

Transcript of Interview with David Lerner by Kit Heintzman

Interviewee: David Lerner

Interviewer: Kit Heintzman

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Location (Interviewee): Iron Mountain, Michigan

(Interviewer): Unknown

Transcribed by: Kylee Mamon

Some of the things we discussed include: Growing up raised as a Chabad Hasidic Jew and leaving the religion, returning to school, and entering the workforce as a pharmacy technician. Working in a hospital pharmacy at the beginning of the pandemic. First hearing about the pandemic in January 2020 from the BBC. Choosing to mask pre-mandate. Tensions in the workplace. Hospital administration carrying on as usual, workers being laid off. Hospitals making money off of elective procedures, which stopped during the pandemic, lots of terminated and unrenewed contracts. Sending medicine off to patients on ventilators. Some of the beliefs circulating early in the pandemic before there was much knowledge/certainty. The importance of pharmacy technicians in the everyday operations of a hospital and healthcare treatment. Temporary and contract work in the healthcare industry. Therapy and mental illness. Living with parents, including +65-year-old father who is immunocompromised, isolating within the home and going grocery shopping. The uncertainty about Trump leaving office in January 2021. Wasted vaccination vials, problems with rollouts. The inadequacies of the American relief package. Still having limited access to PPE, N95s. That parts of the USA lack potable water, problems with air quality. Sense of safety changing post vaccination. Getting advice from healthcare professionals, the CDC, the news. Missing dating and meeting new people. Struggling with self-care. The resiliency and bravery of working people. The consequences of quackery.

Kit Heintzman 00:00

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

David Lerner 00:08

Hi, good afternoon. My name is David Lerner. It is March the first 2021 and the time is just shy of 3pm, Central Time.

Kit Heintzman 00:24

And do you consent to having this interview recorded, digitally uploaded, and publicly released under a Creative Commons License attribution noncommercial Share-alike?

David Lerner 00:34

I do.

Kit Heintzman 00:36

Could you please start by introducing yourself to anyone who may end up listening to this? What might you want them to understand about you and the position that you're speaking from?

David Lerner 00:45

Um, well, I grew up Hasidic and the Chabad Hasidic sect, and had a you un- a un- if you'll pardon the pun unorthodox education. And I eventually when I was in my 20's, I let I left the religion and, you know, went back to school. And while I was at school, I started out as a pharmacy technician, and I've been a pharmacy technician, on and off since I want to say 2012, 2013.

Kit Heintzman 01:38

Would you be willing to share more about your experiences as broadly or as narrowly as you would like, with health and the health care infrastructure before the outbreak of the pandemic?

David Lerner 01:52

Well, I had worked at a reta- in most of my time in healthcare, I've worked in retail healthcare settings at Walgreens pharmacy for-for several years. And as well as a couple others, I had also done, you know, some phone banking for healthcare, but a few months before the, the outbreak or, you know, the when it began, I started working at a hospital in a pharmacy and getting to see a hospital go through that was very interesting.

Kit Heintzman 02:39

Would you say more about what was interesting about it?

David Lerner 02:43

Well, emotionally peop- is how people changed. There was some antagonism between the nursing department and the pharmacy department. At the hospital, a lot of that seemed to go away because we were all under a lot of pressure during, you know, when people when, you know, in during those months, I literally had a nurse telling me say I love you to me, which was very strange. So yeah, people changed, some people got more warm, but, but what also was that we saw that the administration didn't change, and that they still did cutbacks. There were people that were laid off my-my-myself concluded I was supposed to have my contract renewed. And I did not because COVID caused so many fewer people to go for elective procedures and where there's a lot of money to be made, that they let a lot of people go also, we got I got to see, you know, when-when, when in like, it felt overnight, everyone was wearing masks and hospitals. You know what I mean? Because initially, a lot of people weren't.

Kit Heintzman 04:29

What was that change like?

David Lerner 04:30

Always worrying because knowing that you're in the same building, as people, you know, who are sick and some who died of COVID. And knowing that, you know, preparing their medications that was you know, it was very obvious based on cert- you know, which medical like they were is a huge run-on medications like Lovenox, blood thinners and so many people were ventilated, they needed to make sure that they didn't develop blood clots so that they put them on blood thinners. So, you could always tell when you were working on a on a particular load, it was a relief when they put that drug in the cab- in the medical medicine cabinet upstairs. I never liked getting the that that particular position where I had to fill Lovenox during those days the-there are people who until it became you know, mandatory to wear masks, whereas we're making a point about it almost as if what people believed than it was where it was. And I'm not exempting myself, because there was so little real information out there back then. So basically, there was all sorts of rumors about-about the virus, that it wasn't so serious that it would go away and warm weather. And there are people who didn't take it did not take it seriously and wouldn't wear masks until it was absol-absolutely, you know, absol-absolutely mandatory. And I don't understand that, like how people who work in the health care fields wouldn't wear a mask. You know, you wear a mask at work when you have a cold in hospitals, you know.

