

American Diagnosis Season 4 Episode 1 / It's Up to You / TRANSCRIPT

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Navajo language translation by Sunny Dooley.

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[Audio plays of pine siskin birds recorded in Coconino, Arizona, courtesy of contributor Parker Davis via the Macaulay Library at the Cornell Lab of Ornithology (ML153777441).]

Céline Gounder: The forest was normally busy this time of year. Full of trucks and families driving through.

Sophina Calderón: But last summer during COVID, it was very quiet out there.

Céline Gounder: This is Dr. Sophina Calderón.

Sophina Calderón: Hi. *Shí éi Sophina Calderón yinshyé. Kinyaa'aanii nishlí. Lók'aa'dine'é bashishchiin. Tó Naneesdizi déé náá sha. Áshijhi dashicheii. Azee ílîni nishlí.*

I introduced myself in Navajo and I said that I was of the towering house clan born for the Reed People. My maternal grandfather was of the Salt Clan and my paternal grandfather was of the Edgewater Clan.

Céline Gounder: Sophina is a family physician in Tuba City, Arizona. But growing up in the Western Navajo Nation, her family would spend a lot of time in the forests near the Grand Canyon.

Sophina Calderón: My dad would get us all up at about 5 a.m. or so, and we'd all jump in the truck. And they would have their chainsaws and axes, and we would head on out to the forest

Céline Gounder: They were going to haul wood.

Sophina Calderón: Wood hauling is a whole process that's usually happening throughout the summer and into the fall months to prepare for winter for when the cold temperatures arrive, and to be able to warm our homes.

Céline Gounder: Sophina says roughly 30% of the homes on the Navajo Nation do not have electricity or propane heat. Many of these families rely on fuel wood to heat their homes. Many citizens of the Navajo Nation, the Diné, buy their firewood at gas stations or a local store. But some families, like Sophina's, still get permits and collect wood in public forests.

Sophina Calderón: And it's part of what I remember as a kid, just running around through the forest and, even as little as I was, getting a sense of feeling important and a part of the team.

Céline Gounder: Sophina's dad used to lead these trips. Now it's the job of her younger brother Ames. And it's Sophina's job is pack lunch for everyone.

Sophina Calderón: Because my family knows it's my favorite thing to do. So I always, sort of by default, end up being the person that brings lunch.

Céline Gounder: Before the pandemic, Sophina and her family would see a lot of people out in the forests collecting wood for the winter. But not on that day.

Sophina Calderón: During one of our picnic breaks, when we were chatting, my brother said, “You know, did you notice how all the trucks that are usually driving back and forth out here — aren’t out here?”

Céline Gounder: Many tribes in the Four Corners region had some of the highest covid infection rates in the United States at the start of the pandemic. The Diné were no exception. Lockdowns and curfews prevented a lot of families from collecting firewood during the spring of 2020. But by the time some of these restrictions eased ... many had not returned to the forest. It dawned on Sophina that many people who would have been there that day had been lost to covid. And the loss of a wood-hauler in the family was no small thing.

Sophina Calderón: The wood-hauler in the family is typically a leader in the family. It's typically the person who manages the labor around your whole household. So if you lose that person, it's a loss of a lot of things. So, to hear families losing all these people, it sort of gives you a visual of, like, you know, that household must be really broken right now.

Céline Gounder: Sophina is a physician. She is no stranger to how dangerous covid could be. But that afternoon, sitting in a quiet forest, she felt the weight of the pandemic in a new way.

Sophina Calderón: And so we just sort of got this sort of gloomy sense of, you know, what are we going to do? What are, what are those families going to do? Where's the help gonna come from?

[Theme music up]

Céline Gounder: The covid-19 pandemic is just the latest health threat Native people have had to face since the arrival of European settlers. Programs of extermination, termination, and assimilation or neglect have harmed the health and well-being of Indigenous people since the founding of the United States.

In the years leading up to the pandemic, I had the opportunity to care for patients part time at several Indian Health Service and tribal health facilities around the United States. I worked at Gallup Indian Medical Center in Gallup, New Mexico; the Whiteriver Indian Hospital in Whiteriver, Arizona; and Pleasant Point Health Center in Sipayik, Maine.

The stories I heard from physicians, patients, and community leaders during those months inspired the reporting and stories we'll be sharing this season. During my time serving these communities, one theme came up over and over again: resilience.

In this season of *American Diagnosis*, we're going to share stories of Indigenous people like Dr. Sophina Calderón who are taking action to protect the health and well-being of their communities in the face of incredible odds ... and we'll ask hard questions about why Native people are confronting so many challenges to their health.

In this first episode, we're going to look at why the Diné were so vulnerable to coronavirus...

Ernestine Chaco: And because of all this red tape, all of these things that happened in the past, the court cases, the laws, all of the politics — have sort of tied our hands behind our backs as far as how we provide for our communities.

Céline Gounder: ... And how they came together as a community to fight covid.

Jill Jim: We always see this term in our language, that “*T’áá hwó’ aji t’éego*,” it’s up to you.

Céline Gounder: I’m Dr. Céline Gounder and this is *American Diagnosis* Season 4: “Rezilience.”

[Music out]

Céline Gounder: When the first cases of coronavirus were reported, no one knew what to expect.

Jill Jim: In our own culture we don't talk about death and I think that's one thing that I remember clearly ... talking to some elders about: It's going to come. We just don't know when.

Céline Gounder: This is Dr. Jill Jim.

Jill Jim: I will introduce myself in Navajo. So, *Lók’aa’ dine’é nishlí. Táchii’nii bashishchiin. Áshjiji dashicheii. Tzilani dashinalí. Naatsis’áán déé náasha. Diigii ahtahgo asdzáá nishlí.* So, just a little bit of English: I am of the Reed People Clan and born for their Red Streak Running Into Water Clan, and I'm originally from Navajo Mountain, Utah, on the Navajo Nation.

Céline Gounder: Jill is also executive director of the Department of Health for the Navajo Nation. She's been overseeing the tribe's emergency response to covid-19, or as they say in Navajo:

Jill Jim: *Dikos Ntsaaígíi-19*, meaning, The Big Flu in 2019.

Céline Gounder: The first covid case was reported in Kayenta, Arizona, in March 2020. The Navajo Nation acted swiftly. They locked down the entire town.

Jill Jim: Public health nurses were going into the community to all their homes. They were providing food and medication to them. But still, by the time we try to make that sort of like a small bubble, I think some of those people that went into that community right before began spreading it in neighboring communities and it continued to spread.

Céline Gounder: The Navajo Nation quickly had one of the highest per capita covid infection rates in the United States.

Jill Jim: At the time when we hit our first surge, we were hitting rates higher than New York at the time, and it just, it just grew.

Céline Gounder: Jill says the virus was unpredictable. It seemed to jump around the Navajo Nation at random. And all the while, the deaths mounted. Tribal leadership ordered mask mandates, lockdowns, and curfews. These were among the strictest covid prevention measures in the country.

Jill Jim: Those decisions were made only because I think it was so uncontrollable.

Céline Gounder: Many deaths during the first surge in 2020 were connected to high levels of preexisting and chronic conditions on the Navajo Nation. Things like obesity, diabetes, high blood pressure, and heart disease.

Jill Jim: And of course, what we deal with the most is just the low social economic status that we deal with here.

Céline Gounder: Dr. Ernestine Chaco had been thinking about these same underlying issues for a while.

Ernestine Chaco: Hello, my name is Ernestine. So, *Yá'át'tééh. Shi ei Ernestine Chaco yinishyé. Tó'ahani nishli. Haltsooi bashishchiin. Naakaí dine'é dashicheii. Kinyaa'áanii dashinalí.* What that means is that I am near the water, borne for the Meadow People, and my paternal grandparents are Towering House and my maternal grandparents are of the Mexican Clan.

Céline Gounder: Ernestine grew up on the opposite side of the Navajo Nation from Sophina. A town called Standing Rock, New Mexico.

Ernestine Chaco: There was probably no traffic, no traffic light there.

