

Access

Oral History Interview with Brenda Mutisya
Conducted by Megha Gupta on March 5, 2021

Megha Gupta [00:00:02] Okay. So, thank you, Brenda, for being here today. Today is March 5th and my name is Megha Gupta. I'm interviewing Brenda Mutisya 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, just to begin, can you tell me a little bit about yourself and what you do professionally?

Brenda Mutisya [00:00:33] Okay. A little bit about myself - Brenda Mutisya - I am a registered nurse and I work at Duke University Hospital. I am a part of the ambulatory hospital-based clinic division and I work at Duke Outpatient Clinic, which is located on Roxboro Road in Durham.

Megha Gupta [00:01:00] Thank you. And I want to ask you, What brings you here? Why did you volunteer to be interviewed today?

Brenda Mutisya [00:01:08] Oh, the reason that I wanted to be interviewed was because I know that I'm a part of a historical time in our lives. I think that when the future looks back on us as history, they'll want to know what we did, how we did it and even when we were in the middle of the pandemic, I was also doing a lot of research on how did they do this with polio? How did they do this with TB [Tuberculosis]? How did they? And so, I, too, looked at my past to understand how we could currently handle the situation better. So, yes.

Megha Gupta [00:01:52] Thank you. So, just to kind of get started a little bit more. Can you walk me through a typical day for you at work in the last few weeks?

Brenda Mutisya [00:02:05] In the last few weeks, I'll say that a typical day is many meetings. But I was in a lot of meetings before, but I used to go to the hospital to attend them. And so, now Zoom has become my friend. And so, I start off my morning reviewing emails at six, seven o'clock in the morning, and then I immediately go into probably my first Zoom meeting at 8:50 a.m., which are huddles. And they're little short, brief. You know: What's happening right now? What's happening today? What's happening with my staff? And letting my next tier of leadership know my staffing and any events that may occur and they give updates. So, every day we are updated on the latest because health care is changing constantly. And so, these daily huddles, Monday through Friday, were valuable. It kept us informed. We kept our leadership informed. And so, huddles, huddles, huddles. Now, just as I'm attending huddles to receive information, I'm also doing huddles with my team constantly to give them updates. I've increased a number of emails that I send each day. I'm forwarding more emails relating to sharing information about where we are right now at this moment in time. The other the other thing is out there just seeing how our patients are navigating the health care system and we pretty much, I say, I tell my staff like on a dime, we turned around how we started taking care of patients. We went from 90 to 100 in clinic office visits to hardly any and now we're ramping back up and we're around somewhere like 50 or 60 visits. Well, we're still doing telephone visits, and that's something we weren't doing before at all. And our patients love it that once you try something new, the feedback that you get on it is immediately, you know, Well, I don't know how to do video, but the telephone was a lot better and it was nice because I didn't want to leave the house. So, our patients were able to also, we implemented something new and they immediately gave us feedback. So, we just communicating change.

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Communicating updates was an important part during this pandemic and everybody being open to listen to change and also being able to be creative and delivering change. So yes, but still my day starts early and I'm usually here pretty late, and that's only so that I can get caught up on all the emails that have been sent. Like I said, I've increased the number of emails that I send out. I also have there's an increase in the amount of emails that I receive. And so, you want to thank everybody that sent you an email and respond to their email. So, yes.

Megha Gupta [00:05:42] Oh, thank you. I definitely understand - I'm only a medical student, so I can only imagine that death by email is much more a reality for you.

Brenda Mutisya [00:05:48] Mm-hmm.

Megha Gupta [00:05:50] Yeah, it can be exhausting.

Brenda Mutisya [00:05:51] Mm hmm.

Megha Gupta [00:05:53] So, I guess if you can think back and I know you kind of got a little bit of this, but a little bit more specifically, what was a typical day at work like for you before the COVID-19 pandemic hit?

Brenda Mutisya [00:06:05] So, with the increase in the number of patients that were being seen, I was out there in my clinic more often. I was doing intake on our patients that came in for our office visits. And with the census going down, I ended up having to be more in my office to get the latest and the greatest information, but my staff handled all of the patient care that we deliver in the clinic. No questions about it. I have an excellent team that I work with. So, before it was the same meetings, emails, handling projects, implementing something new. Health care is always changing and it changed for this clinic, for the ambulatory division and for the hospital employees constantly. So, yeah.

