for all people.”

## HISPANIC<sup>2</sup>

### FLOR, 46

Flor, from Montgomery County, has two children in school and works hard to support her family financially. She currently has two jobs, including one at a restaurant. During the pandemic, she lost many hours of work because she got COVID-19 twice, her employers cut her hours, and one of her workplaces closed down. She is from Honduras; the only family she has in the U.S. are her children. She states that throughout the pandemic her life changed dramatically, not only financially, but also psychologically. “Psychologically, things were very bad. There have been many problems.” Flor has had no support from her extended family, community, or government throughout the pandemic, and cried many times about the possibility of passing away due to COVID-19 and leaving her kids without anyone, as they rely on her for everything.

If there were an emergency, Flor would not have enough money for a month’s rent, utilities, or large medical bills. She did not have health insurance during the pandemic, nor did she have insurance prior to the pandemic. She applied for Medicaid, and received cards in the mail, but doesn’t know what to do with them. When asked why she has not used resources from local churches, food banks, the federal government, or the Town of Blacksburg, she simply stated, “because I don’t know how.” She doesn’t know where to find these resources, and when she has tried to use them, individuals only speak in English. Because of the difficulty, she prefers to find solutions to her problems herself. She only reaches out for help when she has a true emergency. She would like someone who speaks Spanish and English to help her access resources.

Flor has struggled to help her children with their schoolwork, as all of their assignments are in English; she feels that throughout their life she has supported them very little, “almost nothing,” with school. Her children have struggled with the adjustments in school, and feared going to school and catching COVID-19, but Flor encouraged them. Flor works throughout the day so is unable to be at home with her children, which has led her to rely on her older son to help take care of his younger brother. Coupled with this, going to work has caused her a lot of anxiety. She often worries about getting COVID-19, or having COVID-19 and unknowingly giving it to others, and causing someone to die because she infected them. She took her precautions during the pandemic, and she wishes that people would respect the measures that the government put in place to decrease the spread of the virus. Due to the vaccine misinformation, Flor questioned whether to get the vaccine or not, and even considered not getting vaccinated. Flor’s family is religious and she confided in her mother about whether or not to get the vaccine. Her mother encouraged her by telling her that if she believed in God, and the vaccine was available, she needed to get vaccinated.

Flor financially supports her mother back in Honduras and provides for her children. She feels that many people are dependent on her and she often feels an immense amount of pressure. Flor came to the U.S. to have more opportunities, and to ultimately be able to support her mother. Flor grew up without a father and explains that her mother acted as both a mother and a father. Flor longs to return to Honduras and has many hopes for the future. “One of them is to see my children graduate, the other is to go back to my country, see my mother and family again. That God gives me life to see them again,” she shared tearfully. “I am sad because I am alone in this country, my mom is older now, my country ... I don’t even know what to say about my country anymore [...] I am proud to be from Honduras, but if we had the opportunity to just get *one* job, there would be no need to be here, without a family, in a place that we don’t know.”

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2 Quotes were translated from Spanish by the authors.



Lupita is a retired pediatric dentist living in Radford City. She moved in with her daughter, grandchildren, and son-in-law at the start of the pandemic. Lupita is incredibly thankful that she was able to be with her family at this time saying, “we consider that to be a blessing, to be together.” Lupita and her family did not personally experience many challenges throughout the pandemic, but witnessing her community go through COVID-19 has been distressing for her. “I am very sad for everything that is happening in the world that is very alarming. It is just too much.” Lupita’s husband passed away two years ago after a short battle with cancer. She describes this time as incredibly isolating but feels that the experience of losing her husband increased her resiliency and ability to adapt to various challenges in her life.

Lupita used the time at home during the pandemic to help with her grandchildren’s online schooling and daily needs. She also spent time gardening, cooking, painting, and has been working on learning French (Figure 4). She shares that her entire family was very cautious about COVID-19; she did not leave her house for six months. The church is important to Lupita; she is involved in her church community and longed to return to in-person church services once she got vaccinated.



**Figure 4** During the Pandemic, Lupita Used the Extra Time to Engage in Painting and Other Hobbies.

Besides living with her daughter, the rest of her family lives in Mexico. Lupita identifies as Hispanic and her first language is Spanish. She moved to the U.S. after finishing dental school in Mexico and had a very successful career in dentistry. Throughout her career as a dentist, she hosted a radio talk show in Spanish that focused on dental health; “so many people called in with questions that nobody answered them in their language and that’s rough.” Lupita wishes there were more COVID-19 resources that are in Spanish within the NRV. “I believe that you have to assimilate to the culture that you move to, with the plans to stay there. But at the same time, you need time, positive reinforcement, and you know, support.”

Lupita prides herself on being very careful with money and saving for retirement for a long time; therefore, she did not need additional support or resources throughout the pandemic. However, she is acutely aware that many members of the Hispanic community have not had this luxury. For Lupita, receiving an education has made a resoundingly positive impact on her life. She considers herself blessed to be in the situation she is in.

NM, from Montgomery County, is a wife, mother of two young children, and has a variety of roles in her community. She works as a beautician, as an interpreter for Spanish-speaking residents in the NRV, and as a bookkeeper for her husband's landscaping company. Through her work, NM has become a trusted resource in the Hispanic community, especially for those who are undocumented immigrants. While working in her beauty shop and doing interpretation, NM often hears the personal stories of her clients, their constant fears, if undocumented, that they will be caught and deported, their fears of not being able to afford medical care because many are uninsured, and their desires to reunite their families. She is moved by the struggles her community is experiencing, so she does all she can to help connect people with legal and medical resources, acquire food donations, enroll their children in schools, and find other resources to help them.

The pandemic was difficult for NM's family. Her beauty shop was closed for three months, and her husband was detained by U.S. Immigration & Customs Enforcement (ICE). When faced with financial troubles, NM applied for a mortgage and small business assistance, but was denied. Despite the economic difficulties of not being able to work, she shares that the pandemic allowed her to spend more time with her family and children. "I enjoyed my children like I had never done before. Before, there was never enough time for them. I was always working, and working."

During the pandemic, people donated items to help the community. However, lack of access to transportation became a big barrier to accessing donated items, getting tested for COVID-19, or obtaining the vaccine. "It doesn't matter how many places there are to get donations, without a car, they can't go. Everything is too far away." Fortunately, as a trusted community resource, NM was able to assist those without cars and helped deliver food donations to the Hispanic community.

As the pandemic worsened, NM noted that the Hispanic community suffered silently and disproportionately to the rest of the population. While the world was grateful to the healthcare workers who risked their lives to help those in need, few people acknowledged the undocumented workers who had no choice but to work, and without the protection others received. Many members of the Hispanic community, especially the undocumented, did not have that luxury, as NM pointed out: "Unlike Americans, many Latinos were unable to get unemployment because of their immigrant status since they do not have a social security number."

When the COVID-19 vaccine was made available, NM got vaccinated as soon as she was able to. Although she was hesitant at first, she wanted to be an example for her community, as many were scared to get vaccinated due to vaccine misinformation and their legal status in the country. She pointed out that she was a strong proponent in her community, encouraging others to get vaccinated. NM was grateful to see vaccine clinics being organized for the Hispanic community, as these clinics did not require people to provide identification. When arriving at these clinics, she felt at home. For the future, she hopes that undocumented immigrants will not be forgotten, as they not only contribute significantly to the quality of life in the U.S. but also in their home countries.

## ROBERTO, 53

Roberto, who lives in Montgomery County, holds two jobs, one at a restaurant and another cleaning office buildings. Even as offices and restaurants closed down, Roberto kept working through the pandemic. He is grateful to his manager at the restaurant who kept him and his colleagues on payroll to help with renovations, even though restaurants were closed due to COVID-19.

Roberto is from Mexico and has been living in the U.S. for 13 years. He left Mexico to be able to continue to support his family and send money home. His wife, children, mother, and siblings in Mexico rely greatly on his income and he feels a strong responsibility to provide for them. Roberto does not have extensive social support in the NRV and feels that people back home in Mexico do not understand how hard it is to be in the US. "If people knew what it is like to be paying [the bills], being alone and falling apart... here we are just like dogs." He does not go out and have drinks with people because of his fear of being caught drunk by the police, and also because of his long hours at work.

Roberto was unsure about whether or not COVID-19 is real. He heard different things. On the one hand, his wife told him that he doesn't know how hard COVID-19 has hit Mexico, as some of his acquaintances back home have died due to COVID-19. On the other hand, he has heard from some of his friends in the U.S. that the vaccine is "stupid." During the height of the pandemic, he was sick, felt very tired, lost 25 pounds, and his sense of smell. However, he never got tested because "I didn't want to bring myself to the idea that I had that [COVID-19]."

Roberto has not used any community services from the local, state, or federal government. When asked why, he indicated that "I have not reached the point where I really have a need, because if I needed to, I would go for it. But I prefer to leave [these resources] for people who really need them, and in that way, we help [the community]." Roberto said that he often worries and feels a lot of stress about what would happen if there was an emergency or if he were out of work for a period of time. He did not have enough money saved to make it through a month of missed work.