Céline Gounder: Growing up in Standing Rock, Ernestine's family didn't have a lot of things many Americans take for granted.

Ernestine Chaco: So it was very, very kind of tough living. But I think that part of tough living is why I'm so determined and why a lot of things, why I can push through a lot of barriers today.

Céline Gounder: Ernestine used that same determination to study hard and go to college. She went to medical school at the University of California-Davis. And *then*, she took a leave of absence to get her law degree from the University of New Mexico.

Ernestine Chaco: My goal in life was to always try to understand the poverty that I grew up in, because I knew it was more deeper than just my mom not having a good job or my mom having to have food stamps. There's something deeper going on.

Céline Gounder: In the spring of 2020, Ernestine was back at UC-Davis, just months away from finishing her M.D. She became frustrated with the news coverage of covid on the Navajo Nation.

News Clip: I want to kind of shine a light on the Navajo Nation because it hasn't really gotten a lot of attention.

Ernestine Chaco: I remember watching NBC, ABC, like, any channel, you'd see news clips about how bad covid was hitting the Navajo Nation.

News Clip: Well the Navajo Nation, located in parts of Arizona and New Mexico, has been one of the hardest-hit areas of covid-19. Now, it has the highest infection rate in the United States.

News Clip: They say the spread of the virus is, quote, "uncontrolled."

Ernestine Chaco: It just showed a lot of the poverty and didn't really explain why things were happening.

News Clip: The Navajo Nation is larger than West Virginia, but 40% of the people who live here don't have electricity.

News Clip: Many of these people, you guys, are living without running water or electricity.

News Clip: With rampant poverty, lack of infrastructure, covid has been an immense challenge.

News Clip: So this is a very vulnerable population.

Ernestine Chaco: It made me question and made me think about *why* it was happening. And I think that's part of the reason why I started researching and why I started thinking about those issues.

Céline Gounder: In law school, Ernestine would often get questions about how the law affected health on the Navajo Nation. At the time, she struggled to explain the connection.

Ernestine Chaco: But then, when covid happened, I felt like a lot of these issues really brought to light a lot of the things that I had been thinking about during law school.

Céline Gounder: In public health, we call these *social determinants of health*.

Ernestine Chaco: So these can be things ranging from social economic status. It can be access to resources. So it's looking at other causes of issues that can create barriers to health.

Céline Gounder: One of the most talked about social determinants of health is the lack of access to healthy foods.

Ernestine Chaco: So, for example, on the Navajo Nation in New Mexico, there are only three to four grocery stores in a large base area of the reservation. So people would have to go an hour to two hours to

get access to fresh produce. So when you talk about that, then you're like, oh, well then, if they don't have access to fresh produce, then they will not have good diet, therefore can lead to more diabetes.

Céline Gounder: This lack of healthy food options can also contribute to the spread of coronavirus.

Ernestine Chaco: For example, Gallup is a major intersection for a lot of Navajo people who would travel hours to get to the grocery store there. So there's a lot of lack of access that crowded people into certain cities. So there's this, a lot of different barriers and things that happened during covid that made the rates of covid worst on our reservation.

Céline Gounder: Housing is another one. Many Diné households are multigenerational. Grandparents, parents, and children often live under the same roof. Many Diné families choose this arrangement because of cultural values around family and respect for elders. But, for some, a lack of housing on the Navajo Nation makes multigenerational housing a necessity. During the pandemic, it created a situation where the risk of coronavirus exposure was dangerously high for older family members. Ernestine looked at what was happening around her on the Navajo Nation and started to think about something called the Marshall Trilogy. That's a series of Supreme Court cases dating back to the 1820s that make up the foundation of tribal sovereignty in the United States. And one case in particular started to feel especially important: *Johnson v. M'Intosh*.

Ernestine Chaco: So basically this person Johnson bought a tract of land from the Piankeshaw Indians.

Céline Gounder: The Piankeshaw lived in what is now Virginia. After the American Revolution, that piece of land Johnson bought became part of the Commonwealth of Virginia and, by extension, the United States.