Megha Gupta [00:06:58] That's, yeah, it sounds like you've led a very busy life, but that's been very productive, and I'm sure your staff has been really happy to have someone like you in leadership with them, you know, working with them. Actually, I was hoping to touch on that a little bit. Can you talk to me a little bit about how your staff and your team dynamics have had to kind of adapt to the challenge that the COVID-19 pandemic presented?

Brenda Mutisya [00:07:22] We, my staff and I, tell - I speak to about my staff all the time as being great. I am very fortunate to have the team that I have working with me. There are 15 clinical support staff that, well really 14, I'm number 15, but that work with me, RN [Registered Nurse], LPN [Licensed Practical Nurse] and medical assistants, and they have come together to solve a lot of how we're going to handle this, how we're going to do it. They, too, had to turn on a dime with our census going from 90 to 100 down to 10 or 15 and trying to figure out now how can we still connect with our patients? And so, we went to a system where we used to do intake prior to the physician, and now we do what are called pre-calls. So, we're calling the patient still getting some of that initial information about the telephone visit or the video visit that's about to happen and to get the patient prepped and ready for the physician. But I can say they were creative in how they communicate it to each other. We developed some, like I said, huddles became a big part of us coming together and their comments and their feedback and their input into what

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we're doing, how we're doing it. Do we have enough PPE [Personal Protection Equipment]? Where we keeping it? Because things kept changing and it helped me as a leader, as a nurse manager to hear them make their comments because it also gave me an action item to: I need to take care of this. I need to take care of this. So, it was really, really helpful. I have a good team that communicates well and lets me know. So, I felt really good. I felt good during this pandemic that the people that I report to, the leadership, and the staff that I work with, the physicians that I work with, they were all trying their best to still provide quality care to our patients. And it was awesome. It really was.

Megha Gupta [00:09:50] So, thank you, that's really great. I mean, it is really inspiring to hear that. You know, you talked a lot or you had mention that, you know, you really had to change your relationship with patients as a result of the pandemic. Can you tell me a little bit more about that? Like any stories you've had that kind of crystallized how your relationships with established and new patients have changed due to the pandemic?

Brenda Mutisya [00:10:16] So, Duke University Hospital opened up in the very beginning, back in February, March, April, the COVID tent where we were testing. And so, one of the ways that I felt to be involved in this pandemic, this crisis was to volunteer, to go out there and work the tent. And I saw from babies being tested to the elderly, everybody and the car lines were long, but everyone was patient. They understood that we were doing our best to provide the best care. So, I volunteered and worked over at the COVID tent that Duke had. The next thing was the Karsh Center, which is where the Pfizer COVID vaccine was being administered. And I went out there in the early beginnings of it. And it was awesome because the generation that we were serving were thankful, grateful, appreciative they - I got a lot of compliments. It was a feel good, it was a different way of embracing me being able to taking care of our community, and they were grateful. They were there early, the first ones were there extremely early and some of them were wheelchairs, multiple assistive devices. But it was a good feel good about how we were still able to give great care to our community. And then so I worked over Karsh and then the Duke Primary Care at the Durham Medical Center did a Moderna clinic on Saturdays, and I had an opportunity to volunteer there. The big emphasis for that clinic was to deal with those that are disenfranchised problems with transportation. People that already come to this location for their health care we were trying to get them in because they have a lot of barriers to health care. And so again, it was a very rewarding opportunity because I saw a lot of over 65, African Americans or I should say, Brown people that came in to get the Moderna vaccine and they too were so grateful, thankful, appreciative of us doing it that there were moments in time during the day I was just walking around saying thank you for coming because them getting the vaccine meant more because they are now going to impact someone else that may be hesitating to get the vaccine, which is something our community is facing right now. There are a lot of people that are hesitating to get the vaccine. So, I will say I thank them for coming in and getting it. But it was so nice to see all those Brown patients getting that Moderna vaccine made me feel good. I can also say that for my family, I, when I look at my kids were eager and, Mom, when am I going to get it? And my father's generation of the 80-90-year olds in my family, they were eager to stand in line, make the appointment and get their vaccine, and they were proud to tell their brother or sister, who was 85. I got my vaccine. You get yours. I got shot number one, you know, so it was it was a good feel good to work in all three of those areas during this pandemic. Yeah.