Roberto has thought about going back to Mexico but stayed in the U.S. as he hoped that the Obama Administration would help undocumented immigrants obtain their papers. He wanted to be able to leave the country and see his family. With great sadness, he said that it is incredibly difficult to be alone in a country that is not his and that he has missed many important family milestones. He shared: "I wish the President would realize how much we suffer as immigrants [...]. We know that from the moment we leave our country, we leave everything behind, we leave our children, our families. There have been moments when I have cried because we don't know if we are going to come back or not, see our families or not [...]. We miss out on everything, everything with our children, and the President does not realize how much one suffers here."

If Roberto had a chance to obtain his documents to remain in the U.S. legally, he wouldn't even know where to start. He only stayed in school up until 7th grade and does not speak English. He was aware that many people criticize Hispanics for not learning English and that he should not make excuses for not knowing the language, but he has been working 12 hours a day, 7 days a week, and feels exhausted after work. He indicated that "I would really, really like to speak English. I would really like to speak English because I feel that Americans feel that Hispanic people come here, take their jobs, and take advantage of them [...]. I would like to have a conversation with them so they don't think that we come to take advantage of them or take their jobs." At the close of the interview, Roberto indicated that his hope for the future is that he wishes that "we [Hispanic immigrants and Americans] were all united and helped each other out, that is the most important thing."

## PEOPLE WHO USE DRUGS<sup>3</sup>

### EH, 32

Even after someone is released from a correctional facility, the years following a sentence are filled with difficulties securing a job, worries about integrating back into the community, and losing the support of loved ones. For recovering substance users like EH, currently living in Montgomery County, the additional concern of relapsing threatens to overturn every attempt they make to rebuild their lives. The additional dangers of the pandemic threatened the quality and length of former offenders' lives, making them less likely to return to a normal existence and more vulnerable to dying from an overdose.

EH, who was arrested during the pandemic, remembers waiting over eight months after her arrest for a bed in a residential treatment facility – a process that normally would have only taken two months. Other jailed women were deferred for even longer, their court dates being continuously pushed back depending on the COVID-19 status at the jail. With the jail lacking a regulated intake process and ignoring vaccination guidelines, EH says many inmates were put at risk and were helpless.

Upon release from jail, EH was repeatedly met with well-intentioned programs that lacked either funding or resources to carry out their typical functions due to the pandemic. During her stay in

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<sup>3</sup> People at different stages of recovery were interviewed. Some individuals relapsed during the pandemic, some individuals did not, and others are still on the path to starting recovery.

residential treatment at New Life Recovery Center, “[t]hey always talked about how you, you know, we didn’t get to experience what New Life’s normally about and I guess it kind of sucked that they constantly remind us... what they used to do,” EH said, disappointed by the lack of attendance in virtual meetings and unable to have visitations with her family. “The last week I was in New Life, half the staff got Corona and so it was down to only two people... I didn’t really even have graduation. Everybody else got to have a graduation and got to sit in a group and I didn’t get to have that.”

Financial constraints were a significant stressor for EH. Although she found programs such as the Supplemental Nutrition Assistance Program (SNAP) and state unemployment benefits helpful, she recalls being able to only afford half a cart of groceries per month, even with these assistance programs. Her family, who suffered their own difficulties through the pandemic, was unable to offer her much assistance. Only within the last few years have individuals with prior criminal convictions been allowed to apply for Electronic Benefits Transfer (EBT) that enables SNAP spending at food retailers. Even with these temporary solutions, most recovering substance users strive to find jobs to earn their own paychecks and become financially independent.

Businesses are less likely to hire individuals with felony convictions, even for non-violent charges. In EH’s experience, most of the employers willing to hire previously-incarcerated people will not pay them as much as other employees. While in recovery homes, many individuals will obtain work through a temporary agency. Temporary agencies only guarantee a certain amount of time and money per contract, typically only a few weeks.

For unexplained reasons, EH only received one of the three stimulus checks. The stimulus check she did receive was used entirely to pay for child support. Despite the checks being intended to help those affected by the pandemic, neither EH nor her husband received much of this federal aid directly. In the future, EH hopes that more opportunities will be given to help recovering substance users get back on their feet, both inside and outside of correctional facilities.

## ELLA, 35

While most people were at home with their loved ones during the first 2020 lockdown, recovering substance user Ella was alone in Las Vegas. This was an unfamiliar city with no familiar faces for Ella. For days, the only company she had was that of her dog and the occasional law enforcement officer, whose words almost entirely consisted of warnings and threats. With her family in Russia, her children with her ex-husband, and no reliable transportation, Ella watched the beginning of the pandemic unfold around her and tried her best to keep herself safe.

Arriving in Virginia months later presented a new hope for Ella and her new husband. The pair traveled from Roanoke to Christiansburg, in Montgomery County, inspired by the biblical name of the town and hoping for respite. Unfortunately, Ella was left to fend for herself due to the arrest of her husband. In withdrawal from substances and feeling discouraged, she was finally afforded a hotel room funded by To Our House, a New River Community Action program. Ella walked a mile carrying heavy bags just to have a temporary roof over her head.

Ella relates much of her resiliency and fierce sense of independence to her Russian heritage. Even though she knows she can survive alone, Ella does not want to live like this. She wants to be near the people she loves and ensure that they are safe.

Although she is grateful for the help she received in this community, Ella has identified numerous faults in the system that contribute to families and couples being ripped apart. Females, she says, are more likely to receive assistance than males. Many men spend time in prison while their female partners are more easily able to access resources such as food, shelter, and clothing. “All the time, everywhere I went they cater to females better than they do men. And that’s fucked up because they’d rather lock the men up in the jails and squeeze every dollar out of them while they’re there because it’s all about the money,” Ella said, expressing her frustration. “But sometimes those women, some women, they are the ones that create problems... and the society blames the man.”

While some would consider the COVID-19 pandemic to be over, for Ella and others in the recovery community, the repercussions of the hardships and time spent isolated will be a part of their lives



forever. As Ella works and participates in programs to aid in her recovery journey, she relies on relationships she has built within her community to encourage her sobriety. Her husband, who remains incarcerated, keeps in contact through phone calls while in-person and virtual visiting hours are put on hold.

While in recovery, Ella hoped that she would be able to help other people who have been in her position. Describing how homeless people and substance users are often arrested for simply existing on the streets, Ella said, “the system itself is broken, messed up. It’s crooked...there have to be more options.”

## **JUSTIN MCMILLER, 35**

Justin McMiller, a resident of the City of Radford at the time of the interview, lived in Washington, D.C. at the start of the pandemic. A worker at a local market, he often had discussions with people about the Black Lives Matter (BLM) movement, the protests, and race in the U.S. He talked with people of all different backgrounds and identities as they entered the market.

Justin was surprised by the BLM protestors that he saw coming to his market. “I thought, okay, it’s just gonna be the Black [people talking about race] ... it was nice to see White people, Asian people, Latin people, mostly young people, which actually made me feel good. ‘Cause there were people of my generation... it was really powerful to see that strength.” The support Justin saw during the BLM movement had similarities to the support within the recovery community, a critical part of persevering through adversity and building strength. Justin found support from his recovery community at Oxford House during weekly meetings and interacting with other residents.

After his relapse in the summer of 2020, Justin had to leave the D.C. Oxford house, at which point he found it “very hard to get into a program.” Eventually, he got into a few different programs, including some residential programs that brought him to Southwest Virginia. The pandemic removed the emotional fence to entering residential treatment for Justin because, “there was nothing to miss out on” during the pandemic due to mandatory lockdowns, isolation, and unemployment. Through his relapse and recovery process, Justin saw who was “in his corner.” He found support and a lack of judgment from friends in the recovery program and his sponsor. One of his friends connected him to a recovery house in the New River Valley.

Even with the benefit of getting into a residential treatment center and later into a recovery house, Justin still struggled to receive relief benefits such as stimulus checks and pandemic unemployment assistance, despite being approved. Call centers and customer service representatives were particularly frustrating. “You’re on hold for hours and when you get off hold, there’s this person on the phone that’s not empathetic. I had this one lady tell me, ‘oh, I didn’t get approved for it’ even though on paper it told me that I did. So, I asked her ‘okay, well, why wasn’t I approved?’ And she was like ‘because you weren’t approved.’ And I was like, ‘are you fucking kidding me, that’s your explanation?’ It was just very... and it hurts my self-esteem ‘cause I internalize that shit.”

Coming out of the pandemic, Justin hoped to continue to support the recovery community by helping others, especially those with similar experiences: “I really like to continue living life without fear...and just like prospering and being able to be in a position where I can help other people, yeah, especially other addicts.... I would love to be that person that makes it easier with somebody going through what I’ve gone through.”

## **RENEE, 26**

Renee was a college student when the pandemic started. As COVID-19 hit Radford City, she observed changes in her recovery communities. The movement to virtual spaces led to the “loss (of) a lot of people,” as many people that do not have access to the internet and technology were excluded from those spaces. Once things started returning to normal, there were still people who were “integral parts” of the recovery community who did not return to meetings. Not only did the virtual spaces have their limitations for recovery community meetings, they also had their limitations when it came to mental health services.



