

Transcript of Oral History of Lisa Nelson By Kit Heintzman

Interviewee: Lisa Nelson

Interviewer: Kit Heintzman

Date: July 6, 2022

Location (interviewee): Long Island, New York

Location (interviewer):

Transcribed By: Erika Groudle

Some of the things we discussed include:

Working as an oncology social worker, being an essential worker as Black woman, one of the few people of color in the medical workplace, Catching COVID in March 2020 with no outpatient services available, isolating from teenage children at home, preparing a will, getting insight about the physical difficulties faced by oncology patients from COVID symptoms, family members bringing over teas, vitamins, and natural medicines, the difference between catching COVID in early 2020 and catching COVID today, emotionally supporting oncology patients, their families, and coworkers after the murder of George Floyd regarding race and politics, MAGA supporters in the workplace. white patients and coworkers seeking allyship advice, staying close with international family members online, New York as a COVID epicenter: buzzards in the sky, trucks of bodies, mass cremations, increased awareness of the threat of gun violence; intrusive thoughts, being Black in America, preparing children for inevitable experiences of racism, husband having lived through cross burnings in his neighborhood, hypervigilance about Black teenage son getting a driver's license and the risks of being pulled over, and her son missing out on prom, outdoors high school graduation in a track field.

Kit Heintzman 00:02

Hello, would you please start by stating your full name, the date, the time and your location?

Lisa Nelson 00:09

My name is Lisa Petgrave Nelson. It is 12:03pm in New York and Long Island, New York, and today is July 6, 2022.

Kit Heintzman 00:20

And do you consent to having this interview recorded, digitally uploaded and publicly released under a Creative Commons license attribution noncommercial sharealike?

Lisa Nelson 00:31

Yes.

Kit Heintzman 00:33

Thank you so much, would you please start by introducing yourself to anyone who might find themselves listening? What would you want them to know about you and the place you're speaking from?

Lisa Nelson 00:41

Sure, so I am an oncology social worker, I work with cancer patients and an outpatient cancer clinic and infusion center. I support family members, patients, with just the various challenging situations that they've, you know, that they encounter with a cancer diagnosis. And I've been doing this for about 15 years.

Kit Heintzman 01:16

Would you tell me a story about your life during the pandemic?

Lisa Nelson 01:21

So not only am I an oncology, social worker, but I'm also an oncology, social worker of color, I'm a black woman of Jamaican descent. And I, the pandemic was, I'm sure exhausting for everyone, but I think it was more so quite, you know, trying for people of color, and especially essential workers of color, which is, you know, the title that we were given working in a hospital or healthcare setting, but it was very overwhelming. Just being here with all of the injustices. There in May of 20, in March of 2022, when the World Health Organization declared that, you know, we were officially a pandemic, you know, things just changed, it was a, quite a crazy test, a very large shift, compared to how we were getting along, I think, even racially, based on the political climate that was happening at that time, and then around me, especially with the murder of George Floyd in Minneapolis, excuse me. So that led to a lot of just a lot of collective grief. Amongst my, you know, my, my few black colleagues that are here, and also with the, with our oncology patients of color, and also, our patients of non- you know, that were our white patients, right, they were really struggling with all of everything that was going on. And I think that it was quite exhausting for myself, being one of the few people of color here, when you're seeing, you know, a black person, with a knee on their neck screaming for their, you know, their deceased mother, that caused a lot of pain, grief, loss, sorrow. And so, you know, I had to not only deal with my own feelings, as a woman of color, married to a black man raising a black son. But also, you know, supporting the staff members that were here, who really couldn't, they didn't have the privilege to grieve, and to deal with, in order to openly grieve in a setting that it's primarily white. And unfortunately, in the, you know, in the setting, they were, that they were in at that time, that we were in at that time, some of the, you know, some of our workers had a lot of the sentiments that were, you know, in that we're in the political climate of making America great again, and wanting to return to some of those, those values, right. And so, that was quite trying and having to support not only my family, emotionally be there, you know, for myself, and to also support our few black staff members, and our patients that were going through it, who couldn't really talk about it openly. The white patients who were really, really concerned and we're just, you know, just very upset and saddened by all that was going on, and also some of our white staff members who came to me and confidant and were quite upset about what's what was going on and, you know, asking about how to speak to their families. How can the you know, a lot of the terms included like, you know, allies, how can they be an ally? So those are just a few of the things that went on.

