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The Wounded Storyteller in New York City: 
A College Professor’s Stories of 
the COVID-19 Outbreak

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In March 2020, the spring semester began at LaGuardia Community College, one of the 25 colleges of the City University of New York (CUNY). I barely met my students and introduced the composition course theme on illness narratives when CUNY suddenly closed all campuses due to the COVID-19 outbreak. Located in the Queens borough, LaGuardia serves a diverse student population originating from 150 countries. A substantial proportion of these students are working class and low-income, living in the hardest hit neighborhoods when New York City (NYC) quickly became the global epicenter of the pandemic.

For my students, this was undoubtedly the most challenging semester. Continuing to work as essential workers and living in cramped quarters, many fell sick from the virus. Others lost their loved ones, livelihoods, and the sense of security and hope. And many, many more “got lost” when CUNY suddenly turned from in-person classes to remote education as they did not have working computers, reliable internet connections, the technological know-how, quiet study spaces, and, most importantly, economic stability and family support — things that solidly middle-class students may take for granted.

Nevertheless, for me and for the students who somehow managed to keep up, this epidemic outbreak turned out to be a teachable moment. What better time to learn about Arthur W. Frank’s classic illness narrative genres and connect them to what is happening not only to ourselves but also to the community at large? In this creative nonfiction, I attempt to capture this learning moment by sorting out all these messy experiences,

1 Citations are kept to a minimum in this creative nonfiction. See Note on Sources for my use of sources and citation policy.
thoughts, and feelings according to the three genres proposed by Frank — restitution, chaos, and quest. This sorting is a creative yet critical process. Each genre helps me recreate and document certain experiences of this unprecedented global disaster that the other two cannot, whereas some of the experiences may in turn expand the boundaries of the genres.

Each of the three sections below begins with Frank’s definition of a genre, followed by my own restitution, chaos, and quest stories respectively. The restitution section depicts how my anxiety overshadowed the beginning of the semester after the diagnosis of the first coronavirus case in NYC. Teaching illness narratives on pins and needles, I turned to embrace the restitution narrative, entertaining the wishful thinking that I would be fine just by adhering to the authorities’ preventive guidelines. The following chaos section brings us to the darkest days in my teaching career from mid-March to June 2020 after the explosion of COVID-19 cases and deaths in the city-turned-epicenter. Using a narrative collage, I show how the plethora of chaos — from terrifying death toll to the alarming surge of anti-Asian bigotry, from overwhelmed hospitals to massive job losses, from systemic racism to the concentration of deaths in communities of color — were bombarding us while my students and I were struggling to move forward our education in an emergency online format.

Just as chaos kept dragging me down into an abyss, away from any sense of hope and normalcy, I ventured out of my quarantine bubble for the first time in mid-June after NYC’s Phase I reopening. In the quest section, I describe how I found meaning in the most mundane things I did with my daughter, how I reconnected with the community, during this short neighborhood trip. My narrative ends with students’ reflections on the pandemic. They connected Frank’s illness narrative genres to the ongoing crisis and depicted their quests for meaning and community in these otherwise devastating times.

If the restitution, chaos, and quest narratives below are about many things, it is because their subject matter, the still unfolding COVID-19 pandemic, affects every facet of humanity. But for me as for others interested in narrative medicine, these stories are about one thing: wounded storytelling and compassionate listening. Regardless of its genre, each narrative calls for our listening with an open heart so that the wounded storyteller is heard. And it is when wounded storytelling is coupled with compassionate listening that healing begins.
The Mask of Restitution

The plot of restitution has the basic storyline: “Yesterday I was healthy, today I’m sick, but tomorrow I’ll be healthy again.” — Arthur W. Frank, *The Wounded Storyteller*

On March 2, 2020, government officials announced the first coronavirus case in NYC. The following day, LaGuardia’s spring semester started. The campus was business as usual except for the new Purell stands at the main entrances. Following the Centers for Disease Control and Prevention (CDC) guidelines of the time, I did not wear a mask. Instead, I washed and rewashed my hands, disinfected my computer keyboard, and told my students to do so.