Megha Gupta [00:14:31] Just to kind of follow up on that. Have you received a vaccine?

Brenda Mutisya [00:14:34] Oh, yes. Very early on. Not with the first push of health care workers because I knew that there would be a lot of people that needed it because I'm primarily most of my time in my office. I wanted all of our real front-line to get it first. But I did just as soon as I saw that number of how many employees had been vaccinated, then I got mine. Truly, I did. But yeah, yeah, I've gotten both shots. I got the Pfizer and my daughter got the Moderna. So, we're - and probably my son will get the Johnson & Johnson. So, we'll be able to see all of the after effects of the vaccines in my family.

Megha Gupta [00:15:23] Yeah, yeah. You seem really excited about it. Can you talk to me a little bit about the excitement, like why you were so willing to get the vaccine?

Brenda Mutisya [00:15:35] Do I understand why people are hesitant? The answer is yes. Do I understand our history with health care enough to understand their rootedness in not getting the vaccine? The answer is yes, and all I can say is at some point that person that individual has to find the reason to get the vaccine for themselves because it's their responsibility, it's their decision, and they'll have to live with the decision that they make. I am over 60, African American. I am obese. I have two, possibly three, significant health care conditions and I was watching the number of people dying. Hospitalizations but personally, those that were dying, that number as it was increasing, it wasn't a fear. I didn't have fear, but it was, I got to get this vaccine. I don't want to die and probably if I did, I may end up in the hospital because of my preexistings. So, that was another reason for my eagerness and I trust experts. I think that that weight and responsibility that they have to make the right decisions for those that they're serving was important. So, I believe them. So, yeah, I was looking forward to it. Got both mine and proud. I got my - where is it? Duke handed out these little [shows object] - I love it. Yes.

Megha Gupta [00:17:27] I'm definitely very excited about my charm, too, and I really appreciate you sharing. You know, I think there was a lot of uncertainty, especially in the Black and Brown communities, about whether or not to get it. And I think it's important to acknowledge the reasons why, you know. So, I mean, we talked a little bit, you know, it wasn't really like fear for you, but I wonder, you know, were there other kinds of fears or things that unsettled you at work during the pandemic? What were some things that maybe gave you some anxiety over, you know, between the pandemic hitting America, really and the development of the vaccine and getting that?

Brenda Mutisya [00:18:09] Did I have fear? I'm going to say no, because fear has you thinking probably not the right way and fear has you acting in a way that you shouldn't act. So, one of the things that I used to tell my staff is, Today, this is what we're doing because tomorrow it may be different, but we're going to go with the flow as the system and as Duke, as the nation figures out another way to do it. We're going to follow suit and we're going to do it. But fear, no. When they were talking about the PPE in the very beginning and there was not a supply, I was able to see just how much Duke had stored. And I ended up telling my staff, Please, no, our employer is doing all that they can to protect us. And I trust that they will make sure they're not going to put us in any predicaments that we will be unsafe. They were working on it all day, all night. Calls early in the morning, late at night to make sure that every question you had, they were trying to answer. So, and then I told them where we were keeping our stash, and every Thursday we were counting how much we had in predicting how much we needed a face mask, shields, goggles, everything that you need, PPE, we had it for you. So, keep your distance and wash your

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hands. We, it was, I felt comfortable in the things that people were telling me to do so that I wouldn't be exposed and I followed that. So, yes.

Megha Gupta [00:20:05] That's really lovely to hear, honestly. So, I mean, kind of jumping off of that, a lot of people have, you know, various opinions about the level of support they've gotten from the hospital, they've gotten from Duke at large, their community even within Duke. I wonder if you could speak to whether or not you felt really supported by them and if you have examples, actually specific examples you could point to.

Brenda Mutisya [00:20:28] So, I felt during this entire pandemic that Duke did more than others did to protect me as an employee, to support me as a worker and with their institution, the support with PPE is where it started. The increase in communication, the increase in policies and emails telling me what to do. They kept me informed. All I had to do was open up a email and just start reading and they were keeping me well informed with what I felt to be reliable information. The second thing is they did things like they paid employees that had signs and symptoms to stay at home. And it wasn't that you had to use your PTO [paid time off], which could have been not a good situation for a lot of employees. Our human resources department did so much to support the relationship of how employees were treated. So, from the testing to the benefits of PTO that we didn't have to use to the - okay, so now I'm getting stuck - we had to - I'm sitting here trying to think of all the things that they've done, which has been a lot, but let me. But I will say that Duke's human resources department and leadership came together to address a lot of our or the staff's concerns. So, I felt really proud where I heard other institutions lay people off. Duke did not, where staff were being asked to use their PTO if they were out because of COVID. Duke did not and our staffing was maintained. My staff came in, we worked on projects. We did a lot of Duke work during Duke's time when our census dropped. It was an opportunity for us to get caught up on a lot of work that we were behind on. I want to say we still, staff still received increase in, across the board, salary pay. I mean, they still and I told my son and my daughter that I'm fortunate to work with Duke because somebody planned ahead of time as to how they would handle these crises and situations because we were financially bound to lose, but we still came in here every day to serve our community, and I felt good about that. I felt good. A lot of my ophthalmologist offices closed that we attended. Those kinds of things hit you. When people lost their jobs, people were unable to feed their families. Duke gave Duke employees financial support during the crisis. So yes, I've signed a few of those documents for employees to receive Duke funding to help them through this crisis. So, there was a lot. I'm sorry, I just can't capture all of that. But I will say I am very fortunate to be a Duke employee and I'm very glad that I'm a part of this institution. Yeah.

Megha Gupta [00:24:34] I think they should really hire you as spokesperson for their next advertisement. No, I mean, it's incredible and it's really heartwarming to hear that the institution really stepped up for the people that they care for. And kind of switching gears a little bit here. Have you or your friends or colleagues in other departments even shared really noteworthy, noteworthy experiences or perspectives on working like in a clinical setting during this time?

Brenda Mutisya [00:25:05] I am a part of, like I said earlier, I'm a nurse manager in a hospital-based clinic and there are 22 of these hospital-based clinics. And so, they're managers and we meet daily every morning and well, no, we don't meet every morning. That's the medical team that meets every morning. But so, we meet often to discuss where

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we are, what we're doing. And there are many of great instances of where they've worked over at the COVID tent or at the Karsh Pfizer vaccine clinic. Where it was, how do I say it, everybody has a story that was heartwarming was even today we were on a meeting with Tracy Gosling and she had her leadership team in a meeting, and one of the directors spoke up and said that it warms her heart to know what we are doing to serve the community and to hear their, Thank you so much for doing this. It was just a completely different - sometimes in management we hear a lot of complaints. We hear a lot of complaints. And I can say that during this time serving the community, especially at these vaccine clinics and the tent, it was compliments, a lot of compliments that we were able to receive. And they would say things like we were, well, organized. You know, It didn't take long, I didn't stand in a line, I didn't. So, someone thought a lot about behind the scenes of making sure even in this crisis, we're going to do our best to present health care and how we deliver it in the best way that we could. Because I can tell you behind the scenes, people were staying up all night, how are we going to get these vaccines filled? How are we going to keep the schedule filled? Who's going to call this person? Can we move this? So, there were a lot of decisions that were being made behind the scenes, but as far as the public or our patients were concerned, y'all are happy and thank you so much. And you know, it was, they saw our best during this crisis. And yeah.

Megha Gupta [00:27:41] So, I think that's lovely, and it is really nice. I worked at the vaccine clinic myself, and it's definitely a very feel good environment like you've described.

Brenda Mutisya [00:27:49] Yes.

Megha Gupta [00:27:51] But I will say a lot of people have called health care workers heroes for their work during this pandemic. Would you feel comfortable with people referring to you as a hero and why or why not?

Brenda Mutisya [00:28:02] No. In no way do I see myself as a hero. This is what I do. I signed up for this early in my life. I knew I wanted to be a nurse early in my life. And I'm talking childhood, early childhood. And so no, this is, as I've told my staff, this is how we roll. This is what we do. I'm proud of what I do, but I don't see myself as a hero, no. Someone said, Brenda, you're here every day. And I thought about that and the day we went into this crisis, I want to say I hadn't had a vacation, probably in six months prior to it and was planning in March and April to have vacation time. And of course, immediately that got canceled. So, I can say I worked probably an entire year with no vacation. But it wasn't because somebody made me. It's because that's what I wanted to do. And so, but at the end of the year around the Christmas holiday, I did take some time off. But I feel proud that I, too, woke up every day, had a place, an employer to go to, a lot of people lost their jobs and no, I'm not a hero. In no way feel that I'm a hero, but I do consider myself to be committed to health care and how we deliver health care to the community. So yeah, not a hero. This is what I want to do. Yeah.

Megha Gupta [00:29:51] Definitely, thank you for sharing. I think a lot of people who are really similar to you, but it's going to be really nice to hear that from someone who's been working in this environment for a long time.

Megha Gupta [00:29:59] Yeah, yeah.

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Megha Gupta [00:30:02] The next question is a little a little tougher, so feel free to skip it or we can move to something else to do. Do you feel more personally or professionally, or both, burdened by the pandemic? And in what ways has the pandemic perhaps burdened you?

Brenda Mutisya [00:30:23] Have I felt burdened by the pandemic? I can't say that. And I think that's because it's a negative way of looking at it, and I try not to do that. The pandemic was challenging. A challenging time of life was what the pandemic presented. I didn't feel burdened, but it felt good for my skills, my knowledge, my expertise to be utilized. So, that was a good feeling. Burdened, no. I did feel more of the need for me to connect with my aunts and uncles who are, I think the youngest is 75 now of my dad's brothers and sisters, and I connected with all of them. And the reason was to hear how they're doing. And, you know, checking in more often than I would because one of my aunts is 94 or 95 and I wanted to make sure that they were okay. And interestingly enough, burden, no, not burden, but I learned so much about that generation and how they handled life: patient, well-informed, following the rules, participating, actively doing. So, from that talking to them, I then felt I now have my, this is my crisis and I need to handle it with thought and action and not burdened. And can I take it a step further? It brought me and my children together more because we talked more. They had questions that I felt that I was that informed health care worker that could help them understand it. It wasn't a burden. It was, I felt a responsibility to provide them with good information to decrease their worry and I also, we talked about this is you're having this crisis for your, what are they, Generation X, Millennials, this is your crisis. This is history that you're a part of and remember how you handled this. So, when you think of it like that, you want to give your best to the challenge that is the pandemic. You know, so and I feel good about my children and how they've handled themselves. My dad and his brothers and sisters, the generation before me and those that I'm working with now. So, yeah.

Megha Gupta [00:33:34] I really like that perspective, you know? Burden may not be the best way to ask that question next time, but thank you. To kind of go off of that, so you talked about like your immediate impacts being able to connect more with family, you know, because of the pandemic. What do you think the biggest impact of this pandemic will be for you, personally, in a long-term sense, like five to 10 years down the line?

Brenda Mutisya [00:34:00] Five to 10 years, I will be working in a health care system that won't be the same. This pandemic has changed the way we're going to deliver health care in the future. We will allow more for patients not to have to come into the clinic and we still serve their needs with video. I think telephone may not go away in some way for us in ambulatory to deliver health care. It will be more of a planned appointment situation. I think just how the pandemic introduced that we still could deliver care, but differently will take us forward, so I don't think we're going to go back to everybody in an office visit. No, because we were still able to touch a lot of lives. Talk about medication. Talk about sleep. Talk about mental health. Mental health, big area that it's over the phone. It's over video and zoom. You don't have to go into someone's office anymore and still you get the same care, you know? So, I think it's changing health care. It has changed health care and will change how we'll do it in the future. And I think it's all a good change. I really do. I'm looking forward to it. Looking forward to it.