Kit Heintzman 04:55

What was it like having to support so many people with so many different needs around that at the moment, including yourself.

Lisa Nelson 05:06

It was horrible. It was daunting. It was, I think my days were spent. Well. First off, I think that, you know, on March 23, I came, I was home with home with COVID. And again, this is like, new, you know, we didn't really know what was happening, things were changing in the clinic, and I recall, just, you know, looking at myself, washing my hands, getting ready to leave at four o'clock, and I looked at myself and thought, oh, my gosh, I don't, you don't really look too good. And by time I went home, my husband had called a physician, and he, he said, you know, we're just, you know, obviously, we couldn't go into the, we couldn't go into the off to the office at the doctor's office, or a city MD or any type of you know, outpatient setting, there were just, like, just stay home and just operate like you had this, you know, you have this virus. And so it was very scary. And for the next three weeks I spent, my husband and I were quite ill and, and so much so that I thought I was dying, you know, I, we had our will, next to us, we had teenage children, and we were just like, you know, in case something should happen, these are, you know, these are the things these are things that we have set in place for you guys if something happens. But, you know, that was the only time that I had off those three weeks, when I returned back to work in April, after having COVID and having long term effects of just, you know, no taste. Just this, this chronic fatigue, and just feeling all of that. And in addition to you know, as I mentioned, all of the political things, and just faces and faces of black people who are being killed. It was very exhausting coming back to a hospital setting and having to be there emotionally, because I was still trying to figure out oh, my gosh, will will, you know, will I be- You know, the trauma of having COVID saying, oh my gosh, I nearly died, then coming back and like clinic and having to support all these different people. It was exhausting. It was, it was scary. It was you know, just- You kind of just existing, right, you're not living. Your'e coming in daily. But just just existing every

day, I'd finish up here. Go home and just lay on the sofa. In a state of depression, just sadness, like you're there, you're, you're your co-piloting and you're making meals, you're, you know, you're you're taking showers, you're, you know, talking to your children and being especially in my situation, being hyper vigilant with, with my family, and just being careful. And, you know, even though you live in a so called quote unquote, safe neighborhood, like, you know, my son had just got as his license. And as a young black kid, I had, like, all these these cautionary tales and examples of what he needed to do, and you know, don't dress like this don't wear that don't, you know, to make sure that he wasn't going to be, you know, try to we'll try to make sure that he wasn't going to be pulled over or, you know, just just very fearful of that. And, you know, just thinking back as I'm speaking, I think that at that time, it was just such a sense of fear. And just not wanting just something that was should have been such a great rite of passage, you know, everyone, you know, you get your license, you feel so happy. But I think it was the opposite not not, but it was quite the opposite for myself being you know, a black mother, a black woman during that time. So just overwhelming all together and just exhausting and scary.

Kit Heintzman 09:05

What are some of the ways that the support you are offering looked like what were the kinds of things you weren't doing that was supportive?

Lisa Nelson 09:12

So, in reference to my family, it was more of like, you know, just we're having obviously having more meals together, we try to focus on that piece, but like, as far as family support just being there, we were doing like online, you know, church services, and our faith is quite important to us. So we did a lot of bad a lot of just, you know, sitting outside and just being in nature, just doing more of those self care things, just kind of being together the family checking in with people checking with family members, from you know, from Jamaica from other, just trying to stay close with people even though we cannot, you know, physically be together in reference to like colleagues, I think that the support to them and it was vice versa. I think it was ra- reciprocated from some of my colleagues who had the bandwidth, the emotional bandwidth to deal with it. You know, in some didn't, they couldn't provide any support to me, which was quite frustrating because I'm usually the strong one. And so, you know, that wasn't reciprocated from some people. But for myself, with my colleagues, that really meant just providing emotional support to each other to, you know, including our patients to the emotional support, just trying to be, you know, active listening, validating their responses to some of the fears that they were feeling to white and black patients. You know, just trying to figure out like, oh, my gosh, will this be the end of this? You know, how can they, you know, sharing coping strategies, like, you know, how to deal with, you know, with people in their family members, or friends or colleagues, you know, that we're also on the Make America Great, again, rant or ideologies. And so, you know, supporting those patients and trying to help them to deal with, you know, losing their family members, not only to COVID, physically, but also a lot of my patients, they were so upset about the political climate, and what some of their family members were saying, you know, about Hispanic people, black people, and so that caused a lot of strife and dissension and families. And so they were upset, and I mean, parents were not speaking to their children, children, were not speaking to their parents, you know, people were being written off because of their political beliefs. And so that trickled down to, you know, more distress. And, you know, on the cancer journey, there was a lot of just, you know, supporting that, and, you know, helping them to cope and to deal with that, and to find ways to, to deal with the isolation and the sadness and the fear, and, you know, the deaths of their family members, you know, whether it's making referrals to outside organizations, outside therapists. And also, I saw an uptick in the amount of patients that I was seeing individually, because sometimes you couldn't even really sit in the infusion center to have these conversations. So I was meeting more on one to one with those oncology patients who are really struggling. So overall, you know, we were all trying to, you know, support and to just give each other the emotional support and guidance that we needed.