This term, like any others, was packed with learning objectives, essay assignments, and nonnegotiable due dates. In the first week, I lost no time in introducing the course theme on illness narratives, exploring Arthur Frank’s well-known classification of such stories into three types: restitution, chaos, and quest. To begin, students shared a short account of their sickness and explained what their genre was. Relatively young and healthy, most students identified their stories as restitution. Thanks to their physician, medication, or simply mother nature, they had fully recovered from the ailment they once had.

“Why do we all have the most simplistic narrative? Frank is critical of the restitution story! He says it’s just about medicine, not about the patient,” commented a student. She was certainly right about Frank’s critique of restitution as the master narrative of medicine, one that celebrates the triumphs of testing, drugs, and treatments at the expense of the patient’s voice and experience. During normal times, I could not have agreed more with the student. Before becoming an English professor, I was once a social worker and saw how my clients, many of whom were recent immigrants, got badly treated or even neglected in clinics and hospitals because medical providers were often too occupied with their treatment narratives to listen carefully to patients’ accounts. But as fear over the novel coronavirus was mounting, and as other private universities such as Columbia University had already closed their campuses, I found

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3 @CDCgov, “CDC does not currently recommend the use of facemasks.”
myself defending the medical discourse: “Yes, restitution can be one-sided and deceptive. But now, I simply wish for this plot. If I get sick, I just want to go to the doctor, take pills, and become healthy again. Or better still, if I listen to the medical authorities, I won’t get infected with the coronavirus in the first place!”

As the virus is spreading, I continued to explain, don’t we all want our stories to have happy endings just by following CDC, the World Health Organization, and the NYC Department of Health guidelines? CDC asked us to keep our hands clean. I, for one, listened. CDC did not recommend we wear face masks. I listened even though the top infectious diseases doctors who had curbed SARS elsewhere advised the opposite. When reporting their first COVID-19 case, government officials praised New Yorkers for not scaring easily and asked us to practice everyday precautions and go about our regular lives. I was by no means “New York tough.” Still, I listened.

But besides adhering to the authorities’ guidelines, how far would I go to defend the restitution narrative? Would I trade critical thinking skills for (the promise of) health in these uncertain times? Without critical thinking, would I be able to maintain my well-being in the first place? My students became quiet as they all wanted to go home after a long day. And I ended the class with this announcement, “Watch out for my emails about possible school closure.” Little did I know that this would be my last face-to-face remark to my students.

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5 For instance, leading experts in Hong Kong asked residents to wear masks and to make their own as early as February 2020 (Yau; Practices to Counter Disease). In April 2020, they published a paper on the role of community-wide wearing of masks for COVID-19 control (Cheng et al). CDC did not recommend the wearing of masks until April 2020 (@CDCgov, “CDC’s recommendation”).
In chaos narratives, one thing happens after another, but nothing leads to anything else; there is no ordering of events, and that is what is chaotic. No ending, in the sense of a resolution, is in sight. — Arthur W. Frank, “Illness and Narrative”

After class, I took the subway home as usual, but this train ride was far from usual. It was nerve-wracking. A passenger was coughing, and I moved away to the door. But another there was sneezing. It seemed like there was no safe spot; thank goodness the train finally arrived at my station. I immediately washed my hands with sanitizer, and ran home as fast as I could. Later in the evening, and after the trading of angry internal emails between colleagues demanding immediate college closure and those arguing against it, CUNY belatedly announced that all campuses would close starting the next day, March 12. I heaved a sigh of relief, but whatever relief I felt turned out to be short-lived.

