Access
Oral History Interview with Danielle Anderson
Conducted by Hailey Briseno on August 3, 2021

Hailey Briseno [00:00:01] All right. Today is August 3rd, 2021, and my name is Hailey Briseno. I am interviewing Danielle Anderson remotely via video conference. This interview is being conducted as a part of a project organized by the National Humanities Center in conjunction with the University of Washington. Our goal is to collect, preserve and share the stories and experiences of health care workers during the COVID-19 pandemic. Danielle, thank you so much for taking time out of your evening to talk. For starters, I thought I would just ask – just tell me a little bit about yourself and what you do professionally.

Danielle Anderson [00:00:36] Well, I've been at Unify now for seven years. I'm a medical assistant and I run the refugee health program there. I'm also a vaccine coordinator for the clinic or at least one of the vaccine coordinators. So, I kind of have my hands in a little bit of everything around there.

Hailey Briseno [00:00:58] That's awesome, how did you come to manage the refugee program and the vaccine program at Unify?

Danielle Anderson [00:01:06] I kind of just wanted to do anything and everything that I could do to get the experience, to have the know how, you know, in hopes someday I can work on furthering my education and stuff. The more I learn now, the easier it's going to be later, you know, so, any time opportunities come up, I jump at them because it's going to make my life easier later.

Hailey Briseno [00:01:31] Yeah, absolutely. How long have you been in your current role?

Danielle Anderson [00:01:37] Gosh, I want to say I've done refugees now for probably four years. It was ran by a couple of other people, and they left and then one of the nurses that works there actually used to be in the program with me. And then, well, when Trump got elected, they had to cut the funding and so one of us got to stay and one of us had to go. So, it just kind of – it stuck.

Hailey Briseno [00:02:15] Yeah. Well, and then the other part of your job, the vaccines, I can only imagine what a difference before and after with the COVID pandemic, what that particular role has looked like. Can you explain that a little bit more? What your job was like before and what it looks like now?

Danielle Anderson [00:02:33] You know, basically before it was all childhood immunizations and refugee immunizations and just trying to make sure that everybody is caught up and needs what they have, making sure that errors aren't made and if they are made, then why and how can we fix it or whatnot? And then now, you know, adding the COVID vaccines in, it hasn't really made anything too much harder, I mean, it's just more stuff to count. We've kind of kept it at bay to where there's not a lot of people doing the vaccines, not because they're not trustworthy, it's just easier to have one or two people that mostly do it. But it's not any crazier now than when flu season starts.

Hailey Briseno [00:03:30] Sure. Sure. How has it been coordinating the vaccine program when the vaccines first came out? You know, you had Pfizer and Moderna

and then the Johnson and Johnson – how has it been with those waves of every vaccine becoming available? Did you have clinics or was it always kind of just – Come in whenever.

Danielle Anderson [00:03:51] So, basically, as far as when this first started, we had – we only got Moderna to start, just because in the beginning, the Pfizer freezer requirements were so stringent, we didn't have capacity or storage in order to keep them. Johnson and Johnson, we did end up getting a little bit after the Moderna, but it was traditionally just that in the beginning. You know, we did have vaccine clinics, and they were amazing. I think – I want to say maybe January through mid-April, I was working 50 plus hours a week doing the vaccine clinics, you know. We had waitlists that were thousands of people long, you know, and everybody was scrambling trying to get in. And, you know, obviously as more people are getting vaccinated, it's died down. So, it's kind of at a more manageable rate right now.

Hailey Briseno [00:04:48] Mm-hmm.

Danielle Anderson [00:04:50] But yeah, we got to days – there were days we did over two hundred in a day.

Hailey Briseno [00:04:56] Wow, that's wild. Well, it just shows you what the need was and the interest was. Were you surprised at all by your communities' reaction to the vaccine? For better or for worse?

Danielle Anderson [00:05:11] Yes, I, you know, after going through this last year and there being so many unknowns and just, you know, nobody knew anything, you know, and as we learn things and they would come in for these vaccines, it was actually really, really heartwarming and rewarding to be able to vaccinate these people. I mean, we had people come in and they were thanking us and they were crying. You know, I – my granddaughter was born and I haven't seen her, and she's six months old now and I get to go see her soon. And, you know, I lost my family to COVID. I'm the only one left. And, you know, I think we all put on a little weight, too, because they literally, I mean, we were getting cupcakes and cookies and candies and, you know, people were gifting money and trying to do – I mean, it was just amazing how grateful everybody was to finally have this answer. You know, and then there were times that people came in and they were really hesitant. I mean, they were still there, but they were scared to death to get the vaccine, you know? So, it's a matter of educating them the correct way and, you know, letting them know that, you know, Hey, we did this ourselves and we're okay. So, this is the real facts, not the stuff you read on Facebook or whatever media, you know. And a lot of people really just calm down after that.

Hailey Briseno [00:06:51] Mm hmm. You kind of used the word rewarding in talking about being there and doing the mass vaccine clinics and hearing the stories of people as they come in to get vaccinated, some of them very emotional. Describe a little bit more what that was like, being a part of something that big within Spokane.

Danielle Anderson [00:07:11] You know, I feel blessed to have been a part of it, and it kind of in a way – I don't know how other people have felt, but for me, it kind of

restored faith in humanity because over this last year or so, people have been so angry and hateful and mean, you know, and just so adamant that they are going to do this and they aren't going to do that. You know, to have all of that flipped around and to have people coming together and showing gratitude for things again. It kind of restored a little bit of faith, you know, because everything had been so negative for so long.

Hailey Briseno [00:07:52] It's almost like a silver lining amidst everything else in the middle of the storm, I guess.

Danielle Anderson [00:07:58] Yeah, exactly.

Hailey Briseno [00:08:01] What are your thoughts on – a lot of people have referred to health care workers during the pandemic as health care heroes, and some people kind of have mixed thoughts about that. I'm curious how you feel when you hear health care workers like yourself being referred to as the health care heroes. How does that resonate with you?

Danielle Anderson [00:08:19] You know, I don't really – I don't really consider it as being a hero. I mean, it kind of goes both ways. Because, yeah, I'm in a clinic, and yes, we're testing people and stuff, but if anybody is an actual real hero, it's the people that are right in the trenches at the hospitals next to the ICU beds with people on ventilators and ECMO [Extracorporeal Membrane Oxygenation]. And you know, those are the people that are hard core in the trenches. It's not to say that we weren't at risk at all because we were, you know. Several people got it throughout the course and you don't know if you got it from the grocery store or from work or, you know, – you can never fully trace it. But I just – I kind of feel like when you go into the medical field, you never know what you're going to get into and it's kind of what you sign up for, you know? Knowing that, I mean, stuff like that can happen, it does happen. I mean, historically it's happened several times. So, I don't know. I'm kind of mixed on it, I guess.

Hailey Briseno [00:09:33] Mhm. Yeah. What was it like in the beginning for you? You know, we always hear the phrases new normal or uncertainty, or – how would you describe those early days when all of this kind of hit and we were just hearing the news of coronavirus?

Danielle Anderson [00:09:51] You know, when all this first hit, it was really frightening, because nobody knew really anything, and there was so many mixed messages out there and everybody was panicked. And when you panic and have such a heightened anxiety, I feel that more mistakes can be made because you're so, you know, so careful about things and not knowing is the hard part because you can't protect yourself if you don't know how, you know. And then you have to throw in the aspect of PPE [Personal Protective Equirement] shortages, you know. I remember I wore the same – it was a painter's jumpsuit with a hood. And I must have worn that for a good two months or so, you know, and I completely decontaminated and sprayed down between every patient, you know, new masks, new everything, because you just didn't know. And then then family becomes involved, too, you know, you come home at night and are you bringing it home to

your kids? My mother, she had horrible health issues, and I remember, I swabbed the first positive case at our clinic and I – everybody was like, You got the first positive, you know, that one was positive, oh my gosh. And you know, on the inside, I was falling apart. But on the outside, I kept it together because that's what you do. You know, and so, I remember that day and everybody – and I was like, You know, it's not a – I didn't win a prize, you know, I didn't hit the lottery. I'm scared to death now because did I wear my PPE correctly? Did I take it off correctly? Did I accidentally rub my eye? Did I do anything? And so, all day long, you know, I just kind of chucked it down because I had a job. But then on my way home, I fell apart, you know, because now I have to come home and face my kids and my mom. And, you know, I got home and I basically yelled in the door, I was like, Everybody, stay away from me. Don't come near me. Don't touch me. I'm heading to my room. I'm taking a shower. Don't come near me until I come out, you know? And yeah, it was pretty scary. And I'm sure a lot of people have that reaction too.

Hailey Briseno [00:12:33] Yeah, absolutely. There's just – kind of what you're talking about, just having this conflict between being at work and, you know, fighting the good fight and doing the swabs and the testing and everything bad, but then coming home and feeling really conflicted at the same time.

Danielle Anderson [00:12:51] No, it was really difficult, you know, and there was a lot of conflict because I needed to be there to do my job, because that's what I signed up for. And you know, you're there to help people. And if you let your your conflicted mind and your thoughts get in the way too much, you're not there to help people. But yet, you also have a duty to protect the people you love at home, as well. And you know, it's a very fine line, you know?

Hailey Briseno [00:13:23] Did you or anyone you know suffer from COVID? Did anyone around you get sick?

