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# **‘The state will not save us, only we can save us’**

a collective response to Covid-19

Anonymous

March 19, 2020

*An open letter, on what we must do to mitigate this crisis.*

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*We are a group of migrant solidarity, prison abolitionist and anti-racist organisers. We wanted to write this statement from an abolitionist, anti-racist perspective, highlighting the reality that the causes of the current crisis lie deeper than the outbreak of disease itself: it is rooted in the very way our economy is organised, how our society is gendered and racialised. See below our open letter, which details what we must do in the face of this crisis.*

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Coronavirus is a political issue. At root, this pandemic is a disease of global capitalism, both in its genesis and its transmission. Without the drive towards overproduction, the particular conditions for the increased occurrence of infectious disease would not exist; without global commodity chains and regular

labour migration, the spread of disease would not be so rapid; without the ruling classes' vested interests in maintaining capital flow, people would not be forced to continue to work, further exposing themselves to the virus.

As abolitionist organisers, our resistance to the effects of this virus are rooted in a vision of a world without borders, prisons, or the police – structures that exclude and exploit the most marginalised. The world we need now is one that we have always needed: a world where everyone can access healthcare, where everyone has a safe place to live, where no one is locked in a cage, where there is no imperative to work – a world that is accessible to disabled people. What this pandemic puts in sharp relief is the fact that the same conditions that already place certain communities at greater proximity to death are detrimental to the health of all.

In the UK, Boris Johnson's flip-flopping from "take it on the chin" to "develop herd immunity", all the way to last week's pitiful mitigation strategy – that scientists calculated would've left 260,000 dead – has betrayed our government's casual disregard for the lives of those most at risk of death from the virus. Belated and half-hearted calls for social distancing have completely failed to address the inability of many to safely and effectively practise social distancing and self-isolation. Meanwhile, we have witnessed familiar patterns of fear leading to scapegoating and racist violence in the upsurge of attacks against people racialised as East Asians and other migrants. What is clear is that for our government, the lives of the elderly, immuno-compromised people, undocumented migrants, asylum seekers, people of colour, disabled people, people experiencing homelessness, incarcerated people and poor people do not matter.

In light of government inaction, many are calling for exceptional measures, framing this moment as one of "crisis" requiring urgent action and attention. It is true that we need urgent action, but we also must recognise that the very idea of 'excep-

tion' obscures the reality that the people that our government is effectively willing to let die have always lived in precarious conditions, subject to the vicissitudes of an economic system designed to place profit and power above people's lives. Not only does the logic of "crisis" exceptionalise, it creates an opportunity for the state to consolidate power – increase surveillance, restrict freedom of movement – in the name of addressing the "crisis". Indeed, it was recently announced that police and immigration officials will be granted emergency powers to detain people suspected of having Covid-19. If we have learnt anything from the ongoing racist surveillance and criminalisation of Muslims and other racialised communities under the "War on Terror", we know that we must be vigilant against the intensification of police and border violence in the name of a racialised "War on Disease".

When we call for the state to act to prevent death as a matter of urgency, then, we do so with the knowledge that the underlying crisis is ongoing, and with the hope that any actions taken now will reverberate beyond this seemingly "exceptional" moment. And when we emphasise the urgency of "quarantines" and physical distancing, we do so as a method of collective care that reduces the very real risk to the most vulnerable, whilst resisting a parallel expansion of state coercion and surveillance.

With this in mind, we propose the following non-exhaustive urgent demands to ensure that all can safely practise recommended social distancing to contain the virus, and to ensure that all can safely self-isolate and access healthcare:

### **1. End the hostile environment**

As an infectious disease, Covid-19 is exempt from the hostile environment healthcare charges, and the government has claimed that the NHS will not share data with the Home Office regarding cases of coronavirus patients. However, we are concerned that migrants will still have legitimate fear about ac-

cessing healthcare while detention and deportation orders, and data-sharing between the NHS and the Home Office continue.

## **2. No new police powers**

For Covid-19, we believe increased police and immigration officer powers will only be used to target those already targeted by law and immigration enforcement, including black people, Muslims, and people of colour, undocumented migrants, homeless people and sex workers. The government should invest in providing fast and general testing for Covid-19, rather than investing in the expansion of the carceral regime.

## **3. Access to welfare for all**

Migrants with no recourse to public funds, or who are otherwise unable to access welfare and housing assistance, are at risk of homelessness and destitution. Many migrants who are already in precarious working and living conditions will need to be able to access welfare and housing support to be able to practise social distancing and self-isolate if necessary.

## **4. End in-person immigration reporting**

Migrants who arrive in the UK without permission to remain are usually required to regularly attend appointments at immigration reporting centres. There are 14 centres in the UK and many migrants are forced to travel long distances to make their appointments, which is particularly difficult especially if they do not have recourse to public funds. This process is designed to make life difficult and deter those seeking asylum from continuing with their claim.