Megha Gupta [00:35:36] That's really exciting to think about. The med school I came into is not going to be the med school I exit and neither will the rest of the medical training, so it

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is thinking forward, going to be exciting. And then kind of a little bit of a follow up to that. What do you think the biggest impact of the pandemic will be in a larger global sense? You know, maybe not just American health care, but, you know, for the country at large or for the countries that we interact with, you know, as American citizens.

Megha Gupta [00:36:06] So, the pandemic to the world has shown us that at any given time, it cannot just impact one, but many and not just a country based on its politics, but its human people, its people, the impact. And I will say, technology will be a big part, and we've been in technology for a while, but it will be more. I also think it brought to light an increase in a visual of how people are living. I told my kids that there's only been a few times where I've felt just truly shocked and just out of the loop of some things and I looked at it wasn't three weeks after the pandemic hit that people were in line trying to get food for their children. The social determinants of health were brought to light in a different way. And I think we saw just how many people were impacted and the social determinants of food, housing, access to health care. We have to improve those things and the pandemic brought that out. Clearly, there should be boardrooms filled with the conversation of how we're going to make this better because another pandemic is coming. It's not as though this is unique and this is the last one. Another one is coming and we need to make sure that the people, the citizens that have to be in the middle of whatever the next pandemic, we've got to do it better because the food lines and the how we just delivered health care, we got to make it better. So, I saw the suffering, too. I did see the suffering and yeah, that was sad, that was sad for me. Yeah.

Megha Gupta [00:38:33] And, you know, we don't have to go into a ton of specifics about this, but what do you mean when you say you saw the suffering, you know?

Brenda Mutisya [00:38:44] So, in the beginning, it was someone that thought: I would never be in a line to get food to feed my children but I lost my job and I don't have money, we've used all our savings. People went months without paying their rent because they lost their job and our governor had to end up doing a mandate that you couldn't evict someone. Well, he didn't say you don't pay your rent. But he did say you can't evict somebody during this time if they can't pay their rent. So, I - yeah, it - the financial, the food insecurity, the housing insecurity, because people lost their homes. That all but the numbers, the sheer numbers of people was something that I was ignorant to. I just did not know that so many were so close to that line of poverty, you know, or decreased resources. Yeah.

Megha Gupta [00:40:12] I appreciate you sharing. I know it's a little bit more of a heavy topic to think about, but I think it helps to kind of put in perspective everything, too, right? A few like sort of wrap up questions for you.

Brenda Mutisya [00:40:27] Okay.

Megha Gupta [00:40:28] So, 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?

Brenda Mutisya [00:40:38] Work-life balance, I can say that I didn't do well with work-life balance, excuse me. I am, if I had to go into my past, I would say, Slow it down, no, you don't have to work as many long hours, you still going to get it done and take time to really not just deal with the work, but the humanistic part of what I do because that is why I'm

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doing what I do and it's touching lives, and I think I was too busy making the list. Scratching it off, taking care of the next thing, that I just didn't pay attention to the encounters, the human encounters that I was having. And now I do. I look more at how people sound when they say something or how there's more feeling in my world now that I don't think was there as much as it should have been. So yes, pre-Brenda, take a vacation. Enjoy life. You can still work hard, but still give your life balance. Yeah, yeah. I also probably if I could talk to my pre-pandemic Brenda would be take care of your health because one of the things that clearly came out of this pandemic was my heritage, African-American, my weight, how I eat, those are all, I put myself into a predicament that placed me if I had gotten COVID, it may not have been a good outcome, so nobody did that but me, so I probably hold a conversation with me about that. Yeah.

Megha Gupta [00:42:59] Definitely, I think there's so much collective wisdom now, more wisdom now than we had a year ago. So, you know, I appreciate you sharing that. Last few questions for you. Is there anything I didn't ask you that I really should have?

Brenda Mutisya [00:43:15] No, you asked really great questions. I don't think you left out any question. I don't know I think for me I want the future to look back on us and know that little old me did all that I could when I was faced with the challenges, and we may not have been perfect in how we did it, but we did the best we could and I feel good about that. So, yes.

Megha Gupta [00:43:57] That's absolutely a lovely sentiment, and, you know, thank you so much for your time, and it has been absolutely wonderful to get to know you and know little bit about your story. I'm going to go ahead and stop the recording here.

Brenda Mutisya [00:44:10] Okay.