Kit Heintzman 12:39

Would you help me understand how your role as a social worker in this space ties to the emotional support that you are giving? Is that emotional support something that was a part of your work? Or was it something extending beyond that purview?

Lisa Nelson 12:55

Yeah, we do provide emotional support to, you know, oncology, cancer patients and their families. That definitely is a role that oncology social workers or social workers, I mean, dealing with when whatever setting you're in that emotional support is, is a part of that. But I think that it became more, it was more needed, it was more like on a day to day, yes, we're giving that reassurance for giving that support. But I think that as COVID- During COVID, the need for more emotional support, it became more involved and became a longer- You know, if you're providing counseling to patients, you know, it means that you have to give them more of your time instead of, you know, 20 minutes or, you know, it's now turned into like a half hour of crying and tears and you know, and just adding to more talk time for the, for the provider and you know, and more time with the patient, so then you're kind of like backed up with your other things that you're doing. So, you know, it was kind of like a domino effect, but that piece was, it is a part of it, that we a part of our role, but I think that it became a broader part or practice of our role and and requiring the required more time.

Kit Heintzman 14:36

Will you tell me a little bit about how your day to day was looking pre COVID?

Lisa Nelson 14:43

So my day to day and the clinic included are entailed come into the clinic going around in the morning, you know, you're you not only are we following the physicians and the office and the oncology office where patients come to get diagnosed and to disk got their treatment options and treatment regimen window when they will, you know, when will they start? Not only that we also follow the physicians in the infusion center. So in total we had about we have six doctors, oncology, hematology, doctors, solid tumors, you know, breast and then we all you know, breast everything long gastro gastric everything. And then blood cancers too. So what we would do is, we'd come in in the morning at 8 and we'll do, we'll have rounds, and just to kind of discuss new patients and patients who who are returning, talk about their diagnosis. And, you know, we have meetings, various meetings, throughout the day, we have support groups, in the evenings throughout the day paint sessions from various grants, you know, our staff meetings. You know, following up with grant writers to support grant funding for some of these programs that we have making referrals for patients speaking with patients, you know, seeing all of our new patients, making hospice referrals. You know, having our IDT meetings are interdisciplinary meetings with, you know, with whether it's palliative care, whether it's nursing, you know, our pharmacists, having, you know, our support services, you know, to have people come in to give us education on certain resources in the community that are available to our patients. So our day entailed, you know, it's a full, full eight hours of working and following up with patients, our administrators, doctors, making referrals to various institutions, following up with the inpatient social workers, you know, to find out what's going on with our clinics, our patients who are admitted to the hospital, you know, they get ill sometimes, and so they have to go over to the main hospital. So it involves all of that.

Kit Heintzman 17:03

Is there anything you're willing to share about what it was like to have COVID? And how you took care of yourself during that period of time?

Lisa Nelson 17:16

I think the main thing with COVID was just the fear. I think now, two years later, you know, I see people they get COVID now, and it's like, oh, yeah, we're home for five days. You know, it's kind of like a little reprieve. Right? We're able to, from what I hear anyway, it's like, yeah, we got, you know, I have COVID. But no, I had a mild cough, it seems more al- you know, like, it's allergies. And this one I had, it was pre-vaccine. So there was a lot of fear. I mean, they were, you know, especially here on the island, you'd hear, you know, super spreader parties or people were, you know, I remember hearing the first time, I think it was a family law island that had 11 family members who passed away and I remember thinking, Oh, my gosh, like, how do you bury 11 people at the same time, like, you think about the cost of it, the emotional toll the, how do you even you know, and even for people