## **5. Safe housing for all**

We have always needed safe housing for all and it is all the more necessary now, at a time when social distancing and self-isolating are the only ways to prevent the outbreak from spreading further. Currently, self-isolating and social distancing are not possible for rough sleepers, people living in overcrowded housing and people incarcerated in overcrowded and unsanitary conditions in prisons and detention centres. Self-isolation and social distancing in the home is danger-

Community Action Against Prison Expansion (CAPE)  
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 Haringey Anti-Raids  
 Lesbians & Gays Support the Migrants (LGSM)  
 Migrants in Culture  
 North East London Migrant Action (NELMA)  
 Sisters Uncut  
 Newham Anti-Raids  
 Preventing Prevent  
 Prisoner Solidarity Network (formerly IWOC)  
 Smash IPP  
 SOAS Detainee Support  
 South Asia Solidarity Group  
 Streets Kitchen  
 Unis Resist Border Controls (URBC)  
 Wet'suwet'en Solidarity UK

ous for those experiencing domestic violence. Hotel rooms, student accommodation, and suitable empty properties with private rooms and bathrooms should be requisitioned to house those who cannot otherwise safely self-isolate, including people experiencing homelessness, travelling communities and survivors of domestic violence.

#### **6. Release people from prisons and detention centres**

Keeping people locked in cages is inhumane, especially in a time of such fear and panic. Prisons and detention centres are also notorious for overcrowding and lack of hygiene. There is, as migrant rights groups have pointed out, “a very real risk of an uncontrolled outbreak of Covid-19 in immigration detention”. The UK must follow the example of Iran, which has released 85,000 prisoners to stem the spread of disease. Incarcerated and detained people must be released, and placed in safe housing and accommodation, with the necessary support and access to healthcare.

#### **7. Periods of Negotiated Stopping for travelling communities**

Enforced movement of encampments is likely to create an additional risk of unmanaged spread of the virus. Negotiated Stopping involves Local Authority officers making an agreement with travelling communities on unauthorised encampments, allowing travelling communities to either stay on the land they are camped on or move to a bit of land more suitable for all parties.

#### **8. Suspend rent, evictions, and utilities payments**

As the coronavirus outbreak continues, more and more people will be put out of work, making it impossible to meet rent and utilities payments. The government has announced “mortgage holidays” for landlords and homeowners; however, it has not, as in other cities, committed to stopping evictions. Without a roof over their heads, people will not be able to stay safe and healthy, nor to self-isolate if they have symptoms or practice social distancing to prevent the spread of disease.

### **9. Provide free essentials such as cleaning products and soap to all**

Panic buying of products such as hand sanitiser and toilet paper has led to shortages across the UK. Those who cannot afford the steep rise in costs, or who do not have the time or money to scour multiple supermarkets for daily essential products, are suffering the brunt of this hoarding. People must be provided with free cleaning products and soap to protect themselves and their communities. Food banks and frontline service providers must be supported as they continue to support those in our communities.

### **10. Full pay for sick leave and a universal basic income for all**

Social distancing and self-isolation are a practical impossibility for many workers. As it stands, it would leave many workers with reduced or no income, with precarious workers suffering the brunt of this loss of income. The government's current proposal for statutory sick pay of £94.25 for one week's sick leave or self-isolation is insufficient for living and rent costs. We therefore echo demands from unions to ensure full pay at living wage plus costs for sick leave or self-isolation. We are concerned, however, about provisions for those self-employed people and those on zero hours contracts. Sex workers are already suffering a loss of clients, forcing many into situations of greater precarity; migrant domestic workers, particularly those who live-in, are vulnerable to exploitative working conditions. We therefore believe that guaranteeing a universal basic income that is sufficient for food and home security would best enable workers to practice social distancing and self-isolation.

### **11. Safe working conditions**

Medical workers, care workers, cleaners and delivery workers at the frontline of dealing with the outbreak will be forced to continue labouring in increasingly dangerous conditions – often with insufficient protection from their employers and the government. Those precariously employed in these sectors are

disproportionately migrants, particularly black people, people of colour, and Eastern Europeans.

### **12. Make private clinics public**

The NHS will soon be at breaking point, particularly in regards to being able to provide critical care or ICU beds. Healthcare workers are already being stretched beyond capacity. The root of this is austerity, which has seen major cutbacks to investments in the public healthcare sector and increasing privatisation of services under successive Conservative governments. How much you can pay should have no bearing on whether you can access essential healthcare.

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We have already been fighting violent systems, and not just now that they are having a knock on effect on the health of the ruling classes. The health of the ruling classes has always been premised on the exploitation of workers and the exclusion of marginalised people.

We are aware that the state is ultimately concerned with crisis management and reconsolidating its power. However, we believe organisers can and should pressure the state to prevent death today, whilst staying critical and building autonomy. We recognise that marginalised communities have always, and will continue, to engage in practices of mutual aid and community care to create safety outside of those structures that they have never been able to rely on. We need each other now and always.

Endorsed by: