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# Angela McRobbie

## ‘Our low-paid workers are our lifeline’

Published on 25 March 2020 on *Verso Blog*

(<https://www.versobooks.com/blogs/4616-our-low-paid-workers-are-our-lifeline>)

*On Wednesday 18th March, Angela McRobbie was admitted to hospital with what turned out to be COVID-19. Here she discusses her experiences of the virus, and pays tribute to those low paid workers who are at the forefront of efforts to tackle the pandemic.*

It is now day 2 of my being discharged from the Whittington Hospital in North London, with a positive test for COVID-19 coming through on Saturday afternoon. The only reason I'm writing this is to re-iterate how, as a society, we now have to swivel 360 degrees to properly value those dedicated workers whose compassion has humbled me in ways I can hardly convey.

The first workforce I came into contact with doing long hours, poorly paid, possibly at risk over recent weeks and acting with such professionalism were the cabin crew on the any Easyjet flights I've taken between Gatwick and Berlin Tegel. I've recently been finalising a research project running between London, Berlin and Milan, but more importantly I've been helping care for a friend who has been going through first chemo, then immunotherapy. Once en route I exchanged glances with the crew when a seemingly agitated woman boarded wearing a large mask and then entirely covering her face by pulling down her woolie hat. I was bang next to her, as was the passenger on the other side, for the 90 minutes looking through the window throughout. Perhaps this was the moment I got infected. A week later, and this time on another flight back to London, I began to feel queasy on board. I was relieved not to have thrown up and managed to get home to North London. This was Thursday 12<sup>th</sup> March and from that point on I became weaker and weaker by the hour. But with no cough and no temperature, I did not really make the leap to thinking it to be C-19. I collapsed on the bathroom floor 3 times, I slept with a kind of hallucinogenic intensity and I ate almost nothing. By Wednesday 18<sup>th</sup> my daughter called an ambulance, and when the brave paramedics arrived they could see how ill I was. I so much hope they have remained healthy, as they were unmasked.

They took me to the Whittington Hospital, just 5 minutes from where I live. There was a frenzy of activity in A & E, and I was first given a lung x-ray and told immediately by a doctor that there were signs of infection. I was also given oxygen, which I needed over the course of 4 days. My blood pressure, heart rate and oxygen levels were checked every two hours throughout the night, also by amazing health staff working 12 hour shifts. I was put on two antibiotics and Tamiflu, just in case they worked. Oddly, after 12 hours, I felt they were working – though this could have been merely my relief that I was in such good hands. I once again collapsed on the bathroom floor and the ward sister so helpfully called my daughter. At least I could eat a little. I was in a ward with terribly ill and mostly patients older than me (I'm 68). Through the fog of my own illness I could see how the doctors and nurses were treating quite confused patients with such compassion, spending up to 30 minutes at a time with them, masked but really risking

their lives. I had also become quite deaf during this process and at a certain point I just smiled and nodded. I told the doctor of my travels and that mercifully we were on strike at my university so this had kept me out of personal contact, often one to one, with up to 300 students over the space of 4 days.

By late Friday I felt a wave of calm that perhaps I was going to survive this. By Saturday a positive result emerged. Again, a wonderful young doctor broke the news but by then I was eating and no longer needed oxygen, and he said I may be allowed home Sunday. They decided to keep me on the antibiotics. He explained that so little is known and that hospital policy was following the guidance from their own microbiologists. My daughter had been allowed short visits and told me staff were worried about running out of masks, the next day she came to collect me bringing with her a box of a 100 that she had pre-ordered a week or so before.

Several staff including one of the cleaners smiled and wished me the best when I was leaving the ward, this was so generous since I was leaving all of them to a future unknown. Since being home I am only able to walk like someone in their 90s. I hold onto doors and walls for support. Any degree of strength seems very slow to re-enter my system but there are some good signs. I feel as though it's going to take weeks, but that's fine. I am lucky to live alone and I have the sun streaming through my windows. I feel full of political fervour to see our dedicated health and care workforce, clinical and non-clinical looked after. Why cannot the military medical corps be pulled in across the country? And cannot this happen now? Essential travel must be made safe and easy for core workers, Sadiq Khan and other mayors have it in their hands to find ways of making this happen. I also hope Easyjet is thinking of how it can not only pay its workforce more generously but look after them with the care they deserve. Coincidentally in a forthcoming short book, that I have just finished writing, I rage about how our low pay economy 'incarcerates' sectors of the population with long hours, and near to zero hours conditions meaning that there is little if any chance for further job training, for day release or for upping qualifications. This is a national pattern for workers, from north to south we only, who until the last week we have given barely have more than a second thought to. These are women and men in the checkouts who I often talk to and they tell me they only have higher hopes for their children doing well at school and university. They feel themselves to be trapped in a future of low paid jobs. But this can change now. If social scientists have any role to play (and in the last 2 weeks I have doubted my own professional value indeed in comparison to virologists epidemiologists not to say health staff) then we can clamour loudly for a new world after the virus which permits the service sector to be able to see true improvement in wages, conditions and also opportunity to gain more qualifications.

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