who probably didn't, even at that time, I think, some of the the people who passed away, whether they were agreeable to getting, you know, to happen, a cremation, you know, they weren't able to have nothing else outside of that, you know, you think about New York, where, you know, we were in the epicenter of it. So it was a lot of fear. And for me having it, you know, cut, you know, a lot of the responses of my husband and I was just like, oh my gosh, could we be one of these people who want to be family members where our children are burying both of us or, you know, you know, I recall seeing on the news with the the buzzard flying over New York City, and which is totally like, it's not something that you see here in New York, but you know, bodies, human beings were like, in, you know, trucks trying to keep you know, trying to preserve their bodies until they were able to be buried or cremated. So, it was a lot of fear. When, as I said it was before the vaccine, so, you know, you know, just not being able to know like, what would be the outcome of this? I think one I recall as soon as I recovered, and it took a couple of months I had like, five months of not being able to assault sleep, you know, just this kindness I was someone who was able to walk three miles easily and I I couldn't even walk you know, 500 feet without being winded and I'm a so called healthy person, you know? So it was a fear of like, not you know, at that moment while oh my gosh, will I die? Oh my gosh, will I be able to do my lung hav- my, do my lungs have scarring will I be able to function the way that I used to, and it also opened up my eyes to as far as how our oncology patients felt and it kind of put me in their, you know, in their shoes a little bit for me to understand what it was like for them to not have the ability to get up and to do things like for a young woman, you know, for myself to lay there on the sofa and wanting to get up to make a cup of tea, and I could not because I had no energy. You know, I think about all of those patients who have had, you know, who have chemo and they're totally unable to get up to make themselves a cup of tea, they can't take a shower, they can't, you know, can't be a mother or father to their child or children. So it really opened up my eyes to a lot of just those feelings and just those experiences that our, our patients had. And have.

Kit Heintzman 20:55

When you realized you were getting sick, and that it was serious, how did you talk to your husband and son about it?

Lisa Nelson 21:02

I think like when we came home, because I came home, my husband was on the phone on a zoom call with the doctor. And then we were just like, and we have two children, we have a boy and a girl. And so we, I remember us being in the living room. And the doctor said to my husband he said, you know, my husband David, he said, You know, there's, you know, she says she's not feeling too well. And my husband said, you know, my throat feels a little itchy. And he said just operate like you guys have it. And I was just like, What do you mean, I feel I feel fine. Because it was four o'clock. It was a sunny day, it was in March. And I said what do you mean? He said, No, by the end of the night, you'll feel like you got hit by a bus. Excuse me. And I'm someone who comes home and like, you know, wash hands change clothes, make dinner, like I rest for a little bit and I make dinner and I remained on that couch. I think I had enough, because I changed my clothes when I leave work. But I recall changing my clothes. And I laid on that sofa from like five o'clock after the phone call with a doctor until 12 o'clock. And he was right. You know, his words were quite prophetic that I felt like a bus it hit me and it just gradually became worse throughout the night. And we were just like, oh my god, like what, uh, you know, my husband and I, I think we kept our fear to ourselves at that time. But our children, we, you know, we had thank goodness, we had two bathrooms. So, you know, the doctor was like, oh, yeah, isolate, you know, and I remember thinking to myself, how other people able to isolate? Like, what if it's somebody in like, a one family home? Or what it you know, I thought about those things, too, like, how are other people able to do this, because you can't see it, you're not sneezing, you're just like, it's just whatever it is. And so, I was able to, you know, we spoke to our kids like across the hall and was just like, You guys just stay in your room will you know, my husband and I are going to be over here. Try to you know, giving them instructions on how to wipe the place down with Lysol. You know, they'd go into kitchen first and get something to eat, you know, family and friends were like, driving to the house and leaving like all of these holistic homemade remedies. I think being from the Caribbean, you know, there were a lot of talks about different teas and things to, you know, different vitamins to take. So some of our friends were calling and even our parents, because, you know, our parents were calling very worried are

siblings. And so they would, you know, my, my mom, they would drop off fresh lemon or ginger and things like that by the door and just walk away, you know, and left it for us to when we did have the strength to get up and boil some of these herbal teas from scratch to try to get our strength back. But, um, you know, with in regards to speaking to our children, I think we were pretty open parents. And so, you know, we had, we were just like, Listen, if something should happen, you know, you'd, the will is here and, you know, we told our parents, you know, that our wills were by our bedside and that, you know, if anything should happen, like, you know, it has like, you know, what, who, you know, the kids that live with my mom in New York and maybe two summers and out of state with, you know, my mother in law, like, so we had all of those things set in place, and it was a difficult conversation to be had. And, you know, our kids, I mean, they're teenagers, so they were aware of existing wills and advanced directives. But, you know, I think our parents of course, they were just like, oh, no, you guys are gonna pull through but I think for us as parents and the chills and the fevers and the oh my gosh, the pain and just, I mean, you felt like an elephant was on your chest and you can't breathe and you can't go to the hospital. You're just kind of just sink or swim.

Kit Heintzman 25:06

I'm curious, what does the word health mean to you?

Lisa Nelson 25:11

I'm sorry, repeat that.

Kit Heintzman 25:12

What does the word health mean to you

Lisa Nelson 25:15

I think health means just as a sense of well being emotionally, physically, spiritually, to be healthy, I think that's the only thing you know, I think, you know, I say to everybody, oh, try, go, you know, don't pray for like, money or riches or whatever I just pay for, I just pray for health, like, I just want to be healthy. You know, to be, to be autonomous, to be able to get up and walk, I think we take those things for granted. So those are things that are healthy to me to be able to, you know, get up and walk every day to be able to see to hear to like touch things like just to be able to, to be able to get around, I think those things are very important, we take them for granted to smelling, being able to smell and taste is to be able to have a sense of, of wellbeing, mental health.

Kit Heintzman 26:16

What do you think, are some of the changes that we might need to make as a society to make that version of health available to if not everyone, the majority of the population?

Lisa Nelson 26:28

I think there needs to be so many changes, unfortunately, I hope to be like, I am not trying to be jaded, but I think that the way that the world is going right now, I don't think that there's going to be any resolution to health, physical, emotional. I think even even now, you know, now, especially two years later, post COVID, where, you know, we're seeing so many just challenges, you know, with gun violence and crimes, like it's all causing us like, physical and more emotional psychological is put in such a strain on us on all these levels. And so, you know, would be great to be able to have, you know, without being too political, like having politicians who care about you, and, you know, to be to have the amount of funding to be able to, you know, to do research, and to stop all the sickness and, you know, pull, you know, policing and, you know, having proper funding for certain things, whether it's community centers, or schools, and, you know, and even for policing to make sure that no police officers have what they need to co- to support our communities to, like, all those things, but I don't think that we will get to that place. Because there's so much I think that there's so many issues right now, it just seems I can't really think of anything right now. But I think it's really depends on each individual, right? You have to try your best to find whatever peace or well being, whatever health, you can find for yourself, because you can't rely on others outside of your immediate space to or your community per se. To help you with that. I think we have, you

know, there are things there in the community that is supposed to do that. But we can see for the last couple of months, especially that some of those things are not even working that were so it's difficult to try to find any, you know, those resolutions. And unfortunately, I don't know if there's anything in sight to rely on, you know, people to correct all these wrongs, because it is so much involved. Politically, financially. Yeah, so I hate to sound jaded, but that's the way that I see it.

Kit Heintzman 29:05

What does the word safety mean to you?

Lisa Nelson 29:11

Safety means like, again, physical when I think of safety, I think of physical, right, physical well-being, being safe. I always, you know, you know, not having an injury or, you know, somebody hurting you, you know, I think that for myself, like I feel safe to a certain level, but not all the time, I think with COVID, too, and with everything that's, you know, has went on and now especially with all the increase, you know, shootings and just gun violence. You know, I was in the store the other day and I was like I was in Trader Joe's and I thought for a moment. What if somebody started shooting right now like- What. You know, and I'm very conscious of that I'm conscious of, you know, even at work, you know, if I am cognizant of like, if I, you know, to be aware of the fear of any overhead messages, if I hear anything, if I hear any loud sounds in the hallways, even on the unit with patients, if a patient raised their voice or something, you're kind of, you know, for myself anyway, I'm kind of cognizant of like, okay, where are the exits? If I go to restaurants, I'm very cognizant of like, you know, how would I get out of here, if something happened if I'm in the supermarket, you know, being very much cognizant. So I think that safety, yes, you know, you want to be safe for you want to prevent, you know, an injury to yourself. But do I feel fully safe? No, because I know that in an instant, that could change no matter, I could be at home, I could be in a car. So I try not to have those thoughts come in, but they're there. And they're, I think they're more evident now than they were prior to the pandemic, with everything, with the uptick of everything that has happened or continues to happen. And especially being in New York, you know, if I get on the train, I'm very cognizant of what's going to happen, you know, I have mace. Like to say cognizant of like, you know, in case just in case, you know, so.

Kit Heintzman 31:20

I'm wondering what kinds of comparisons or differences you see in your experiences of hyper vigilance?

Lisa Nelson 31:27

Hyper vigilance, for me. It's like, just like the inquiry, like when I use it before, I was thinking of like, my, you know, my son and having to, just to be even more aware, like this increased sense of awareness. I didn't have it, and I hope I'm answering this correctly. I didn't have it. I mean, I was cognizant of safety, and all these different things prior, and just being a ra- arou- my surroundings and being aware of, you know, different traumas and people dying. And, you know, I'm aware of all of that. But I think that once I started seeing it more on the television, you know, that it was very traumatic. So like, that kind of led to me now, being more being more like, having more of those intrusive thoughts, right, like, or just that fear, like, oh, my gosh, what if something bad happens, if my son went out for a drive, I'd be like- oh, my gosh, like, you know, I wouldn't feel comfortable until he got back home. Or just, you know, it was. So that's where I was with it, then. And I'm still very conscious of it now. Because again, even if you're going out, because of all the increased gun violence, and all the other things that we're facing in our communities, even er- I won't say post COVID We're still in, you know, we're still having we're still in a pandemic, but um, Is it as bad as it was back then, two years ago, the start of, or I would say, May of 2020, because I use George Floyd, is that kind of like that reckoning or that waking up? Of, you know, all these emotions and triggers? That was a big trigger for a lot of us. So I think, you know, it's still there. And I don't think it will dissipate. I, you know, because it's onto something else, you know? I hope I answered that correctly.

Kit Heintzman 33:33

Your answer is perfect. Everything you offer is perfect. What was it like talking to your children about sort of the sort of constant influx of things happening over the last couple of years COVID, George Floyd, other political events?

Lisa Nelson 33:54

I think it was, I don't want to say it's easy. I think my husband and I were pretty open with our children. And I try to, you know, I think we're coming from the experience of knowing what it's like to be black in America, right? Be Black in our neighborhoods. My husband was the first, like one of the first people who moved into a town in Queens. And we're not old people, you know, we're like, middle aged. And I remember, you know, he moved into a town where they were like, burning crosses, because they didn't want any black people to come into the neighborhood. So I think we've had those experiences and even myself, being an immigrant here in America in the 80s you know, and being told to go back to your country and you know, all these derogatory statements and, you know, remembering and I mean, my husband, I are like, we're not 60. We're not 50. You know, and to we've relayed our experiences with our children and let them know that, unfortunately, no matter or what degree you get no matter, you know, you could have MD behind your name, you could have a PhD could have whatever, you'll still be looked at, as, you know, a nigger someday. You know, and that's what we were calling, that's what we've been called. And I remember the first time that I was call that and so I always worried with my children, what it was like, what it will be like, you know, and my husband, I've stayed up at night talking about this, like, what will it look like, when our children are, you know, every black person recall the first time do the day, the time you were wearing, they remember when they're when they're called that for the first time and those feelings and emotions that go with it, right? So all of that to say that we've been quite open with our children about what this life will be like for them, no matter how great our neighborhood is, and, you know, we're still the only black people that live in the neighborhood. So it's like, you know, and, and our children, you know, my daughter came home from school, you know, being, you know, told that she was less than or a quarter of a person because of her the color of her skin. So, you know, I think that there's no safe place, safe place except for our home and with us and talking to them and giving them these lessons and these giving them the stories and giving them our experiences so that they will know how to deal and cope with that. And to know that Yes, daddy and I have been through this. And, you know, and hearing stories from their grandparents and the sacrifices that they've had to make and things like that. So it wasn't difficult to have those conversations, I think they're kind of our topics, we're pretty open family, and they're topics that we have them come home, and we talk about them and you know, they're they're not, you know, they're not secrets they're not, it's not an off topic or fear of it is just to make sure, you know, we may feel I think as parents, I feel, you know, anger sometimes if I hear of something happening, but I, you know, I have to make, give them the education and give them the strategies to deal and to cope with, with these type of conversations and experiences. So it wasn't hard at all.

Kit Heintzman 37:32

How do you think your children have been handling the pandemic?

Lisa Nelson 37:36

I think, at first it was scary. Um, I think my son who is at that time, he was 18 in 2020. And, you know, at first, you know, it was like a joke, like, Oh, mommy, come on, COVID doesn't exist, you know, because you had all these con-, all these conspiracy theories and all these different things. And it was a joke, but I knew he just he would say, just to annoy us. And this after we got it, then it was just like more like, oh, like, you know, this is serious, because you know, his hi- high school kid, he was getting ready to graduate, it was the big joke, like, what is this? COVID They want to know, these people are crazy. And, you know, this is making me sense. But I think that once we got it, he, it really hit home for him. And I, you know, he, they both were very fearful of what could happen to us. But I think with us recovering from it. Them here, you know, it helped them to see that you can survive this, however, I think that they met or just even seeing on the news. They saw a lot of people even from here or even in Jamaica or other countries, everybody knows someone who has had it. And so you know, I think that for them, it's not like, it's not the same for us because they're they're awkward, they're operating from a side of us, right? They're thinking like, No, we're gonna be fine. Or, you know, none of our peers passed away

from it, but they've heard of, you know, people in their 40s who passed away or 50s and things like that. So I think there's still some level of disconnect.

Kit Heintzman 39:24

What happened with your son's high school graduation.

Lisa Nelson 39:28

So son, actually, he, this was in May of 2020. And so this school, you know, this is supposed to be a big thing. You know, May 2020, the big graduation Nope. So he didn't have a prom. And he didn't they had a they had like all these different meetings and to try to figure out what parents felt comfortable with doing. They thank goodness the weather was good. So they had a graduation, but they had it where it was outside on the field. Hold and like you'd on a football, football's a track field. And so they had people like it would, there was so much distance, I think it was awesome, though they had like, different you notice there was so much distance with you coming up to the, to the podium. I mean, it was just open, like open field as kids graduating. So that worked out well, they did, which I thought was nice as you're, as I can, as I'm jousting my, my memory, she was, you know, they were able to, they were able to have, they had like a path like for because we all live in, like this neighborhood. And so they all drove through the fire department with the trucks and the, you know, they had like, all the teachers, you know, it was like a car line, just driving through different towns, through different neighborhoods, honking the horn and celebrating and you know, and while the kids stood at the, you know, at the gates of their house, I'd say be, you know, be ready at two o'clock, we're going to be coming through your, you know, through your subdivision at that time. And so that was really nice, you know, you'd have your cap and gown on there waving at you. And, you know, you have the fire department honking the horn and the sirens going off. So that was kind of cool. You know, kids read out their windows, like it was nice. So yeah. Yeah, that was nice.

Kit Heintzman 41:21

How are you feeling about the immediate future?

Lisa Nelson 41:27

Just bear with me for one minute. Um, my immediate future. When you talk about safety, like I don't, or just like, I feel good, in a sense of you know, I'm in the immediate future, meaning like a month or, you know, just just that I'm excited because it's been, the weather's nice here in New York, it's nice and hot, which is great. So, I'm excited about that. I'm excited about, you know, my daughter, being a senior in high school, this, you know, officially senior this year, I'm excited about my husband and I celebrating another anniversary, I'm excited about, you know, in a month, I'll be going back home to Jamaica, just to kind of pay my respect to family members and friends who passed away childhood friends who passed away from the pandemic, and some that weren't due to the pandemic, but just to go back home and just to be, you know, on the land that I was born in the land that I was born, I feel like as if it's been, like really overdue, and I want to just like walk, just walk the streets, and the little towns where I grew up and just in, I'm just very grateful for all of that. So I'm looking forward to that. As far as work, I think that, you know, work is busy, but I'm grateful for today, and what will come, you know, post today, God willing, and you know, there's this word for a lot of, you know, a lot of work. And, um, you know, it's a sad situation. But I'm also grateful that I'm here to support people. And I feel hopeful. Yeah, I feel hopeful about the future. In respects to what I you know, to the immediate future. With myself, my family, it would just, just hope just so hopeful. It's all we have.

Kit Heintzman 43:25

What are some of your hopes for a longer term future?

Lisa Nelson 43:33

Again, I'd have to go back to health, I think. No, of course, you wish you had more money or more, you know, being able to like go on, like, you know, these, these trips, I think, you know, you know, a lot of because of COVID, I think that a lot of people really step back as a myself even though it's not like on a macro level, right?

