Access
Oral History Interview with Yu-Lin Amy Lee
Conducted by Megha Gupta on April 15, 2021

Megha Gupta [00:00:00] Okay. Awesome. So, today is April 15th. My name is Megha Gupta, and I'm interviewing Dr. Amy Lee remotely via video conference. This interview is being conducted as part of a project organized by the National Humanities Center in conjunction with Duke University. Our goal is to collect, preserve and share the stories and experiences of health care workers during the COVID-19 pandemic. So, Dr. Lee, if you could introduce yourself a little bit and tell me what you do professionally?

Yu-Lin Amy Lee [00:00:28] Yeah. So, my name is Yu-Lin Amy Lee. I work in primary care in internal medicine and pediatrics. I had done a MEDP residency and then I also did a fellowship in hospice and palliative care. So, I do a mix of that in the outpatient setting, as well.

Megha Gupta [00:00:49] Great. Thank you so much for being here. Can you tell me what brings you here? Why did you volunteer to be interviewed?

Yu-Lin Amy Lee [00:00:57] Yeah, I think normally I actually - if you asked me five years ago, I probably would have said no very quickly. I don't actually enjoy talking or speaking, but I think over the last few years and then really over, most notably the last year, it has been a long and difficult season from a health care standpoint, politically, racially. I think it's a roller coaster of emotions, and I think there are important stories. And also, as an Asian-American, I sometimes feel a little bit trivialized or invisible, and I do think it's important, especially now, to kind of to be bold and to speak up a little bit. And I hope that, you know, other people will do that as well because I have seen lots of mentors who have spoken up and, you know, the little ripple waves that they make, I think, are very important. And I think it's also like my job and my role to do that.

Megha Gupta [00:01:56] Thank you for sharing. I feel like you touched on a lot of really important topics, and I kind of want to almost take it back a little bit. So, could you tell me a little bit about what - you'd mentioned it's been a really difficult season. Can you tell me about, like why that is or maybe how it was before and how it is now? Like, do a little bit of a comparison.

Yu-Lin Amy Lee [00:02:23] Yeah. So, I think even prior to the pandemic, right, there were a lot of already issues going on and notably health care disparities. We've had, you know, there are very clear health care disparities, the Black and Brown population and their care and their outcomes. And, I think with COVID, these disparities have actually- that they're far more apparent and that we have not really dealt with this. And now that it's kind of at the forefront I think it's, you know, it's important to acknowledge and to work on this. And, I also think that, you know, I - from a health care standpoint - I have been incredibly lucky to work with an awesome group of doctors, nurses and other clinicians, PTOT [Physical Therapy and Occupation Therapy], our social workers. And we've really had to pivot over the last year. It was kind of almost, it almost felt overnight, the 180 changes, right? How do we, with COVID, how do we screen people? How do we reach out to people, people who don't have internet, you know? There are a lot of things that we had to deal with, and I'm extremely proud and they inspire me. You know, all of the time, and I, not only also from a health care standpoint, but just if you just turn on the news, right? We continue to have racism, whether you know, we're talking about police brutality. You know, it's really, really hard. And then, you know, over the last few weeks and months and really over the year, the attacks on Asian-Americans. And you know, I have been called the corona virus. People have said, you know, did you eat bats and you know, other things? And are you

going to give me coronavirus? And it's really hard as also a frontline worker and then to be also hit with these things. And so, I know that's kind of a little bit messy, but it's just all these things just kind of hitting you from all sides. So, it's been a long year.

Megha Gupta [00:04:42] I'm terribly sorry to hear about personal attacks of racism and then also, you know, the collective grief for the communities that have been disproportionately affected. I think there's something to be said for the fact that everyone's coming to like a racial reckoning in America at this time, and it really took a pandemic to do it or other pandemics that were happening. So, thank you for sharing. Can you tell me a little bit? So, it sounds like you've had a lot of changes in relationships with people right in the last year with from your care team to your patients to everyone, really? Can you talk a little bit about how your relationships with both established patients and new patients especially have changed during the pandemic?

Yu-Lin Amy Lee [00:05:24] Yeah. So, I'll kind of bring this back. So, I did my training in Taiwan at medical school and we often ask about, you know, faith backgrounds. And, you know, I think we do a little bit better of kind of the whole social background. And so, for a little while, I don't feel like I did a good as good of a job as I did. And so, over the past year, I actually became more cognizant of really asking some of these questions, especially for the Black and Brown population. And as simple as like, you know, how are you doing? How are you? How are you feeling, you know, with all that's going on and you know, we I don't pretend to know what it feels like, you know, to walk as a Black American on the streets and to be targeted. I don't know what that feels like. Maybe an in sort of a different sense in as far as you know, with the Asian-Americans being attacked. But, I think simply just acknowledging that it's been hard, it's hurt a lot of people and showing that you can be an ally, not just their doctor, but really to be an ally. That has actually touched a lot of people. And what's really awesome is that, you know, with the Black Lives movement, a lot of us actually went to some of the rallies and we at clinic, we'll talk about it. And, you know, we have some pins to kind of demonstrate our allyship, but to say it out loud verbally, I think is very meaningful for patients, for families and for myself. And it's been very powerful. And, you know, a year later now, people are asking me, you know, how are you doing? We remember when you asked us how we were doing. And so, I again, I think, you know, words are powerful. They have a lot of impact. They have consequences. They can have good and bad consequences. But it was just really awesome to kind of see this full circle where you care for your patients and then you touch them somehow and they want to make sure you're okay, too. And that, I mean, I don't know how to explain that feeling, but it's really nice when the patients are just like, Are you okay? Have you been doing okay? You know, what can we do for you?

Megha Gupta [00:07:38] Yeah. I almost feel like the therapeutic relationship can go a little bit both ways, right?

Yu-Lin Amy Lee [00:07:42] Yeah.

Megha Gupta [00:07:44] Yeah. Do you have any particular stories or moments that you would be willing to share about some of those more powerful moments without violating HIPAA [Health Insurance Portability and Accountability Act]?

Yu-Lin Amy Lee [00:07:56] Yeah, so, I saw a family. So, it was mom and her kids, a few boys, and I had actually met them for other reasons because he was having a lot of belly

pain and things like that, and we got to the root of it. And then they came back for their annual visit, so, mom and her boys. They were struggling, too, you know, they're teenagers and they're trying to find their voice. They're trying to figure out, you know, how do I know, you know, mom is obviously worried about them as Black young teenagers. You know, she's worried about their safety, their mental health concerns, and they're in school and trying to, you know, to deal with this themselves, as well. And so, we actually just talked about how they were feeling and how, you know, some of the kids made them feel at school, whether it's bullying or putting them down or making racist remarks. Or, you know, when they turn on the T.V., and they see, you know, police, you know, and things like that. And so, just giving them a very safe space to talk about it where they didn't feel judged and where they could talk very openly and not worry about this. And I think it surprised me and it surprised them because I, a lot of times when we see patients, we think about their constipation, they're diarrhea, they're, you know, are they smoking, or not? But we don't talk about some of these other things. And it surprises people. And so, you know, mom was just so, so thankful afterwards and wrote a really nice, nice note afterwards saying that, you know, she was just really happy that she could come to this clinic knowing that we actually cared for them, not medically, but kind of more from a social standpoint. And I think it makes our patient relationship stronger. And you know, again, it's a two-way street. Yeah.

Megha Gupta [00:09:56] Yeah, thank you for sharing. That's such a touching story, especially to hear during some of these trying times as they continue on. To kind of turn a little bit. So, I know you had previously mentioned to you that there you know, there's this crisis among the Asian-American population and Asian population that lives in America in general right now. Can you tell me, you know, as you're comfortable, about some things that are maybe like frightened you or unsettled you as a provider or just as a person during the pandemic?

Yu-Lin Amy Lee [00:10:29] Yeah, yeah. I think first off, Asians, Asian-Americans, we have had this issue with kind of collective silence, and I'm talking about silence when other people are getting hurt and then silence about ourselves. And so, it's been really good to see people speaking out. And again, that's for the reason that I wanted to do this, as well. I wanted to give a voice to the Asian-American population because, you know, when I was thinking about all the things that I'm seeing in the news, I keep thinking I'm Asian-American. But when will people stop seeing me as a forever foreigner? When, you know, why do people say, why is your English so good? Why do you speak good English or, you know, just, you know, small things like that. And so just seeing the escalating rhetoric against Asians, again, it's been dehumanizing, trivializing and then seeing leaders kind of stoke this fear of xenophobia has been really hard because when I see these elderly Asian men and women being attacked, the first thing I think about is actually almost always my mom, my dad, right? They came here. They were immigrants. They came with very little aside from kind of their clothes on their backs and a little bit of money, and they were kind of pursuing the Asian dream so that my brother and I could live better lives. And they, you know, I remember even as a child, kids would make fun of us about our slanting eyes or when I brought my bento boxes for lunch to school, it would be, you know, noodles or rice and, you know, Asians or Taiwanese food. And people would laugh at me. They would say it smelled, it looked funny, it looked gross. And I was so embarrassed at the time that I went home and told my parents, Don't ever make me that again. Just put me this bland PJ and a juice box. I just want to fit it. I remember I just want assimilate. I don't want to feel different. And when we had roll call attendance in school, you know, how when they would

call your name and every time they would call Yu-Lin Amy Lee, but the name would be butchered and kids would just laugh and laugh and laugh. And so, I made my mom go to my school and asked them to just x out my Taiwanese name, just take it out because I didn't want to hear it again and I didn't want to be laughed at. And so, I remember a lot of these things of just trying to fit in, and again, assimilate. And, it has taken me years, probably my whole life, really to kind of learn, to accept and love myself. On my white coat, actually, I wear my full name. It says, Yu-Lin Amy Lee. I'm very proud of it. I bring my Asian food to lunch, I drink bubble tea. I introduce people to this. I feel very proud of where I've come from, but it has taken a really, really long time and I, you know, when I try to speak to my parents about this, they don't talk about it a lot because they also are like, you know, you know, it kind of happened to us, but we remember the good people, the people who helped us. And, you know, we just kind of, you know, put our heads down and just try to make do. And so, it's, you know, we don't really talk about this with our parents, but now with the newer generation and the kids and, you know, even younger than us, I am so impressed seeing high school students and middle school students and college students really advocating. So, I do have a lot of you know, in the midst of this kind of pain, anger and frustration, I see a lot of hope, actually. And so, yes.

Megha Gupta [00:14:18] Thank you. I think it's a really hard thing to talk about, and I really appreciate your wanting and being so open to discussing that sort of thing. I shouldn't just call it that sort of thing, you know, anti-Asian violence and racism. It's been, as you said, a long year. So, to kind of follow-up on that a little bit. A lot of people I've chat with, I've chatted with have had opinions about the level of support they've gotten from their work environment, the hospital, their communities. I wonder if you could speak to whether or not you felt supported in this time and if you have specific examples, you could point to of that.

Yu-Lin Amy Lee [00:14:55] Yeah, I would say that I, you know, I love the clinic that I work and the people here. They've been really awesome. But sometimes it's still, you know, when we talk about big picture things. And even with the coronavirus, people don't realize that. So first off, the Asian-American community is not a monolith. When we say Asian-Americans, it's almost that model minority stereotype that we talk about, which is a really actually not a good troupe, and it really doesn't serve any use because what it does is it pits people against each other. So, it's saying that Asians are doing really well, so they're fine and they just work really hard. But that means that you're saying other groups Black, Brown population that they aren't working hard. And so, it creates this conflict between these two groups. The other issue is that this, the model minority stereotype, it only actually really serves to escalate what we see is this actually the East Asian population. We forget about the Southeast Asian population, which if you look at finances, economics, education, there's actually a huge, one of the largest gaps, disparity gaps, is actually in the Asian population, but nobody actually talks about it because we keep talking about how all these Asians are lawyers and doctors, they're doing just fine. And so, a lot of times when we talk about salaries or the disparities, you'll see a pie chart that has white, it has Black and Brown. The Asians are kind of stuck in there, but we're never actually talked about like because we're doing kind of well enough that we're kind of riding the coattails of white people because we, you know, that's what it seems like, and we don't actually need help, even though we do. And even though there are a lot of Asians in these medicine and law and, you know, things like that, if you look upwards, right, the sea level, you know, I don't see people who look like me who are represented in leadership positions, the higher up positions. And so, there is still a disparity there. And I think that's why we often feel so trivialized and invisible because we are kind of left out from all of the talks and even with

COVID, if you look at all the talks, even at our own institution, they centered mostly around the Black and Hispanic community. The Asian community is really quite, you know, been left out. And there are very, very high rates of COVID in certain Asian communities. But again, I think, you know, part of the reason I wanted to talk about this is to also kind of bring to light kind of our narrative.

Megha Gupta [00:17:35] I think that's a hugely important point you make, right? There's more diversity within groups than between groups and to keep pretending like there's only one group crisis is not fair really to folks who are getting affected. So, I really applaud you for bringing it up and being open, like I said, to discussing especially ways that Duke could do better. Other things that I was hoping to ask you, do you, and this can be on a professional level or on a personal level or both if you feel so inclined, but can you tell me about any like major events that stand out to you during this pandemic? I know it's been a long year and times done kind of a weird thing, but yeah, anything that like stands out.

Yu-Lin Amy Lee [00:18:21] Positive, negative or just anything? Okay, well, I'll start with- I'm just gonna start with the negatives because I want to end on positives. If that's okay. But I have been actually disappointed and shocked in some ways. Sometimes I don't feel comfortable going out at gas stations or grocery stores. Again, people call me the coronavirus, and I've had multiple instances where people said, F you, you're a foreigner. Trump is going to get rid of all the foreigners. So, you know, I mean, it has, it's been hard. I have definitely cried. I've been very angry and upset. And honestly, I don't actually like going out anymore because I, because of kind of the rhetoric that's been thrown out there, right? So, the "China virus", "kung flu"? Again, words matter and have consequences. And what we're seeing, this play right now with people getting hit, getting beat, dying. And so, that part is really, it's really hard. I think there's a lot of grief, and I think a lot of us think about our parents. And, you know, there are a lot of Asians who are essential frontline workers. And I'm not just talking about doctors, I'm talking about restaurant workers, grocery workers, delivery. People are out getting their nails right. I guess what's really hard is a lot of people glorify our food, getting your nails done and then they beat you. And it's so hard to just to comprehend that. There's like a cognitive dissonance that I cannot, I cannot comprehend. So that part has been really hard. But I remember when we had first started with the coronavirus, and so, I work in primary care and we see, you know, we see people who get sick all the time, right, colds and coughs and runny nose. And our clinic had to do this huge pivot on how do we protect patients and protect ourselves. And we had one of the first outdoor tents to test pediatric patients for, you know, doing the swabs. And I mean, it meant our nurses were out there garbed up and out there every day in the heat, when it was raining and, you know, not thundering out or lightening, but they were out there every day swabbing. And I, the things that we did to help each other out during this time, I don't even know how to put in words. I am so glad that I work at this Roxboro clinic and I am really proud of everyone who has worked here and they are like my family here. And so, you know, it's been really hard for everyone, and we had to have some people work from home. So, it's actually been socially isolating, too, for us, you know, having to be a certain number of feet apart. A lot of people working from home, although we are coming more together now. So, I think again, COVID, masking, isolating and then adding all this other racial trauma, it's been really hard, but I would not do it with any other group than my family here. So yeah, I want to give a shout out to them.

Megha Gupta [00:21:40] I love that. I think recognizing your support system is the best way to show the love and spread the love. So, so you kind of mentioned that you had to

change all these protocols almost like on a dime. And I know there were day to day updates. What kind of new routines or behaviors that you wouldn't have done before the pandemic have now just become so normal or automatic to you?

Yu-Lin Amy Lee [00:22:02] Yeah, I mean, coming out without a mask, I mean, you almost feel naked, right? And then people used to laugh at me because I am probably a little bit of a germaphobe. But since residency, I've always wiped down everything and I used to get laughed at. But that is a routine now. Everyone wipes down, right? You put your masks on, you put your face shields on and then, you know, at the front desk when you're screening, you know, you get the temperature taken. All though we're kind of done with that now. But yeah, it's been a lot of changes and then pivoting as far as you know, there's also disparities there. We were doing a lot of telephone calls and video visits, but not everyone has a cellphone, not everyone has a phone line at home, right? Not everyone has the internet. And how do you how do you cross those barriers? We have teams trying to figure that out. And then, you know, screening at the front, you know, well, this person had a fever. What do we do next? There were a lot of little details that it's really hard to describe in words, unless you're in it and then, you know, when do you wear? When do you bring them to the bathroom and use the HEPA [High Efficiency Particulate Air] filters? You know who can and who can't come, who is safe to, you know, who can be kind of evaluated and stay at home, who has to go to the emergency department, who has to go to urgent care? How do we make sure kids get their vaccines? It's really a lot. And so again, I'm just very proud of how our entire team that goes from the front, you know, the front screener to the front desk, to the nurses, to the doctors, to the phlebotomist, our social workers who are dealing with increased mental health issues. It really takes a whole team.

Megha Gupta [00:23:52] Oh, thank you for explaining that, too. Because I think clinical workflow is much different from the inpatient experience, too, which is, you know, where I've been a lot.

Yu-Lin Amy Lee [00:24:00] Yeah.

Megha Gupta [00:24:02] You'd mentioned kind of getting kids vaccines or getting kids swabbed. I was kind of wondering like, what are- well, have you been vaccinated and how you feel about it? And then kind of, if you can talk a little bit more about how that's been going in the primary care clinics?

Yu-Lin Amy Lee [00:24:20] Yeah. So, you know, we most of us were very much nearly awaiting the vaccines. And a lot of us, you know, we read through the data and wanted to get it. I certainly wanted to get it. I will say I was nervous. So, I think feeling anxious about something fairly new is normal. And so, we would try to normalize that with patients, our colleagues, our family and friends. But, I remember I got the first one in December, and when it was open to us, we were so excited. I called a few of my closest friends who were working at clinic with me. I'm like, Hey, it's open now. We should all go sign up. And so, we try to do it in clumps together, and we took pictures because we really wanted to commemorate this as kind of a, you know, a step forward in helping our patients, ourselves, our families, you know, step closer to seeing people again. And so, I think that was really important. And also, we also wanted to demonstrate to the broader population that we feel it's safe and it's important to get because there's a lot of misinformation out there, a lot of conspiracy theories. And so, we felt it was very important for us to kind of take that first step. And I am very grateful that, you know, I think people felt guilty, right,

because we were the first people to get vaccinated. And I think, you know, there's this vaccine guilt thing. But I am really thankful for all the smart brains who were able to develop the vaccine. And I know that mass distribution is not easy at all. There have been bumps, but I would say North Carolina has done a wonderful job and I'm really glad it's pretty much open to everyone now. And so, we continue to counsel and to kind of help promote it. And as far as vaccines for kids, are you talking about a normal like, well-child vaccines or COVID or?

Megha Gupta [00:26:22] Whatever you think is useful to talk about, I think it's been a weird year for accessing medical care, too.

Yu-Lin Amy Lee [00:26:27] So yeah, yeah. And so, you know, for some of the non-urgent, you know, as you get older, there aren't as many vaccines, but you know, for the first few years of life, they're very important vaccines. And you know, how we were trying to figure out, you know, if you're doing okay, you're up to date on vaccines, you can try to stay home now or do telemedicine visits instead of coming in. You know, when we were not sure what was going on, you know, what is what does that phrase like building the plane as you're trying to fly it? But we still wanted to get your two-month, four-month, six-month shots in, and so we would still have those kids come in to make sure that they got their vaccines. And even prior to the pandemic, our clinic has done a really wonderful job of actually reviewing all the data and seeing which children are behind on their vaccines and proactively calling these people and getting them in so that we can vaccinate these children. And, you know, as far as the COVID vaccine, we've had some Duke physicians, their children have been part of the new studies and it's very exciting. And again, I'm also very thankful that they're willing to take this step for us and to help figure out-they're part of research, right? And help, you know, how do we make or how do we make things better for each other? So, I'm really proud of them and excited, and hopefully kids and babies will be able to get the vaccine in the near future.

Megha Gupta [00:27:54] Yeah, I think it's something I feel like children's vaccines are one of those things that takes so much longer than adult vaccines, and we always just take it for granted research wise. So, I was curious to see your take on it and how parents might be reacting to the idea. So, thank you for indulging me and thinking a little bit kind of down - oh, actually, here's a question that I really want to ask. A lot of people have called health care workers heroes for their work during the pandemic. Do you feel comfortable with people referring to you as a hero and why or why not?

Yu-Lin Amy Lee [00:28:28] No, not really. Because I feel like that's part of our job, right? I mean, we were called when we took the Hippocratic Oath: do no harm, and you want to provide the best care for all of your patients, pandemic or no pandemic. And we are equipped with, you know, the clinic, our medical skills, our resources to help that and what I would say is, I mean, there are a lot of if we're going to use the term heroes, a lot more heroes that we need than we realize. The people who, you know, the grocery workers, right? They didn't have PPE [Personal Protective Equipment], they didn't have masks. I mean, I felt pretty protected because I have these things right and they were still out there. The people who work at gas stations who are cleaning the garbage. There are a lot of people that we, I think under recognize or even our environmental services. They helped keep this place clean for us and safe to use. And so, I think if we're going to say heroes there, it's a lot of people who are heroes, but also, you know, we're all doing our jobs collectively when it's better together, essentially.

Megha Gupta [00:29:47] No, I appreciate hearing it, I know people have really varied responses, so I think it's important to hear, you know, why, why it might not always apply or in situations where it might apply better. So, thank you. Also, I forgot to mention this at the beginning, but if you could repeat the question that I ask you before you start answering that, that's on me. I should have- no, totally fine. So, my next question for you is, what do you think the biggest impact of the pandemic will be for you personally and a long-term sense like, let's say, five or 10 years down the line?

Yu-Lin Amy Lee [00:30:23] So what do I feel like the biggest impact the pandemic will have on me kind of in the near future? I'm not sure I have to think about that. Most people know me as more of an introvert. So, you know, really initially it didn't bother me too much because I would only usually hang out with a few of my closest friends and then, you know, I'm more of a I like to go on hikes and read books and things like that. So, from that sense, it's not been too bad. But I will say, even as an introvert, I do really miss seeing people's faces and their smiles, even our clinic, right? Everyone is masked up. And you know, when you smile, you can kind of see it, right? But I do really miss the beauty of people's smiles, and I do hope to get to see that soon. I think the other thing I worry about is I don't know when I'm going to be comfortable taking off a mask and not wearing it anymore. I'm just not sure. Yeah. so. And I also worry about being an asymptomatic vector of transmission, even though I've been vaccinated and I do social distancing and I really try to limit the things I do for now and hopefully as things get better. But I also worry about, you know, spreading it to my patients who are elderly or have chronic issues, or even my parents who are late 60s and 70s. I don't want to get them sick. And so, I think there's just a lot of unknowns that make it a little bit stressful and hard. But I think that's life, right? I mean, I think at each stage there's always unknowns. And, you know, if you look for the helpers around you and I think we'll get through this, even though I don't, you know, don't really know what it's going to look. As far as five or 10 years, you know, I'm I don't know if there are long term consequences of COVID. You know, people talk about long haulers and then we talk about travel and the economy. I think there are broader consequences that we don't quite know about yet, but I'm still really grateful for my friends and family who you know and technology, right, that I can chat with them on the phone. We have had Zoom calls and where you can do fun things like I look like a potato on one of them just for kicks and being able to connect that way. And interestingly, I actually reconnected with a lot of people from middle school and high school and my family in Taiwan. You know, I haven't been there. I haven't been back since 2014. I think I was supposed to go and visit my family last June. But obviously with the pandemic, it was not possible. So, I've reconnected with a lot of people and that has been really, really awesome. So, I don't know if that answered the question.

Megha Gupta [00:33:21] No, I think you explored a lot in there and to kind of follow up on that. You kind of touched a little bit on it. But what do you think the bigger impact or the biggest impact of the pandemic will be in a global sense?

Yu-Lin Amy Lee [00:33:36] Yeah. I mean, you know, in the past, we would vacation, just go travel, right? I don't think I'll be feeling comfortable traveling for a little while. And you know, I do love traveling. I think I'll probably do more road trips and car rides, things like that. And yeah, I don't. I mean. Yeah. I'm not sure, I think, yeah,

Megha Gupta [00:34:04] It's a tough question. I appreciate it. I'm sorry - I'm just like going through my list and making sure I'm not missing anything that I want to ask you. Okay, if you could go back in time to visit your pre-pandemic self, what advice would you give yourself to surviving in this new world?

Yu-Lin Amy Lee [00:34:23] Oh man. I would. I would just say that things always work out, I think sometimes when you're in the middle of the tunnel, it's really hard to see the light at the end of the tunnel and when you're kind of deep in the trenches. But the good thing days, I think always outnumber the bad days. Your best friends, your close friends, your family will always be there for you through thick and thin. And ultimately, I think things will be okay. It's really hard to see, you know. I can't believe this has been a year already, more than a year. And, you know, as collectively working together, being allies together, we can get through most things, I think. And I really do think that we, I hope and pray, that we can get over the divisiveness because I think that's where we get into a lot of trouble. But things will be okay.

Megha Gupta [00:35:34] I just want to clarify, actually, before going further. Did you or any close family members or anyone have COVID themselves?

Yu-Lin Amy Lee [00:35:43] So I was mostly living alone. My parents, actually, they were here from Taiwan and they got stuck here because of the pandemic. But they're not with me right now, and when they were, I actually altered my kind of practices a lot. I would when I came home, I would actually have them to stay in the room until I showered and I washed my clothes. I've definitely eased off on a lot of that now. As with vaccines and you know, things are loosening up a little bit, but I did change a lot of things that I did. No one in my immediate family had COVID. I know some people who got it, but most of my, you know, I've had colleagues who got it in probably the health, I don't know, maybe the health care setting, I'm not, I'm not sure, but most people I know did not have COVID. That being said, when we tested, I mean, we were testing all of our patients. They were testing positive, left and right and part of it. This is going off track a little bit, but not everyone has the luxury like I do of living in a single-family home where I can isolate or literally live by myself. A lot of families, especially the BIPOC population, they live with five or 10 people together there, their brothers, sisters, mom and dad, grandparents, aunts, uncles, you know, it's not feasible for them to do that. And so, we saw widespread COVID in the Black and Hispanic community. So again, just highlighting these disparities. Sorry, that's a little off topic.

Megha Gupta [00:37:27] No, I appreciate your sharing. It's something that I probably should've brought up earlier, and it just kind of popped up on my little list here later. I guess, like I'm kind of in the last few questions, but is there anything that I didn't ask you that I should have?

Yu-Lin Amy Lee [00:37:51] I don't know if this is okay to bring up or not, but I think what's also been very hard is the politics involved in all of this, and it's so polarized now that I don't like, I don't even know what to do, and I have friends on both ends of the spectrum, in the middle. And it's been really hard when you're talking to someone on the other end of the spectrum. I try to meet people halfway, but there are certain things. It's very hard for me to meet halfway and just kind of being kind of vulnerable out there about racism, hitting, attacking people. I can't meet you halfway there. There should be no reason for that at all. And so, when you have close friends who are on the opposite side of your

political views, it's been really hard for a lot of people, I think. And then it makes it very hard for us to when we are trying to promote health, when we're trying to promote vaccines, when half the battle is trying to convince people that COVID is real. It's not just the flu. That you can die from COVID, that you can spread COVID. It's exhausting. Yeah, it's exhausting. Exhausting is probably a good word to use, also, for this past year. And so, again, the divisiveness. I don't know how to make it better. I really don't. I'm hopeful that it will. But yeah, that part has been definitely, definitely hard. The politics and how it has interjected itself in medicine and health care and racism. Yeah.

Megha Gupta [00:39:31] I appreciate you bringing it up. I don't know if it was deliberate or not to leave it off of our lines of questioning, but it's something that has definitely come up before and I think is a really important piece of the pandemic. So, I appreciate your, you know, inviting that conversation, too. I guess, like, are there any other thoughts or reflections that you have that we didn't otherwise cover? Is this your, you know, your time to shine.

Yu-Lin Amy Lee [00:39:59] Yeah. I don't know, I think I am, again, very grateful for everyone. And I think it's, I look up to my mentors who have spoken up and who have role modeled for me, and so I hope that if anyone ever sees this because I, I am not bold, nor am I courageous, and I think it's important if someone like me can do it, that you can do it, too. And so just kind of speaking up and helping others and again, the ripple waves, if we really want to make a long-lasting kind of cultural major changes, it starts with us, right? So, thank you actually for taking your time.

Megha Gupta [00:40:56] Thank you so much for being here. I think this is a great place for us to end and I really appreciate it.

Yu-Lin Amy Lee [00:41:02] Thank you.

Megha Gupta [00:41:03] I'll go ahead and stop the recording now.