Kit Heintzman 06:30

Would you tell me a little bit about what your day to day was like before March, February, and March 2020?

David Lerner 06:53

Well, it was I would either have a 7am or a 3pm shift. 7am going to 3:30 and the 2 and the 3 and the 3 o'clock one going to 11:30pm involved a lot of filling prescriptions and filling orders and preparing orders for and there was delivering orders. And basically, it's there, the pharmacy department is just explain to anyone who doesn't understand in a hospital is really what keeps us going. When the doctor says get give them 5cc's of whatever where do they get that drug from? From the pharmacy. Who delivers it to them? The pharmacy, you know. In bigger hospitals, they'll have medicine cabinets, and still but so anything complicated any IVs that are prepared in a hospital come from the pharmacy. I'm oversimplifying it, of course. But it's a very essential part of the hospital infrastructure. And pharmacy technicians while the pharmacists are the ones that approve the orders and check the orders, the technicians do all the grunt work of preparing orders and-and, and whatnot while-while the pharmacist checks them. And it's really doesn't, it all boils down to that there was a lot of putting away of orders that took up several hours of my day, because you get a huge pharmaceutical delivery every day. Except weekends of course, and yet put that away. Nighttime if I was working the second shift, I'd have to ask after filling the night cart all the night card orders that is the we'd have to deliver them to the either the Pyxis or the Omni saw machines and now and that's the long and short of it. Is there anything more you want to detail on?

Kit Heintzman 09:36

Um, first I want to say that's a lot of responsibility, so thank you. The next question I would have if you're comfortable speaking about it would be what the relationship between the work part of your day to day was and the life part beyond work.

David Lerner 10:00

No, I kept at that time, I kept my working life pretty separate. I had a few at a few people at Facebook friended from work. But it was a temporary, it was a temporary gig, which one I had been hoping would turn into, would turn into a permanent gig. But that wasn't in the cards. My personal life was then I was still very much going through it at the time was I was going through a recovery from a mental health incident that I'd had the year before. So, I was so I, you know, my, that I had weekly therapy. I don't know if it was twice a week at that time. No, I think it was just once a week. And I saw I saw and still see a psychiatrist once a month. So, except for a few friends that I have in the Detroit area. I wasn't, you know, I was staying at my parents' house then. And, you know

Kit Heintzman 11:18

What are the restrictions been like where you are?

David Lerner 11:24

Um, well, a lot of things are closed. Still, like museums and whatnot. And libraries are only doing limi- I mean, there was restriction. The restrictions went in a way the restrictions never really affected me. And still, I'm still having to this day, because I still have to go to work. And if I needed food, I would go shopping my, my parents, especially because my parents keep kosher, right. And they need kosher food from the kosher food store on Greenfield. And I would often do the shopping for them, you know, taking an which the way I see it now was I was taking an additional risk. But you know, needed to be my family. It's been a shocking to see how many people won't wear the mask. It's such an easy thing to do. And it works so well. And so, the mass restriction made, you know, made sense to me since I was doing it at work anyway. And I was doing it before everyone else was-was, you know, before it became a mandate from you know, the government, I was still going into stores for the mask on. And I had to one of the things about my quarantine experience that was different, that was a lot of people in health care, I know I'm kind of rambling on a bit, but I'm going to put this detail in here. As far as restrictions go, I had to move into my parents basement, you know, as opposed to living like a normal person upstairs because my dad is immunocompromised. And I work in a hospital which was not a very good combination of the two things, and I know I'm not alone, many nurses and doctors would-would spend time and hotels rather than go home to their family. Which is it's heartbreaking really. And it's a detail that I hope gets remembered as is-is just how much you know peoples have to because their risk already risking their lives that additionally cut themselves off from their families and loved ones.

Kit Heintzman 14:26

Would you be willing to tell us your father's age?

David Lerner 14:30

My father was born in 1956 which makes him, that- give me a second 21 plus 44, come on I can do this. 66 years old. I think.

Kit Heintzman 14:49

What do you remember about when you first heard about COVID-19? I know you already touched on pieces of this.