Danielle Anderson [00:13:34] Nobody in my household has got it as of yet. I mean, we're all fully vaccinated, but you never know now. And I know of some of my friends that have gotten it and stuff, but I have been, you know, very – extremely lucky. When this all started, I started donating blood regularly because I knew they do antibody testing. And that way, I could at least know if I had had it and not known, you know? And I came back negative for every test until after I was vaccinated, so that I was, you know – it made me happy. It's kind of reassuring. Yeah. You know, Hey you are doing the right things and you're staying safe, so.

Hailey Briseno [00:14:31] That's awesome. But yeah, it's frightening. It really is.

Danielle Anderson [00:14:32] Right.

Hailey Briseno [00:14:33] What was a typical day at work for you before COVID-19 and then since then? And you can kind of comment on both of your roles, the refugee program coordinator and then the vaccine program coordinator as well.

Danielle Anderson [00:14:46] Yeah. So, as far as my roles go, vaccine coordinator, you know, you're just kind of there to help people out when they have questions

about what vaccines to give to who or why would you do this, but not this. It's a monthly count, you know, to make sure that everything is accounted for and given to the right people for the right times. And, you know, so, it's not really that time consuming most of the time. And then my role as refugee person has kind of – it kind of ties in with the vaccines, really, because when they – when the refugees first arrive into the country, I do their health screening and then we work on their vaccines over the course of a year. So, being the vaccine coordinator, plus vaccinating people, I felt like a little vaccine clinic every other Monday, and I call it my refugee vaccine day. And so, you know, it kind of ended up being hand in hand. I just kind of basically have always, you know, especially in the last few years, I just help out wherever I'm needed. We went from one hundred and twenty refugees a month down to maybe four or five. So, there was a huge decline. That left me a lot of time to work on other projects or help out just with whatever.

Hailey Briseno [00:16:16] What kind of other projects were you pulled into?

Danielle Anderson [00:16:20] You know, once again, it's usually more vaccine stuff. Pulling all the reports, making sure that we're meeting all of our measures with kids being vaccinated on time and correctly, trying to get a hold of people and make sure that they're coming in for their, well-child checks. Just, you know, trying to make sure that everybody is getting the care that they need and little projects for the office people – just helping them with other reports and stuff. I always manage to find stuff to keep busy. I do all the ordering of the medications for the clinic, I do all the ordering of all the supplies and take care of all the inventory, you know? So, I do – I have quite a few hats, so I can always find something to do.

Hailey Briseno [00:17:15] Sounds like they keep you busy.

Danielle Anderson [00:17:16] Yeah, I like to be busy, though, makes the time go by.

Hailey Briseno [00:17:20] Yeah, absolutely. How has it been doing vaccine education with the public in general and then with the refugee population? I know with the refugees, a lot of the times, I can imagine things get lost in translation with the interpreter services and everything else, delivering care with that extra challenge there.

Danielle Anderson [00:17:49] Yeah, it is, you know, some nationalities, some cultures are a lot easier to vaccinate than others. There's a lot of misconceptions. There's a lot of myths, and sometimes it's really hard to keep a straight face when you hear some of these things that they say, you know, because I just wonder where it came from. You have some cultures where their governments experiment on them, so they don't trust the vaccines and they don't trust this, because, you know, they've never been told the truth about things. So, why should they believe you now? You know? And I have done my best. It's still kind of hard to get all the information I need. But I've done my best to get as much vaccine information in the different languages, so, you know, for example, I'm so not trying to single anybody out, but it's a good example because it's a really big battle that I have. A lot of the Slavic community are very hesitant on vaccines. So, I have tried, I really, really try to work with them, because I don't really care if you get your vaccines according to the schedule. If

you're comfortable coming in twice a month for one vaccine, by the time a year is up, you're going to be fully vaccinated. And that is the end goal anyways – is to have all your vaccines done. So, if you don't want to get seven today, because you think that it's going to make you terribly ill or you're going to be infertile or whatever else, you know, then, absolutely, you know, I will totally work with people. But education is a huge one, but you have to build that rapport first. If you don't have a rapport with those patients, they're not going to trust you and they're not going to do it. You know, and so that is something you really have to work hard on.

Hailey Briseno [00:19:50] Yeah, absolutely. I can only imagine how adaptable you have to be to meet everybody where they're at, coming in from different cultures and backgrounds and experiences. And, yeah, how challenging that must be. Did your relationship with your coworkers and your health care system change as a result of COVID, and if so, how?

Danielle Anderson [00:20:20] Yeah, I do think that things have changed quite a bit, some for the good, some for the bad. I do know that in the beginning, everybody was in survival mode. You know, it was, Let's just get through this hour, this day, this week and. And you really had to learn to lean on each other and trust each other, because if one person screws up, we're all sick, you know, working in such close quarters like that. So, you really have to work on finding ways to be constructive about, you know, helping each other without being too critical or, you know, making people feel like they're picked on. But I think that all in all, it really brought us a lot more together as a team. We've always been pretty close-knit there anyways, but I really think that it's changed our outlook on things and that we have learned to appreciate things and people that we didn't necessarily appreciate before that we might have found as an annoyance, you know? And I just think that we've kind of gotten a little bit closer together in that aspect.

Hailey Briseno [00:21:43] Yeah, that's amazing. I feel like – I've talked to a couple of other people at the clinic who, at one point in time, might have been sent home or not sent home. How did that dynamic change your workplace during that time? And then maybe when people returned to the office? What was that like?

Danielle Anderson [00:21:59] Yeah. You know, it's – it can make things difficult, you know, because, especially in the beginning, if somebody sneezed, Nope, you're going home to quarantine, you know? Okay, so, five people sneezed and now we're shorthanded and we only have, you know, two assistants to work for five doctors. So, it was a – it had a huge impact in the beginning. And with everybody being in survival mode, it was kind of like, You know what, let's just do this. I don't care how many people short we are, we will make it work. We'll figure it out. And it just – you just make it work. I mean, it's kind of – you get curveballs and you make them work, you know, there's not much else that you can do about it. You know, and then when somebody does come back positive for COVID, then, because we are such a close-knit team, it's, you know, Oh my gosh, are you going to be okay? This one has this condition and, you know, I hope that they're not going to be affected long term by this. And, you know, they're so careful, how in the heck did this happen? And you know, there's just so many different facets – you know, you just roll with it, that's about all you can do.

Hailey Briseno [00:23:27] Yeah, I think survival mode is a good way of describing those early days. What was it like being the health care worker and being in survival mode, or not having all the information yourself and working with patients that were frightened or fearful or scared? What was that dynamic like?

Danielle Anderson [00:23:49] There were days that it could be really emotionally draining. You know, because you only have so much you can give. And if you're talking down everybody off the ledge all day long, you know, it's very draining. But on that, there was also the flip side of the coin. How could I have COVID? I've been careful, you know? And I've done this and I've done this and I've done this. Well, it just took that one time that you forgot and you slipped up or, you know, patients that come in and they don't believe COVID is real, therefore, they don't have it. And they're not going to quarantine and they're not going to do this, you know, it's really, really hard to educate somebody that refuses to hear you. So, when that happens, you have to do your best and you kind of just have to hope for the best.

Hailey Briseno [00:24:46] There's just so many different challenging angles of the whole pandemic. There's just so many different ways to look at it and different challenges that have come about. Are there things that you've noticed within yourself that you had to get better at? Maybe setting boundaries or, you know, fighting burnout? Are there things that you've kind of noticed that you've grown or changed in certain ways over the last year and a half?

Danielle Anderson [00:25:13] I think in the last year and a half. I have – I've done a lot of, you know – I've been to the point of burnout and exhaustion, but there's always something in you. You just keep going, you know? The main thing that I tried to remind myself of is that there's always somebody out there that has it worse than you. That has a harder job and is doing something, you know, more dangerous than you're doing and they're more at risk. You kind of have to remember that just to be able to stay humble and just to keep on going because, you know, you run out of people to take care of people and then what do you do? And you just have to take more time to yourself, you know? Spend quiet time, just kind of veg out when you can, and just do nothing, you know? It changed a lot of things, and it's a matter of, you know, live life today, because it could be gone tomorrow and we don't know what it's going to be like and it really, to me anyways, it really drove that part home, because one little tiny diagnosis can change everything, and you don't know – and you didn't know at the time how it's going to affect you. Are you going to get a mild case of it? Or are you going to end up on a ventilator tomorrow? So, you know, it was just kind of a matter of a balancing act.

Hailey Briseno [00:26:58] Is there any advice that you would give yourself or another health care worker in the shoes that you were in and have been for the last year and a half? Any advice that you'd give someone as they work through the pandemic, either as a health care worker or even just as someone who's been affected by COVID in some way?

Danielle Anderson [00:27:19] You know, the the best piece of advice that I can probably think about giving is, you have to make sure to take care of yourself first. If

you're not, you know, on top of your game, then you're not going to be able to help the other people. And that you don't – don't suffer alone. There's people that have seen absolutely horrific things throughout this pandemic and, you know, their lives are forever changed, as well as the patients that have lost their lives and the family members and everything else. But, you know, when we're there taking care of these patients and, you know, even at a clinical level, when you get a phone call or you get the fact across that they need a death certificate signed and they died from COVID or whatever, you know, however it comes along. You have to take care of yourself. You have to talk to somebody and you know, you have to be okay. Because if you're not okay, then you're not going to be of any use to anybody else. I think that a lot of people in medicine, you know, we're Type-A personalities and we got this handled and we can do it and we're just going to keep plugging along. But we forget about ourselves sometimes, I think.

Hailey Briseno [00:28:47] I think there is something to that, that the personalities that go into health care or really any helping profession, there's kind of that element of putting yourself last or putting others first, and it's almost a new way of thinking to kind of reverse that, even just for fighting burnout. And yeah, I mean, it's a crazy new time that we've been in. We kind of talked about this a little bit earlier with the vaccination clinics, but I'm interested – do you have any stories from patients and their families or even coworkers and their families that kind of stand out to you when you think about really meaningful or really impactful stories over the last year and a half? Of things people have gone through and experienced, maybe things that just kind of hit close to home for you?

Danielle Anderson [00:29:34] Yeah. So, there are two that always will probably be at the forefront of my mind. We had a married couple come in, and the husband and wife and actually their adult children had all gotten COVID. The wife and the children were only affected very mildly, and they were okay. And the husband spent six months in the hospital. And, you know, so, finding somebody that actually suffered that hard and that long and was still upright and alive and talking, you know, we kind of took the opportunity to kind of drill him a little bit. And he's like, Yeah, my entire life is affected now. You know, just walking down the stairs to get to the clinic to be vaccinated, I'm tired. He said, I'll probably have to go home and take a nap for the rest of the day, you know, but I'm here and I'm alive. And you know, it's just – you stop because so many things are taken for granted. And then here's this guy, he's got so many problems, you know, he was talking about his leg cramps and blood clots and that his lungs will probably never be at the capacity that they were. And that he'll probably never work again. It was hard to hear that. But at the same time, you know, it's nice to hear that somebody actually pulled through it. That was that bad off. And, you know, it was just interesting. The wife – it barely affected her, yet they are together in bed every night, and then he almost died from it. It's just – it's such an interesting dynamic that, you know – and hearing them talk about it was just – we took quite a bit of time and actually talked to them about it. And the other one that really hit the closest home to me is, I had a gentleman come in – and it was after the vaccine clinic had started dying down a little bit. So, a lot of times it was just me doing the vaccines, but we were still doing them in the clinic setting downstairs. I had a gentleman come in and I started talking to him and he just – he really looked sad. And I asked how his day was going or whatnot, just small talk, and he just started

bawling, you know? He had lost his wife the week before he came in for the vaccine, and he's like, I didn't even know if I was going to come today. You know, he said, I don't even know how to get up in the morning anymore. And he you fell apart, you know? And that was – it was really hard to hear, you know, because I can only imagine the loss. But then I look back and in the middle of all this pandemic last September is when my mom passed away, you know? And so, I had all of my emotions there, as well. And you know, I was very blessed that we were completely dead at that time. And he ended up spending probably forty five minutes just sitting in there and talking to me, you know, trying to make him at least feel better, at least for that moment, you know, because he – he's like, We didn't – we just found out she was sick three weeks ago, you know, and it wasn't COVID related, it was some other disease process. But they chose not to tell their adult children, because she didn't want to waste time with them crying over her. And he's like, And I had to tell these guys this and you know, he's just going on and on and – it really broke my heart, you know? And obviously, it hit close to home because after suffering my own loss, I was just I was really grateful I had that extra time to be able to sit and talk to him because I could tell that at that time he needed it.

Hailey Briseno [00:34:08] Wow, that's a really touching, really beautiful story. I mean, I can only imagine the longing for that kind of human connection, despite all of the social distancing and masking everything, you really had a moment of true human connection with someone who was going through something very similar to what you had just gone through. And the other example – it sounds like the recovery was incredibly inspiring. I can't imagine what it would be like to leave the hospital after six months.

Danielle Anderson [00:34:41] Right?

Hailey Briseno [00:34:42] That's such a long time. And it's such an uphill battle.

Danielle Anderson [00:34:45] It is.

Danielle Anderson [00:34:48] Wow. Do you remember the first activity or the first event you were involved with when this first hit? The first event that was affected or changed because of the pandemic?

Danielle Anderson [00:35:07] You know, you had kind of started hearing about cases, it was around January 2020. And then a couple of days before they officially closed down everything here in town, you know, I had been out all weekend, because we didn't have masks and it hadn't really hit us here yet, even though we were hearing about it. We weren't necessarily seeing it or testing for it, you know? So, I was out having the time of my life. I went out with my buddies and we went to dinner and we did all this stuff that we would normally do. And then it hit, and everything just kind of came to a halt. It was really, really hard to just have all of that happen at once, you know, and then you have the people that, Well, I'm not doing this, you know, and I refuse this. It divided a lot of people, it divided a lot of friendships. It destroyed friendships, you know, family relationships, even, because it's just, it's crazy, you know, but I was supposed to go – after this all hit, I still had plane tickets. I was supposed to go to Washington, D.C. [District of Columbia] last

October. I was actually going over there for a catfish convention, for freshwater catfish or whatever. And, you know, it was something I was really looking forward to. And it got canceled. It was the first time in my life I was actually going to do something strictly for me. And I was pretty devastated that it was canceled, even though I was going alone. So, I mean, I remember I lost concerts. There's all kinds of things. And it was hard to adjust, for sure.

Hailey Briseno [00:37:07] I can only imagine. I mean, it sounds like a really big trip, and you're looking forward to it. Were you able to ever, I mean, was there any kind of a rescheduling of that event?

Danielle Anderson [00:37:19] No, and it was supposed to be the last year for the event, too, because the people that ran it were going to, you know, stop doing it just because it was such a big project to put together. So, I don't know now if they're going to come back and do another one or if they're just going to be done or what.

Hailey Briseno [00:37:36] What are your thoughts on this phrase or this idea of the new normal? You know, masking and distancing and quarantine and all of that? And then how has that kind of changed as we have continued to kind of open up our cities and our states and kind of return to maybe a little bit more of a level of normalcy?

Hailey Briseno [00:37:56] Yeah. You know, normal always changes, anyways. Because there's – I really don't like the word normal, because there really isn't a normal for anything. Everything constantly changes and evolves and, you know, as far as wearing masks and being in public and everything, you know? It's more of a matter of – and this is this is solely my take, but it's more of a matter of – I'm protecting other people. I can't give a crap if they're protecting me, but I care enough about people in general that I want to protect other people, you know? And last weekend, I – even though I'm fully vaccinated, I still wore a mask because things are going crazy again, you know, it was one hundred and two degrees, I went to the mall with my daughter. I was sweating, I was miserable, because the mall was – I mean, it was so hot outside, even the mall was hot. But you just do it, you just kind of suck it up and do it, you know? And I've heard it explained, as you know, same as the no shirts, no shoes, no service thing. You know, people adapted to that. I don't understand why it's a huge deal. You know? It's uncomfortable. It's a pain in the butt. But you get to hide your facial expressions, you know you can – there's lots of things that you can do behind that mask that people don't see, you know, so you can – it's just another act of selflessness that you can do. And I just – I've never got what the big idea was, you know?

Hailey Briseno [00:39:49] Yeah, absolutely. What do you think would be the biggest impact of the pandemic for you personally, in the long term sense, in five or ten years from now?

Hailey Briseno [00:40:02] You know, I'm hoping that five or ten years from now that this is all cleaned up and gone in a way, we've been able to eradicate it, you know, either herd immunity or people catching it and, you know, whatever. But in five, ten years, what's going to be the next pandemic? What's coming down the pike that we

haven't seen yet? Because there's always going to be something, there's always – and so hopefully that if any impact at all, we were able to learn, you know, what we did, right, what we did wrong. How could we have changed this? And, you know, maybe we need to start looking at a new way of making vaccines and making medications that is more up to date with our technologies, instead of just relying on, you know, the stuff we used to use. Yes, it works fine. But as far as everything else, you know, we're getting all these superbugs and all of these resistant strains of everything coming around. Maybe this is something to open our eyes to realize, Hey, we need to really work on this or we're going to have a mess on our hands and it's going to keep happening over and over. So, I hope that out of all of this, that we can make that change for the better. And, you know, kind of maybe be on top of things. So, when this does occur again, which it will, with something, you know, we had H1N1 [a subtype of the influenza A virus], we had smallpox, we had polio, we had all of them, you know, so it'll happen again. I just – I hope that we're more prepared.

Hailey Briseno [00:41:40] Absolutely. Would you like to share any particular hopes or fears about the future as we go forward in dealing with COVID-19?

Hailey Briseno [00:41:53] The biggest fear that I have right now, and I think that a lot of people feel this way too, is the fact that there is so much good information out there, but people don't dig for information. They see a Facebook post, so they believe it's true or, you know, they heard it on on a news site, but they don't get on to – you know, obviously most people aren't going to read the scholarly articles and and get on, you know, Google Scholar and do – read the research studies and all that. But to truly be educated and informed, that's kind of what you have to do. You know, and even then, you have to be careful, because there's biases out there, even in the medical world. But I think that people just take a little tiny grain of information and they run with it or they don't hear the whole sentence because they don't want to. So, they just pick out the things that apply or don't apply, and then it gets twisted into something that it's absolutely not. You know, for example, the other day, well, it was Monday, and I brought a lady back to vaccinate her and she said, Is it really true? Have you heard anything, that people are dying two years after they get the COVID shot? And I said, That's one that I haven't heard yet. I'll have to write that one down because I haven't heard that one yet. You know, and she was making light of it as well. So, it was – you know, she's like, I don't understand why people believe this stuff. And she was blaming it on her religion and her culture. But I remember, I went back into the nursing area and I was like, You guys, I just heard a new one. Have you heard this one before? Because it was like, Okay, well, we've heard a new one. Just not necessarily from COVID vaccine, but, you know, I don't want my kid vaccinated because it makes kids obese. I've heard all kinds of ridiculous things, you know, and I'm like, Well, gosh, maybe that's what's wrong with me, because I was vaccinated. But it's really – it's comical the stuff that people hear and run with. You know, even with the flu shot. It's got dog DNA in it, you know? I was – are we going to start barking? Do we really have dog DNA in there, you know? And it's not – it's just stuff that people hear and at some point it might have had a grain of truth to it. But if you do the research, you'll find out that it failed and they didn't use it or, you know, in the beginning it had this, and now they don't use that anymore. Just people only hear what they want to hear.