Like, I think that with COVID, just stepping back and really reassessing what is important to us, I think that's one of the things that COVID did for us. But I think for now, and you know, I hope that I'll be able to just be healthy, to live and to be able to work and not be touched by some of these things that we talked about, whether it's violence, whether it's cancer, whether it's just sadness and sorrow, like, you know, we all have, it's a season for all of this, but I think that I just hope that I can continue to be healthy and to be able to do some of those things that you know, like travel and being more with our kids, you know, to do more things with our children as they're at, you know, as they're getting older with my family. So those are the things that I'm hopeful about and just being able to help other, you know, help more people and the capacity that I'm in now or so I'm looking forward to that. You know, schooling education, what, you know, what will be the next step that's trying to figure all of that out. So the main thing is, is hoping for health. So because with health and I could be able to do all of that, and a little money too, but like with health, you know, just be able to, to be to be able to do that.

Kit Heintzman 45:17

Do you think of COVID-19 as an event as a historical moment?

Lisa Nelson 45:28

Oh, absolutely. Absolutely. Absolutely.

Kit Heintzman 45:36

What would you want people in the humanities and the social sciences to be studying right now, so that we could understand the human side of this experience?

Lisa Nelson 45:49

I'm gonna say not only that, because I said before a COVID, not a kind of leveled the playing field. But it also showed us that, well, you know, it doesn't level the point it leveled the field to a certain level. But it also showed we, me as a black woman, equity was always in my mind or on my tongue, just always talking about it, talking about it, I think that COVID opened up opportunities for people who, you know, for people who didn't really think or see it, and now they're able to see the correlation to all of that. So my goal is that people continue to see the correlation between all of these things, you know, these, these barriers, these institutionalized, things that are set up to oppress and to discriminate against people. And I know that it's hard for not only people of color, but also people outside of that, you know, to acknowledge and to accept that. So I hope that people will continue to learn more, not only about these institutions, and these, these societal barriers that lead to inequality and equity, but also to really dig deep within themselves and try to figure out how can they dealing, you know, how can they help others? I think it's not. I think the other thing too, with COVID, is that it showed us that we're not like, you know, people always say like, oh, yeah, like, that has nothing to do with me, this happened to China, this happened in Africa, this happened here. And it's like, no, like, we're all globally connected. You know, we're not just here, and it doesn't affect us. So I think that people continue to not only find ways to learn more about themselves, learn more about others. It's definitely a teachable moment, not only for ourselves, but for our children, for our families. And just to continue to do more studies, I think, for myself, even to like wanting to look into see like, why are these things this way? And how can we help to, to kind of close some of those gaps in whatever areas we're in, we don't have to be even in the social sciences, I think that it really is about with all the racism and all the different things that came from COVID that opened up our eyes, we really should be very cognizant of what role we play, and what can we do to better ourselves how we can treat our neighbors, even if we don't agree with them, like, you know, like, what are some of these things that we can support others? With? Just the thing that comes to mind is this like, you know, cultural humility, like always learning about whether you're in social sciences or not, or in the healthcare industry or whatever, like just to try to be a constant be a learner, always learning and looking to looking for opportunities to learn more about yourself and others.

Kit Heintzman 49:03

I'd like you to imagine talking to a historian in the future, someone far enough away, that they have no lived experience of this moment. attentive to like, how easy it is to leave all of these gaps in history. What would you tell this historian cannot be forgotten about this moment?

Lisa Nelson 49:30

I think the- What can't be forgotten about this moment, I think is just the many black faces. The only thing I can think of is George Floyd and there's so many things happened during the pandemic, but that's one of the things that stood out to me, you know, May 25, 2020. You know, seeing that video that can't be omitted, that can't be erased, that can't be rewritten. Or be written with pleasantries or to- You know, I think that that's something that will forever go down in history as a day of you know, mourning, grief, anger. And that just, it's just spread, you know, so just it was literally a global reckoning seeing that. Um, so yeah, that will be the main thing from 2020. I mean, yeah.

Kit Heintzman 50:37

I want to thank you so very much for the generosity of your time and your answers. Those are all of the questions I know how to ask right now. But if there's anything you'd like to say that my questions haven't made room for, please take some space and say so.

Lisa Nelson 50:54

No, it's an honor to be able to speak and I hope that others will learn or to be willing to share their stories. I thank you for the opportunity. Yeah, thank you.

Kit Heintzman 51:06

Thank you.