During the summer of 2020, Renee was having feelings of anxiety, depression, and suicidal ideation. She had tried to access telehealth services but the therapist “dropped me for legal reasons,” due to her suicidal ideation and the therapist being out of state. For almost a year, Renee tried to contact local resources, but was unable to get a hold of anyone and was trapped in “this phone loop.” After months of reaching out, Renee started to have manic and depressive episodes from an undiagnosed bipolar disorder. Renee started using marijuana to self-medicate for her depressive symptoms. This eventually led to her drinking alcohol and using harder drugs.

After a week of continuous hard drug use, Renee found herself at a South Carolina inpatient facility trying to access mental health services. Even with individuals advocating for her at the facility, she was discharged “after a night” and diagnosed with “bizarre behavior.” Her family picked her up from the South Carolina clinic and drove her to a mental health clinic back in Southwestern Virginia. During the car ride, Renee remembers trying to jump out of the moving vehicle on the highway, but luckily the child locks prevented her from doing so.

When she arrived at the hospital in Roanoke, Renee was under a medical Temporary Detention Order (TDO). She was unable to get access to a hospitalist for her abdominal pains unrelated to her withdrawal. Renee could not receive painkillers, even Motrin, because staff believed she was drug-seeking. She also reflects on being yelled at by her doctors: “Yeah, the doctor yelled at me.... I was like, ‘you just yelled at someone who is a trauma survivor while I’m caged and can’t leave.’”

Renee believed the medical system, especially in mental health care, is problematic. Doctors between departments are not communicating with each other; patient needs are not addressed because patients don’t know “the magic word” to ask for what they need. This cycle continues for people, especially individuals with a history of substance use, being unable to access mental health services. This lack of access to mental health services can lead to individuals turning to substance use as a coping mechanism.

Renee sees the failure of mental health providers as a contributing factor to her relapse during the pandemic. “Obviously, my life got completely ripped into turmoil, specifically because I did not have access to mental health services. That one [therapist] would have been one person that would have changed the whole trajectory of everything.”

## OLDER ADULTS

### BLAIR LANEY, 73

“Floyd has maintained an authenticity and a pace that other places have lost. It’s not too big, it’s not too small. It’s a slow place. That’s a big part of it. And it’s what you see is what you get.” Since the start of the pandemic, even a “convivial place” like Floyd County lost its “unique personality” and has not been the same to resident Blair Laney, a retired physical therapist and teacher, who takes pride in where he lives and feels like it is a “central part” of his character. “I take my identity from where I live, where I am.”

The pandemic altered the sense of community in his area, with traditional gatherings like potlucks and house concerts no longer happening. This, coupled with the inability to see family, proved to be a great challenge for Blair. Blair noticed he started to eat more and sleep more. He used sleeping as an escape to solve problems and work through thoughts, which clued him in to the fact that he might be struggling with depression. “I have to say, I sleep a lot lately. And I think it’s more of an attempt to find oblivion than that of [being] tired. It’s like I can somewhat self-direct my dreams and so I’ll dream about what I was thinking about or writing about and wake up energized.” He continued: “There was an element of depression in it too, no doubt... close to being despondent, I guess is a better word. Discouraged, sad.”

Through all of this, Blair found the internet to be a helpful tool during the pandemic. He and his friends used online platforms as an alternative to in-person interactions to connect. Blair’s support system was a group of eight to ten couples, or the “potluckers” as they call themselves. The group held online calls fairly regularly to maintain their feeling of connection, and Blair shares that these

calls made the pandemic feel “easier.” While Blair was grateful for online platforms to talk to his friends, he disliked attending church online. Blair said online platforms give an air of impersonality and disconnection, as people have blank screens and only their names displayed at every church meeting.

To enhance his feeling of connection, Blair involved himself in communities like the “Wild Foods and Natural Garden Association,” where members share gardening tips and skills. Another outlet of creativity for Blair is photography (Figure 5). It was one of the hobbies he could continue despite the COVID-19 pandemic.



**Figure 5** Some of Blair’s Photography Depicted Nature Scenes Seemingly Untouched by the Pandemic.

Being 73 years old and stuck in a deadly pandemic brought about fear and a sense of caution for Blair and his wife: “We operated out of an excess of caution.” He described the unpredictability of the disease, “like the one bullet in the chamber, and you don’t know which one’s going to fire. On you or your friends. And if it were your friends, you couldn’t go visit them. You’d be totally helpless.”

### **FRANKEY, 93**

Frankey’s life was significantly changed by the COVID-19 pandemic, from a shift in his routine to new difficulties he experienced in communicating with others. He was homebound since the pandemic began, and kept primarily to himself. Frankey lived in a private apartment within his daughter’s house, and his daughter helped him with housework, like washing his bed linens, vacuuming, and cleaning the floors. Frankey still drove and did his own shopping, but he made sure to wear a mask and kept a six-foot distance to protect himself and others. During the pandemic, Frankey spent the majority of his time at home in his recliner, where he found comfort and solace.