Hailey Briseno [00:45:06] How has it been providing education to individuals in the community that are kind of more vaccine hesitant? How has it been? Have you had successful conversations or conversations where you walked away like, Hey, maybe I disagree, but I really understand their viewpoint.

Hailey Briseno [00:45:22] Yeah. You know, out of all the vaccines around, I think this one has been one of the hardest sells. People are usually either really for it or they're really against it. The people that are on the fence, you can get usually, you know, not – I don't want to say, convinced. We're not forcing you, you know, that you have to have it. But if you give them a valid argument and you actually know what you're talking about, then I feel like it's more – they're more apt to actually go with it. People that are so far south on that, on the anti-vax chain, I don't really think there's anything you can do to change their minds, because they're kind of in that mindset. But I had another patient yesterday, and the receptionist came and got me and they're like, You might want to grab her. She's out in the waiting room, crying. And I was like, Okay. And they're like, She's just really anxious. And so I went and I made sure that I was the one that grabbed her. And she was shaking and crying, and I was like, So, what makes you so afraid? And she's like, I've just heard all the bad things, and you know, my family's had it and my kids have had it, and they're still fine. She's like, I'm just scared. I'm scared. I don't like shots anyways. And it was a matter of, you know what? I've had this vaccine and I'm still standing here talking to you. I had a sore arm, that's all that happened to me. You know, yeah, somebody might get a fever from it or they might get the body aches, but it's 24 hours versus a ventilator in a hospital. And I was like, If we didn't feel that they're safe, we definitely wouldn't start giving them to kids. And then I even kind of let her in on my viewpoints, because until I started doing the research on this, I kind of felt like, you know, Wow, this is new and I'm scared of it too, because I hadn't done my research yet. And then I started really thinking about it and I was like, For me, I can't give something – administer something to somebody else that I am not willing to do myself. You know, and I wasn't an anti-vaxxer by any means. I was just – I was a little hesitant, you know, it's a scary unknown. But then, I can't sit there and sit in a room with a patient that's crying and shaking and say, Oh yeah, you're going to be fine, even though I'm not vaccinated. So, I shared that with her, I shared my hesitancy, and I think it helps her kind of relate a little bit and, you know, we were talking and everything and she she's like, You're done? And I was like, Yeah, that was it. And she just, you know, she was totally fine. After that, she stopped crying and she just took a nice deep breath and she was like, Oh my God, I can't believe I just worked myself up for this, you know? And I think being able to relate to them and just talk them off the ledge, you know, a lot of times will help them.

Hailey Briseno [00:48:44] Yeah. Absolutely. Throughout the pandemic, we've seen a lot of disparity in terms of minorities and their health outcomes related to COVID, and I'm curious with your work with refugees, if you've kind of seen that play out or what your take is on that?

Hailey Briseno [00:49:03] You know, I've seen some outbreaks in different communities throughout this whole thing. Because a lot of other cultures, even after they come here, you know, there's two or three or four or five families sometimes in one household, because they don't need to have all the luxuries that we're used to

here. They're coming from even less, so if all five families get to stay in a home, they're grateful. Well, one person in that group gets sick. You have 75 people that are sick, because they went over to their friend's house, who also lives with five families, you know? And it allowed it to spread like wildfire and because a lot of them were younger and healthier, they didn't, you know – they have that whole invincibility thing like, Yeah, it might happen to me, but I just got a cold, I got a cough, I was fine. You know, what's the big deal. And so, to really be able to drive home the concept of quarantine and staying away from people and and not gathering in groups and stuff is really hard for them to comprehend. And then when they do get sick, they don't want to come for help. Most of them had never had access to health care as readily as we do here. So, unless they're dragging in their half dead corpse, they don't really want to come in, you know, and it's just – it's been really hard to do the educational piece with them. Because it can wipe out whole areas of people just from one person coming down with it.