David Lerner 14:56

I would regularly listen to public radio, National Public Radio, on my way into to and from work, it was, it's kind of been my go-to Radio Station since I'm not much of a music guy. And I've been hearing it on the World Service. I think it was the BBC World Service. I've been hearing a lot about it already in January, starting in January. And I remember thinking, geez, I hope that doesn't reach here. I remember hearing out, they would have, it was building, you know, the little, the amount of space of takeoff, my mind grew and grew, because I constantly heard more about it every day. And it was getting worse and worse. And eventually, I kind of just accepted that it was going to be coming here. I just still even-even so I didn't have the capacity for understanding how devastating it would be, or how, you know, idiotic, you know, some people would be about it.

Kit Heintzman 16:21

What have been some of the most significant issues on your mind over the last year? Understanding that it's been a really big year, in addition to COVID-19.

David Lerner 16:33

While I was preoccupied with for the, you know, bigger a big issue that preoccupied me was whether Trump was actually going to leave office. I have to say that I have had you know, oh, that's my dryer, concerns about how the vaccine rollout is going to go, they just approved I think was yesterday in the US, the Johnson and Johnson vaccine, you know, adding on to the Pfizer and the Moderna vaccines that we already have approved. So that's a great thing. But I'm very worried about how the rollout is going to be because you keep hearing stupid stories about this many vials getting-getting wasted. Or a doctor finding, you know, patients that can get the vaccine. Also, he doesn't have to waste to those getting fired. You know. So, the vaccine rollout has been very much on my mind. Can you repeat the full question for me?

Kit Heintzman 17:59

Of course, it's been such a full year. I'm wondering what some of the most important issues have been on your mind over the course of this very long last year.

David Lerner 18:12

I mean, I'm finally I'd add the relief package that in the in the US has been utterly lacking. I think all we've gotten so far has been what \$500 of you know, which is laughable compared to other you know, other places, and people are hurting. And that's important and I could use the money.

Kit Heintzman 18:44

May I ask what health means to you?

David Lerner 18:51

What health means to me? Well, it kind of means dignity to me because there's one thing that that illness can't can do is come-completely sap you have your dignity. And but it's a tricky question when you think about it. What does health mean to you? Well, it means dignity. It means it can mean stability. I think one of the things that we're talking about health, mental health always needs to be to be in there in that discussion in that thing, you know, it's not just physical health, but you know, mental without mental health your you can just have a very, a very in shape. neurotic you know.

Kit Heintzman 20:08

I was wondering, again, you've already touched on part of this but if there was anything else you'd like to say about how you perceive the current medical infrastructure to be managed getting COVID-19 and touching on ideas about policy and personal responsibility.

David Lerner 20:27

Well, I think the people working on the ground are doing the best the best that they can. Although it's funny, I work for a hospital, and I hear things from people I work with. I wouldn't want her for a nurse, so there's an element of that. But hospital administration's need to get their shit together with regards to keeping because keeping people safe, they need bigger stock rot obviously what we need is that one of you touched on this simple thing one of the things that we've learned is that we need bigger pop stockpiles of PPE you know, because we don't know when we're gonna need them and you still can't get an N95 mask. It's been nearly a year since you could.

Kit Heintzman 21:33

What are some of the things that you would like for your own health and the health of people around you?

David Lerner 21:45

For my own health I wish local governments in general would do a better job at policing the water supply. I live in Michigan, and we've had our share of you should be able to open the tap and it and not worry is it safe. Air-air quality is-is I'm often on my mind and being from the-the US I mean I want a national health plan you know. Because I don't know how long I can keep this up the struggling to maintain health insurance it's very difficult.

Kit Heintzman 22:43

What does safety mean to you?

David Lerner 22:46

Peace of mind. This is going to be funny, but you know the fear the feeling when you know when you lock your doors behind you, you know what I mean? Safety means not having to worry excessively and, and it can mean different things for different people. You know, some people are- I mean for some people safety can mean be behind the wheel even though it's a very dangerous thing, but it feels like for them behind the wheel of the car. But-

Kit Heintzman 23:50

-could you tell me what you mean by that?

David Lerner 23:53

Oh, some people feel very comfortable driving. And that's where they feel a sense of safety. Even though it's a rather dangerous activity.

Kit Heintzman 24:13

How have you been determining what feels safe for you right now? And how have you been having those conversations with other people?

David Lerner 24:21

Well, most of the people I associate with have a shared vision of what is safe. For example, restaurants eating out in restaurants is among all of my friends completely. You know? If you if you do it you're complete you know you can one of my friends, put the script says if you eat out in a restaurant, you are my enemy. And, but we just deter him usually when it comes to safety things, we just have a conversation and we're usually all in agreement anyway. So, and if somebody brings up that they don't feel safe about that we respect that, you know? Because usually it's I mean, I'm already vaccinated. So, my sense of safety has definitely improved, you know, because before then I was at a rather high-risk category. You know, working in a hospital with sick people and all that, including COVID patients, although we haven't had them, have them for like a week. So that's good.

Kit Heintzman 25:43

What kinds of sources have you been training to in order to determine what feels safe for you? You've mentioned sort of community and consensus, I'm wondering what else there may be.

David Lerner 25:52

I read The New York Times and The Washington Post. I trust I rely on CDC advisements and, you know, health care professionals. Um, it helps that when you worked with the so many people that work

that work and with pharmacists is that they can read the hard-to-understand data and break it down for you.

Kit Heintzman 26:36

May I ask how you feel about the immediate future?

David Lerner 26:42

Oh, the immediate future as in the next six months?

Kit Heintzman 26:45

Sure!

David Lerner 26:48

I feel I feel oddly optimistic, I think we are going to get through this. I think we're going to you know, enough people are going to get vaccinated, that it will become much less of an issue. It's never going to fully go away. And, but even if we have to get a shot like this every year, that's still you know, much, much better than the alternative. And I think eventually [inaudible], you know, things will start whether we like it or whether it's too soon or not that may be then things might get open, open up too soon, that would be a problem because you know, because it exacerbates the situation. But things are eventually you know, the I think you know, eventually the economy will return but you know, there are underlying issues with the economy that needs addressing that are far beyond the scope of this of this interview.

Kit Heintzman 27:59

What are some of the things you hope for-for the long-term future?

David Lerner 28:04

The long-term future is, I want to go out on a date again. But meeting new people isn't is somewhat risky. There are proposition these days. And so, I've just not been dating anyone. Which is a shame because I'm in a brand-new town and nobody knows me here and think of what I could think you know, a whole new a whole new dating pool but alas.

Kit Heintzman 28:41

What are some of the things you've been doing to take care of yourself in the last year?

David Lerner 28:49

Take care of myself? I'm really not good at that. Takes deep breath. What have I been doing to take care of myself? Well, I've, I have since coming up here I've gone out I've done some outdoors activities and hikes. I just did one today. In fact, the short one I had I find walking really grounds me and I've been doing a lot of walking in the last year in the last 12 months. haven't really been able to last few because

of well, winter. I don't know that I mentioned where I am in there but I'm an Iron Mountain Michigan which is in the Upper Peninsula. So difficult up here.

Kit Heintzman 30:06

This is the pandemic question and it's a bit odd. We know that we're sort of in this moment where there's this booming biomedical research happening. I'm wondering what kind of research you think people in the social sciences and humanities could be doing right now, to help us understand this moment?

David Lerner 30:30

I think there's a lot of trauma going on that needs some study. I think because it's affecting everyone from children that can't see their friends to, to the very elderly, who may not understand at all what's going on, but their entire routine is-is-is disrupted. So, I would like to see some research into reading, you know, the kind of trauma people are going through because of COVID.

Kit Heintzman 31:12

And this is the last question. So, this has been an oral history interview. And one of the assumptions I come to it, as a historian with is that I can't anticipate what a historian 50, 100, 200 years from now is going to value.

David Lerner 31:30

Right.

Kit Heintzman 31:31

I want to ask you, what kinds of histories you hope are written about this moment. And if you could speak for those historians, tell them what you value right now, as someone living in this moment?

David Lerner 31:48

Well, hello, historian, it's nice to see you through-through the mists of time. What I would like to tell you about-about this moment, in particular, is the resiliency and the bravery, of working people who didn't, who didn't, despite who had no choice, but to go to going to work. And-and I think, you know, from, you know, everyone from delivery drivers to healthcare workers, you know, people who kept everything going, because there was actually there were shortages at the beginning of this whole epidemic. Because people were afraid and so they fought, you know, let's stalk up on toilet paper and on canned foods. And it was a bit of a disaster, really. And if it weren't for the infrastructure of all of the workers doing their jobs, when really, they should have been home safe, you know. Shouldn't you all have robots to do this for you? I definitely said the one of the untold stories is the pandemic is the of the working class.

Kit Heintzman 33:22

I want to thank you so much for the time you've taken and everything that you've shared with me today. And the last question I'm going to ask is, if there's anything related to COVID-19, the last year that you would like a chance to say something about that this interview hasn't yet given you the space to cover?

David Lerner 33:44

Give me a moment to think. I feel that people are not going to remember the COVID hoaxers, the quacks, because just as I mean, I don't think they'll be forgotten. But I think when people discuss this plague in the future, it'll, it'll mostly be about the numbers and the wares and who created the vaccines. And but the quacks were there, and they were real, and they were disruptive, and they and they got people killed. So y'all should remember the quacks.

Kit Heintzman 34:50

Thank you so very much for this interview.

David Lerner 34:54

Welcome.