Frankey is a resident of Pulaski County and attended church regularly prior to the pandemic. Church was a place he could interact and catch up with others, but Frankey became concerned to attend church during the pandemic due to the lack of mask-wearing by some individuals: “Well, [there are] kind of ups and downs about it because people don’t seem to think that it’s as severe as it really is until I think it comes home to them. I don’t think people are aware that we were in a pandemic as much as they need to.” He added: “So many people, they don’t want to wear a mask and they just think it’s a tale that they’re tellin’ and there’s nothing true to it.”

At 93, Frankey was hard of hearing. This made communicating challenging: “At times, yes, it really is [difficult]. Some of the words you say, I don’t quite catch ‘em. I have the hearing aids, but

they don't fully correct it." Mask-wearing during the pandemic added another layer of difficulty in communicating for Frankey and other people who have trouble hearing. He shared, "it's very hard to understand because if you're hard of hearing, you generally read people's lips."

Despite the challenges of the pandemic, Frankey found ways to remain positive and active. He enjoyed doing puzzles to keep his mind engaged and found fulfillment in growing vegetables in grow boxes. Gardening gave Frankey something to look forward to. "It's kind of fascinating but I love it." He said engaging in activities that occupy the mind and body is essential for maintaining mental and physical health during challenging times. In addition, not all social interaction was lost for Frankey. An elderly couple from his church frequently visited him for lunch and fellowship. He also has three dogs that provide him with emotional support. Frankey shared, "my mental part has held up real good and I'm so thankful for that because a lot of people is not fortunate enough to have that. And I have really been blessed."

## **RANDALL WELLS, 79**

Living in a pandemic made Randall Wells realize that having someone to share life with is a blessing. That person for Randall is his wife, Margie. Randall, who is from Floyd County, describes his wife as a "good-natured person, [who is] patient and doesn't complain," and who helped him survive the pandemic. The pandemic made Randall realize the value of meeting people in person; he missed the days he could hug his loved ones. To cope, Randall found creative ways to meet his friends, one of which he calls "the policeman pool." The policeman pool was when he and his friends would pool together in their cars at a parking lot and roll their windows down to talk at a safe distance.

Life changed abruptly for Randall when the places he frequented, such as restaurants and his gym, closed due to the pandemic; he no longer had a place to gather to meet friends and exercise. However, he learned to use online meeting platforms to catch up with his friends and family. Another saving grace for Randall was seeing and spending time with his grandchild. "That was a joy," he said. One of Randall's favorite ways to pass time is teaching his grandson, who was home while his school closed due to the pandemic.

Randall and his wife found ways to beat isolation and connect with friends. Randall said he "spent a lot of time on the net reading the news.... And also contacting people, writing people... sending photographs." Accessing the news online is convenient for Randall and reduced his risk of getting exposed to COVID-19 at the store. Randall also found journaling to be relaxing and a "big break for him." Randall listened to classical music every single day, at least for ten hours a day, and he missed going to live music shows that were on hold due to COVID-19 restrictions. Randall described classical music as "stimulating" and a "blessing" during the pandemic.

Randall shared his frustration that some members of his community refused to wear masks, despite public health recommendations, which made Randall feel "alienated." "I wanted to scoot out of here because I was so alienated and angry at people that wouldn't take a simple precaution to save their neighbor's health and life by putting a mask on. I'll never understand that. These people around here who opened the door, [and] put a welcome mat out for COVID."

## **TES, 66**

Tes, a retiree from Montgomery County, is a person of faith. Her faith and putting her trust in God helped guide her through the hardships of the pandemic. "Any time that I feel worried or stressed, I communicate with God and I just say, Lord, please help me today to trust you for all things."

Tes lives with her husband in a rural area near a few relatives. Her family stuck together and put their faith in God to make it through the pandemic; they encouraged each other and prayed for each other every day. Before the pandemic, Tes' family would get together every Sunday. She said it was incredibly difficult to not be able to see her family in large gatherings; however, they remained close throughout the pandemic. When it was safe, Tes and her family took time to get out of their house while being cautious, to enjoy the nature around them.

Tes helped take care of her mother, aged 80, who lived nearby with one of Tes' sisters. Tes was concerned about her elderly mother's health during the pandemic and was not quite sure what the best approach was to help care for her mother. She shares, "I'm very thankful to the doctor that was wise enough to say, 'you be very careful and cautious but do not put her behind closed doors.'" The physician had been treating many elderly patients who were suffering from depression as a result of isolation.

Furthermore, Tes was concerned about how quickly the vaccine rolled out and whether or not God would entrust a Christian to receive the injection. The physician reassured her that receiving the vaccine was in both her and her mother's best interest and was safe for a Christian to receive. "I really trusted this lady [the doctor] because I felt like not only did she have the science part of this, but she also had the scriptural part of this and she felt like it was okay for a Christian to do," Tes shared.

As faith has been a big part of Tes' life, it was incredibly difficult for Tes to not be able to go to church during the pandemic. Not being able to gather with other people of faith was mentally taxing, especially during a time when the world was unpredictable. Luckily, Tes' church set up an online service for its members. Eventually, the church was able to organize drive-in services. Tes explained that while she was grateful for the online and drive-in services, the aspect of human touch was still missing. "Extending that hand or that hug is very important because we, as human beings, need that touch."

When asked how to cope with hardships during a pandemic, Tes explained that "I think this country needs to trust God more for their daily health, finances, their everything." She believes that when an individual has a relationship with God, He will take care of them physically and mentally. Being an active member in the faith community has given Tes joy throughout her life, and helped guide both herself and her family through the pandemic.

## SYNTHESIS OF THE NARRATIVE THEMES

Many factors played into each participant's experiences during the pandemic; participants held many identities, often identifying with multiple marginalized groups, such as immigrants, women, racial minorities, and/or seniors. Intersecting identities, like those of our participants, have social impacts that affect the health of individuals (Heard et al. 2020, 867). Across the participants' intersectional experiences, the research team identified common themes, including:

- 1) financial (in)security and employment,
- 2) access to resources,
- 3) internet and technology,
- 4) public health policies,
- 5) mental health and isolation,
- 6) resilience.

A synthesis of each theme is provided below.

### FINANCIAL (IN)SECURITY AND EMPLOYMENT

Financial and employment barriers were expressed across all four groups. During the COVID-19 pandemic, African American and Hispanic individuals were more likely to experience unemployment than their White counterparts (Dush et al. 2022, 126). Amongst participants, those who looked for work remotely, like Ashley, discussed the struggle of finding a position and the ensuing financial hardship. Alex was able to stay employed but found himself working 12-hour days. Additionally, concern over their ability to support families living outside of the United States was a challenge expressed by Hispanic participants. Roberto, for example, felt pressure to financially support his family, leading him to work several jobs. This pressure was heightened during the pandemic as some individuals, such as Flor, worried about not being able to work enough hours. Meanwhile, EH struggled to find work due to a history of incarceration. She and Justin both discussed how they struggled to receive all of the stimulus checks during a period of

unemployment. Some participants sought out social support and other resources to assist them through financial hardships, whereas others had trouble understanding the types of assistance available or encountered difficulties qualifying for it.

## **ACCESS TO RESOURCES**

Accessing government social support, lack of access to healthcare, and/or misinformation about resources were all major barriers experienced across the four groups. As EH shared, some social service organizations lacked the funding and resources that people needed or were unable to implement program activities due to COVID-19 restrictions. Flor did not have healthcare coverage and unfortunately became infected with COVID-19 twice. NMechoed these concerns and stated that multiple individuals in the community confided in her that they did not have access to healthcare. Others, like Renee, struggled to access mental health services during this unprecedented time. Participants shared that lack of access to healthcare created increased feelings of anxiety about contracting COVID-19 because of their concern about the cost of treatment.

A number of participants shared that they felt as though there were not enough resources to provide aid or that they did not know how to access the aid due to poor communication. Participants mentioned compounding factors such as language barriers, disorganized systems, and lack of follow-up by groups providing resources. Renee found that when programs moved to virtual spaces, this led to a loss of connection. This was a trend experienced by many young adults during the COVID-19 pandemic (Long et al. 2022, 129). But not all individuals had negative experiences accessing resources. Justin McMiller, for instance, found programs that made a positive impact on his life and that the pandemic created an opportunity for him to commit to these programs.

## **INTERNET AND TECHNOLOGY**

The COVID-19 pandemic impacted how virtual spaces were used and changed personal and group interactions (Long et al. 2022, 129). Alex also saw firsthand how lack of internet access could impact individuals academically. Some academic requirements, such as Ashley's clinical hours, could not easily transition to a virtual environment and so delayed her ability to obtain an important professional credential. Renee and EH expanded upon how lack of internet negatively impacted those in recovery, specifically when group and self-help meetings moved to online formats. Others reported that the transition from in-person classes to remote learning was difficult. Lucy stepped up to help her grandchild adjust to online learning and helped educate him during the pandemic. Others, like Blair, found the internet as a way to connect with friends during times of quarantine and physical distancing. This online connection made it easier to adhere to public health guidelines while maintaining a sense of social fulfillment.

## **PUBLIC HEALTH POLICIES**

While public health guidelines were in place, participants observed that they were not always followed. Sources such as social media have been shown to spread misinformation and decrease belief in COVID-19 public health and safety policy (Fridman et al. 2020,13). Some individuals like Roberto did not have a sense of the severity of COVID-19 due to a lack of public health information. In addition, others like Tess were hesitant to get vaccinated. Lack of compliance with public health guidelines caused a considerable amount of anxiety and stress for several participants, such as Ashley, who had to navigate sharing living space while socially distancing. Randall Wells shared that he felt anxious about those in his community who did not wear their masks. This made traveling out into the community a challenge, especially for weekly tasks like grocery shopping. Frankey chose to stop attending church services, leaving behind a community that was important to him, because of lack of masking by members of his congregation. Many were forced to isolate themselves from their communities in order to maintain their own health.

## **MENTAL HEALTH AND ISOLATION**

Studies have found that mental health is influenced by social support (Li et al. 2021, 8). Ella shared that the separation of people who are homeless or incarcerated from their social networks leads



to increased danger for those individuals and their friends or family members, which contributes to stress and negative mental health outcomes. Renee opened up about her feelings of depression, anxiety, and suicidal ideation during the pandemic. Feelings of isolation, lack of connection, and missing social support were prominent across all of the groups. Lupita did not leave her house for six months during the pandemic. Maxwell stated that he struggled with feeling alone during the pandemic and ultimately decided to see a therapist for support. Blair Laney noted that he began eating and sleeping more, behaviors which he believed to be signs of depression. Some individuals, such as Roberto, felt alone because they were the only ones in their family in the United States.

## RESILIENCE

Despite the overwhelming challenges presented by the pandemic, there were many ways in which participants found strength and the ability to be resilient. Having strong social support can help people be more resilient (Long et al. 2022, 129). Several of the participants found this vital support in family and reaching out to others appeared to play a big role in supporting the mental health of these individuals. Ella found support internally from her upbringing and externally through the recovery community. For Lucy, strength was also found in a community of worship. Tes sought to communicate with God to help her through the challenges of the pandemic. Additionally, others, like Flor, saw their faith as a driving force to help them choose to get vaccinated.

Some individuals identified creative ways to overcome their loneliness. One popular form of safe communication was online video chatting with family and friends. Others decided to see their family and friends in person but remain six feet apart and wear masks. Randall Wells and his wife supported each other and both found new hobbies and interests. Frankey learned to enjoy the solitude. Lupita took the time to grow her hobbies and continue to work on learning a new language. Community organizers, like Maxwell, looked at ways to improve their community during and after the pandemic. Additionally, coming out of the pandemic, individuals wished to further support their communities, such as Justin McMiller, who hoped to encourage others in recovery.

## CONCLUSION

During the COVID-19 pandemic in Virginia's NRV, new relationships were created, hope was shared, and a sense of renewed well-being was sought and found. Some people leveraged support from their community not only to survive but persevere due to a sense of genuine human connection. For some participants, religious institutions served as a safe haven and source of hope. Others found new support systems in unconventional places and through unexpected means. Some struggled with finding meaning and connection but still persevered through adversity. Indeed, the participants interviewed through this project cultivated resilience through a variety of outlets that allowed them to adapt and carry on during a time of danger and uncertainty.

We hope that by sharing these stories and increasing the visibility of these individuals, we can help to inform policy. Individuals with lived experiences can provide perspective on what community-based services would be beneficial to them. Reading their stories can provide insight into where there is need in a community and what services are missing or limited, which in turn can help inform how funding and resources are allocated. This information can help in the development of infrastructure and programs (transportation, health services, social services, etc.) to support individuals who have marginalized identities. These stories are a testament to participants' resilience and bravery in the face of adversity, elevating their voices during a unique moment in global history.

## ADDITIONAL FILE

The additional file for this article can be found as follows:

- **Appendix A.** Participant Interview Questions. DOI: <https://doi.org/10.21061/cc.v4i2.a.51.s1>

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## COMPETING INTERESTS

The authors have no competing interests to declare.

## AUTHOR CONTRIBUTIONS

Fernanda Gutierrez Matos, Chloe Loving, Teagan Neveldine, and Sakina Weekes designed the project, recruited participants, secured informed consent, and conducted the interviews. Arushi Bejoy, Natalie Cann, Grace DiGirolamo, Fernanda Gutierrez Matos, Molly Kwitny, Jasmine Lewis, Quinn Richards, and Kayla Vaught transcribed the interviews and wrote the stories. Natalie Cann, Molly Kwitny, Jasmine Lewis, Quinn Richards, and Kayla Vaught provided final editing and wrote the introduction and synthesis sections. Dr. Sophie Wenzel, Department of Population Health Sciences, provided oversight for the entire project.

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