Though allowed to teach from home for the rest of the semester, though staying healthy and safe with my loved ones, I felt as though I were the wounded storyteller in chaos. I found myself in a roller coaster of crisis, whose never-ending track was leading me, and the city, farther and farther away from life as we know it. Unlike the wounded storyteller though, I was not sick. Indeed, staying indoors most of the time, I did not even suffer from my annual allergy brought about by the arrival of spring.

I was nevertheless devastated; I was hurt. For what I saw and heard from the media and emails, and what I experienced firsthand was de facto

... chaos ... chaos ... chaos ... 

from March to June 2020

and beyond

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FRank, “Illness and Narrative” 85.
In Person Classes Canceled:
Mar. 12 thru Mar. 18. Classes will resume Mar. 19 through distance learning for the remainder of the semester.

**NYC Health**
Mar. 14: We sadly announced the first two coronavirus deaths in the city.

**Mail**
Dear students, I hope you are staying healthy. Please do NOT go to campus; instead, do the assignments posted on Google Classroom.—Prof.

**Mail**
Dear students, this is to remind you that your illness narrative assignment is due Thurs. Please finish it now.—Prof.

**Mail**
Good morning professor, may I get information about the class i’ve been sick and haven’t come to any of the classes. —M

**Breaking News**
Labor Department’s website crashed ... unemployment benefits applications soared.

**New York Times**
Three weeks after the diagnosis of its first COVID-19 case, NYC has become the global epicenter of the pandemic.
Professor, I’m one of the nurses who are not in quarantine and are STILL WORKING. Every day. And even longer than before because some co-workers just found out their children’s schools are closed. “Finish it now” is simply impossible for those of us on the frontline.—L

Due to the COVID-19 outbreak, our supermarket will be temporarily closed starting 3/30/2020. Thank you, all our loyal customers, for your understanding, and sorry for the inconvenience!

On Feb. 9, the first COVID-19 case was diagnosed in NYC. By Mar. 30, a total of some 69,425 cases were diagnosed, and counting.⁷

⁷ Data drawn from New York City Department of Health and Mental Hygiene. For a detailed report on the early COVID-19 outbreak in NYC, see Thompson et al.
Physical and verbal attacks against Asian Americans are on an alarming rise in NYC and many other places.

#WashTheHate

A wave of violent attacks and murders of Asian Americans, including elders and women, has shaken the entire country.

#StopAsianHate

Anti-Asian bigotry and crime has increased by 19 times since the coronavirus outbreak. But it is tragically underreported.

A Student’s Account of Anti-Asian Racism

As a Chinese student, I’ve paid a lot of attention to COVID-19 since it first broke out in China and spread like fire throughout the whole world. Since COVID-19 killed countless thousands of lives, hate crime has rapidly increased in American society. NYC, as one of the most open and inclusive international cities, also turns out to be a place where discrimination is high. Many Asian people have been scapegoated for the pandemic, and some of them have even been hurt during the crisis according to the NYPD. I didn’t believe what the department reported was true until I experienced it myself. In early May 2020, a white woman and a kid passed by me on a street, and she hit me on the chest with her left hand. She acted as if nothing had happened and kept walking with the kid next to her. There was not even an apology or a look back. This incident made me rethink how to treat biased people like that woman and begin to doubt the American spirit.
Dear colleagues,

we welcome CUNY's reaffirmation of its commitment to maintaining a bias-free educational environment in these potentially divisive times. I am equally concerned about blatantly racist behaviors and hate crimes on the street. Just yesterday, waiting in line to enter a supermarket in Bensonhurst, I heard a man shouting when passing by: "Chinese virus. You should go back to your country." I already reported this incident to government and advocacy agencies.—Prof.

Good morning professor, I’m at ER getting swabbed for COVID. Three medical professionals including a doctor in my clinic tested positive. —L

Overwhelmed with COVID-19 patients, hospitals were still ordered to double capacity.

Hey professor this is Joe writing to let you know that i did not have access to the internet that's why i couldn’t check into Classroom but i have access now please let me know how I can move forward with my education ... —K

Queens News

In Corona, a community of color and immigrants, lines of people are waiting for tests and treatment outside Elmhurst Hospital, the “ground zero” of the epicenter.

The New York Times

Race and income are the key factors that decide who dies from COVID-19 and who survives.
CDC’s recommendation on wearing a cloth face covering may help protect the most vulnerable from #COVID19. ⁹

Replies

Why can’t you guys make up your minds?

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⁸Data drawn from New York City Department of Health and Mental Hygiene.

⁹@CDCgov, “CDC’s recommendation.”
Hello professor, I'm trying to finish the essay but I lost my job and have a lot of anxiety. It's very stressful and I haven't been able to focus due to the crisis... —M

The NYC government continued to implore the federal government for help...

Morgues ran out of space for bodies of virus victims. Refrigerated trucks are used as temporary morgues.

Hello professor, sorry for the late email, but my mother just admitted to the hospital for COVID. It's been very tough for my family and me lately. Can you please give me an extension for the essay assignment? —H

Hi, this is Professor ... speaking. Thanks for getting back in touch! Don’t worry about signing into Classroom. I’ll send you the assignments one by one by email. Just complete and send them back to me...

oh finally, food delivery...where’s my mask ... get me the tip ... cereal ... veggies ... milk ... yogurt ...meat ...avocados ... snacks ... tea ... cheese Nutri-Grain ...fridge is FULL ... put the extra oranges in basement ... only two packs of beef ... no flour this time ... again no toilet paper ... THANKS SO MUCH for your service !!!!
COVID-19 has disproportionately hit Latinos and Blacks. Many poor communities of color and immigrants have suffered by far the greatest infection and death rates.

A student’s journal

I was working at Papa John’s. My co-worker was hospitalized due to COVID-19, and I also had symptoms. But my friends told me that those infected will more likely die if they go to the hospital. So, I decided to go to the South where my brother could help me. It took me a few days to get there, riding on his truck. My brother gave me African herbal drinks and I slowly recovered.

Professor, I’ve honestly not been adjusting well at all to the current crisis. I have no motivation to study and I hate myself for not being able to change. Being trapped in my room and not being able to go to school has impacted my mental health. —R

So good to talk with you, professor. I was on a full oxygen mask in ICU. I had trouble breathing and thought I would die...—L
Dear all, we must do our parts to stop the pattern of deadly police brutality against Black people. We must speak out against the systemic racism that criminalizes blackness. —K

**Daily News** NYC curfew, the city’s first in 75 years, started at 8 p.m. on June 1 until 5 a.m., the next morning. But large numbers of people defied the curfew and continued to protest.

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#BlackLivesMatter #StopAsianHate

**Black Lives Matter**

George Floyd
Blackout Tuesday
nationwide protests
decriminalize Blackness
root out systemic racism
defund the police departments
reform the police
less policing

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**#AsiansForBlackLives**
**#BlacksForAsians**

Supporting Blacks is Supporting Asians
支持黑人就是支持亚裔

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Dear university community, we condemn the wave of anti-Asian and anti-Asian American bigotry due to the hateful rhetoric of those who seek to divide the nation, at a time when all of us are vulnerable. Our university denounces references to COVID-19 that connect the coronavirus to any racial, ethnic, or cultural identity.
In NYC, mass demonstrations were mostly peaceful but as the night fell, looting, vandalism, and arsons began to spin out of control in parts of Manhattan, Brooklyn, the Bronx ...

Some people believe New York is dead. Many are leaving NYC for less crowded and more affordable suburbs. The Big Apple’s attractions—restaurants, theatres, mass transits—have become its liability due to COVID-19...

I appreciate the college’s support of Black Lives Matter. However, the administration should also reflect on its decision to terminate my appointment based on white colleagues’ complaint that I was non-collegial—Z

Dear Adjunct Lecturer, please allow this letter to inform you that you will not be appointed for the academic year 2020-2021. Your current appointment will end on August 25, 2020. —F
[And it goes without saying that you will also lose your health insurance.]