Hailey Briseno [00:51:00] I think I could see too, with collectivist cultures like you're describing, its counter culture for them to – you know, I mean, if all of their culture is so collectivist, it would be really hard to socially distance and wear masks when you have five families, you know, sharing a roof or whatever that looks like. You mentioned refugee families and when they come in, just their experience is so much different. They have so much more gratefulness for having a house and having a roof over their head. Are there lessons that you've learned working with refugees and kind of seeing life through their eyes or just things that you've kind of come to appreciate more in working with that population?

Hailey Briseno [00:51:52] When I first started, I saw the refugee program and I wanted nothing to do with it. It was a train wreck. It was disorganized. It was just not something I wanted to do. And it was offered to me and I said, No, and somebody else took it, and it was offered to me. And I said, No. And then one of the nurses took it and she's like, Come on, you know, come to the dark side with me. You'd be great at it and let's do this. And, you know, she talked me into it. And we worked as an amazing team together, and it just – I see all this stuff in other cultures that we don't have anymore. You know, we've lost it. We've lost our gratefulness and our compassion and our understanding of other people. And to see that – it just blows my mind, you know. We had a family, a couple of families that I was screening. And the first family that came in, the father spoke English fairly well, and so we didn't need an interpreter. And the second family that came in, the interpreter didn't show up. And these families did not know each other back in their country or anything like that. They had actually met in the waiting room. That was the first time they talked. And the father of the first family, he said, Is there no interpreter? And I said, No, we ordered one, but it was a language we have a hard time getting. And he says, If it's okay, can I interpret for him? And I said, Yes, absolutely, if it's okay. So, you know, he talked to him and they agreed and he went and talked to his wife and told her to take the kids home and do stuff and that he would be home later. And you know, I was just – it blew me away. You're a complete stranger. You have a busy life. You're trying to put your life together, you just got here yourself. But yet, you're taking time to help this person. And he says, Ma'am, it is our job to help others on this planet. He said, This is what we are here for. If we didn't help others, we're worthless. We're nothing. And I had to – I had to get myself together before I could go in there,

because that just really, you know, we don't have that here. Everybody is out for themselves, and that just – it was really, really heartwarming, you know. And then, not that long ago, I was going through, just, you know – do I go back to school, because I've always wanted to pursue, you know – go higher in education, medicine wise. Do I pursue it? Or am I okay where I'm at right now? And I was really having a battle with that. Well, as soon as we started getting families allowed back in, we got a family and it was a Congolese family and just a great family. And when I was in there with them, you know, the wife was talking and obviously it's not culturally something that I would say or do, but I accepted it as valid for their culture. But she was talking about her youngest son and how, you know, he's had stomach problems. And so, he's been bewitched and, you know, he is sick and everything else. Instead of laughing or saying, No, you know, we can do this or we can do this, I talked to them about it and stuff. You know, and I just was very kind. Well, the lady, after I gave them their medication at the end of their visit and stuff, she takes my hands and she says, Bless you. May God be with you always. And you know, that was a very kind gesture, even though I'm not a super religious person, that was – because it's what they believe in, it meant a lot to me, you know. And the husband, you know, he's like, Most people, are very mean to us. And you have been so kind today. From the bottom of my heart, he said, I thank you. You know, and I went in my office and I was an emotional wreck, but they were kind of happy tears because it was like, Okay, this is right where I need to be. This is exactly what I need to be doing. And this is my – this is my sign. There's just so much that's – it's so rewarding. I wouldn't trade it for anything.

Hailey Briseno [00:57:02] I can imagine, you know, just the experience of being a health care worker during COVID-19 and the pandemic and not really knowing what comes next and everything else, I can see kind of the need to return to moments like that to really stay engaged with the work and the patients. Cause those are the moments you cherish and hold on to at the end of the day when it's really tough and you're burned out and life just gets really crazy. You know, not even against the backdrop of a pandemic – that only adds to it.

Danielle Anderson [00:57:38] Yeah, absolutely. For sure.

Danielle Anderson [00:57:43] Is there anything, I'm curious, was there any particular reason or any thing that kind of sparked your interest in wanting to be interviewed?

Danielle Anderson [00:57:56] You know, I just – it was kind of a chance to talk about it more and kind of give my my viewpoint. But I also like to be able to help out with whatever, whenever I can. So, I was just kind of like, Sure, why not?

Hailey Briseno [00:58:18] I think it's great, it's wonderful. Are there any other thoughts or reflections you'd like to discuss that we didn't necessarily cover?

Danielle Anderson [00:58:30] Not off the top of my head, not really. I think we covered quite a bit of ground.

Hailey Briseno [00:58:35] Yeah, we really did. Wonderful. Well, thank you so much for your time. I really appreciate it and you're doing just wonderful work. It's been really inspiring to see you in the clinic and you've got your hand in everything and fighting the good fight with health care against the backdrop of a pandemic. So, thank you so much for taking time out of your evening to talk, and yeah, I'll be excited to see where this project goes.

Danielle Anderson [00:59:02] Yeah, absolutely.