Dear students, many of us are in pain seeing images of racism and violence. I wanted to let you know that our college is offering Support Circles for issues faced by us during these challenging times. —Prof.

NYC food pantries are crying for help. The demand for their services has skyrocketed, but their funding, supplies, and volunteers have decreased.
NYC officials were worried that the mass protests would lead to a COVID-19 spike and encouraged demonstrators to get tested.

Dear students,

this semester—the toughest in our college’s history—is coming to an end. I’d like to thank you for your patience, resilience, and perseverance as our course suddenly went online. It’s hard for me to understand your multiple challenges as a student during these hard times. However, I encourage you to continue your education at CUNY until you graduate. A solid college education is still the best tool to combat economic uncertainty.

—Prof.

For a combination of factors, NYC will have a tougher road to recovery than other cities.

**Final Reflection Assignment**

In this semester, we have analyzed illness stories based on Arthur Frank’s narrative types. Can we also connect Frank’s narratives to our lived experiences of these unprecedented times? Can we capture our complicated experiences, both positive and negative, by writing our own restitution, chaos, and/or quest narratives?
The Quest for Meaning and Community

People tell quest stories when they say that despite all the suffering, they can appreciate what their disease has brought to their lives. More important, people who have experienced some self-transformation through illness want to share this with others. — Arthur W. Frank, “Illness and Narrative”

On June 15, a week after NYC’s Phase 1 reopening, I ventured out of the house for the first time. Since late March, a week after the lockdown, I had only stepped outside briefly to take the garbage out or to pick up deliveries. That sunny morning, I walked out to the garage, started the car I had not used for three months, and cracked a joke to my daughter sitting at the back, “Hopefully I still remember how to drive.” My mission was to take her to her high school to return her textbooks. As we were getting closer to the school she had been attending online, she recognized her principal, together with a few volunteers, on the curbside. With masks on, they were retrieving books from the parents’ car trunks and at the same time putting in the PTA’s graduation gift. One car at a time. “I haven’t seen the principal work so hard before,” commented my daughter.

After returning the books, I pulled up to the school gate and saw a few seniors taking pictures in front of the “Congratulations! Class of 2020” banner the principal had encouraged graduates and their families to come and enjoy. Making sure there was enough social distance, we too stepped out of our car, pulled down our masks, and snapped a few selfies. I sent them to my WhatsApp groups and wrote: This is my daughter’s alternative commencement!

We had a few more firsts later that morning. We bought food for the first time from the supermarket that suddenly closed in late March when the coronavirus cases exploded. We drove along 86th Street, the neighborhood hub we had long missed. I almost had tears in my eyes when we found our favorite shops and restaurants were now open, having survived the lockdown although, sadly, there were some closed storefronts here and there. A banner hung proudly outside a pizzeria proclaiming, “We support our community and we will help you in these difficult times. We will deliver to your home. Stay home and be safe.” After stocking up on Kit Kats and Pockys from the supermarket, we did not need anything more.

10 Frank, “Illness and Narrative” 86.
from the eateries. Still, we parked in front of the cafe we used to chat over a cup of roasted oolong. “Let’s call them and order drinks to go.”

What we saw and what we bought on this short trip was both familiar and strange. It was the same neighborhoods with the same people, the same stores, the same streets (though noticeably less crowded), the same fruits, veggies, and meat, and the same sugary snacks! But all these people and things became strangely dear to our hearts—simply more cherished and more loved! The community we used to take for granted, the everyday and otherwise unnoticeable things seem to take on significance; we find meaning in them after suffering the darkest days of the pandemic.

Looking back at their reflections, I find that students also rediscover meaning in things they used to take for granted. A student, for instance, writes there were days when she was engulfed by nothing but negative thoughts and it was not until she saw the beautiful family pictures that she regained the sense of hope that everything will be fine because she is blessed with her family’s love. She compares this turning point to Arthur Frank’s quest narrative in which she meets the challenges head on and uses the occasion to rekindle her love for her family. But this is not merely a personal transformation. The student also calls on the public to change their behaviors for the greater good, appealing to everyone to take precautions so that we can stop the spread.

Other students quest for a sense of community when they are in quarantine. One admits that he has never been a social person and sometimes even prefers to be alone, but not during the lockdown. He now really wants “to be in a community like before” because “I’ve never felt so alone and depressed in my entire life.” Fortunately, he found a new way to socialize with his friends in a video game called Animal Crossing:

[This] is a social simulation game in which a player can build his own island and travel to a friend’s island to meet each other just like in the real world. That makes the game perfectly mesh with my isolation life. A group of friends and I can meet each other every day and have lots of fun just like before. We didn’t feel alone anymore, we didn’t live on an isolated island any longer. Strangely, we are connected more than ever during the lockdown even though we can’t see each other.

Through gaming, this student learns an important lesson. Just like the
islands in Animal Crossing, all the countries should work together, rather than blame each other, while the coronavirus is spreading. Some nations like China made terrible mistakes, but no country is better than the other. “What we should keep in mind is we should turn against the virus, not each other,” argues the student. “The only way to win the virus war” is by all peoples setting aside their differences and standing together to fight the pandemic as the common enemy.

Some students explore the connections between Arthur Frank’s conceptual framework and the pandemic. Jessica Montemayor\textsuperscript{11} argues that while Frank’s restitution, chaos, and quest narratives are helpful in understanding the individual’s illness experiences, they cannot fully explain the pandemic experiences because COVID-19 affects “the collective of people.” Some coronavirus patients have recovered and experienced the restitution narrative, other fellow patients may not recover and unfortunately die. “Most experiencing chaos, some lucky enough for restitution and maybe even others gaining insight in life, making a quest narrative.” In light of the coexistence of these different outcomes, Jessica proposes the pandemic narrative, one that “would better describe how a rampant widespread illness can affect a huge population, indicating the variety of effects it has on the individuals, as well as the broad spectrum of experiences and storylines that can occur within it.” Like Jessica, another student also connects Frank’s theory to the pandemic, but he focuses on the social aspects. He observes that the crisis is aggravating the problems faced by minority and immigrant communities—social marginalization, mental health issues, and limited access to health care. Although all this sounds like chaos, COVID-19 “actually gives valuable insight into how we can change things for the better in the future.” The student believes that the pandemic has occasioned more of a quest for change than a chaos narrative without resolution.

Regardless of what pandemic narratives we experience—restitution, chaos, or quest, we are all wounded storytellers, extending from our isolated selves to our families, the community, the city, the country, and the world. We tell stories to shed light on our wounds and bring hope and love to all our interconnections that need mending and reimagining. These stories call for compassionate ears so that we can understand one another’s suffering in the pandemic on an epic scale. So, let us sit down and hear one another out.

\textsuperscript{11}This student donated her assignments with her name included to the LaGuardia and Wagner Archives; other students donated theirs anonymously.
Note on Sources

This is a creative nonfiction narrative. The nonfiction part draws on a wide array of sources to reconstruct the epidemic outbreak in NYC. These sources include but are not limited to student assignments (donated to the LaGuardia and Wagner Archives), student correspondence (emails and phone conversations), college correspondence (emails, websites, and social media), news, governmental information and announcements, and social media.

The creative part is where I departed from the scholarly citation requirements and took the artistic license to adapt, excerpt from, add to, reword, summarize, and combine those source materials in order to create my own worldview of the pandemic. For the unpublished sources, identifying information such as names, places, and other details is withheld and/or changed for identity protection. I cited a few published sources because of their theoretical and medical importance. Any errors in this narrative are my own.


Acknowledgements

My students; LaGuardia Community College colleagues; the reviewers.

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