Ernestine Chaco: Then 35 years after they gave that land to the United States, they sold it to M'Intosh.

Céline Gounder: Johnson sued. He claimed the land was his because he bought it from the Piankeshaw before the United States even existed.

Ernestine Chaco: So this became, like, a very contentious case, because then it became the question of whose land is it? Who does this land along to? Does it belong to the Native people or does it belong to the United States?

Céline Gounder: When we come back, we'll hear what the court decided ... and how the repercussions of that decision are affecting the health and well-being of the Diné and other tribal nations today.

[Midroll]

Céline Gounder: The U.S. Supreme Court decided that the land belonged to the United States. The Piankeshaw did not have the right to sell the land. Instead, the court came up with something strange. Something that has had a huge impact on Indigenous people ever since. The right to occupy — but not own — the land. Here's Dr. Ernestine Chaco again:

Ernestine Chaco: The way I describe this occupancy is, for example, you have a car, right? You have a title to the car. You can sit in your car, you can drive your car. That is what it means to own the car.

Céline Gounder: But under the right of occupancy, things are different.

Ernestine Chaco: What it means is that you have the right to drive the car. You have the right to sit in the car, you have a right to tell who can be in your car, but you can't sell that car because that title belongs to somebody else.

Céline Gounder: In this case, the United States government.

Ernestine Chaco: Native people can be on the reservation, they can have a home on the reservation, but they can't sell that land. And so a lot of people will live in multi-generational homes instead of trying to build homes because, you know, we do have all this space, but there's a lot of barriers to access it. And so some people, it takes 10 to 15 years just to get through this, just to break ground. And some people don't even get that far, because there's too much red tape.

Céline Gounder: Laws and court decisions governing Indigenous people's right to occupy, own or lease tribal land are notoriously complicated. They differ widely across the United States. And we won't dive into them here. The thing to keep in mind, though, is that these decisions don't just determine who gets to live somewhere. They shape the world we live in. These decisions from hundreds of years ago have the power to impact our health today.

Ernestine Chaco: It's very hard to talk about this to non-Native people about how, like, "Oh, it happened in the past, it's gone, it's done," you know, not realizing that a lot of these Supreme Court cases still affect us today. Like I said, this whole concept of not being able to own our land still is *today*. Having the federal government oversee all our actions still happens *today*. It affects how we can do our health care for our people. It affects every single aspect of our lives. Like, we are a sovereign nation. We should have the ability to make our own laws. We should have the ability to do what we need to protect our people. And because of all this red tape, because of all these things that happened in the past, all the court cases, the laws, all of the politics, has sort of tied our hands behind our backs in order to provide for our community. So it created a lot of issues for us to be able to really protect our citizens, basically.

Céline Gounder: These same kinds of legal and economic constraints have hindered people's ability to get access to phone lines, broadband, electricity, water, and heat their homes. Sophina Calderón says elders are especially at risk.

Sophina Calderón: The saddest thing is, you know, when I get a grandma that hitchhiked to her visit in the middle of winter and she tells me, "You know, I'm out of firewood. I got to try to make it back home before sunset so I can gather more dry brush and bushes to start my fire for tonight because I have no firewood."

Céline Gounder: This was a challenge before the pandemic. Last summer, Sophina and her brother worried about how covid could make this difficult situation even worse.

Sophina Calderón: We just had a general sense of, you know what, I don't think people are going to be ready this winter.

Céline Gounder: Up till now, Sophina's family had been collecting wood for themselves and a few other families. If they wanted to help more people, they were going to need a much bigger source of firewood.

Sophina Calderón: And so we started to brainstorm a lot about where we could get more wood.

Céline Gounder: Sophina reached out to an old friend who worked at the U.S. Forest Service.

Sophina Calderón: Within a day he texted me, he said, you have to call me back. I've got some great news. And so I call Terry back and he said, you know, I just found out that there's this program called Wood for Life.

Céline Gounder: Wood for Life distributes timber that's been cleared for forest restoration to tribal communities. The wood can be used for fuel, cooking, or ceremonies. Wood for Life offered Sophina and her brother Ames 400 cords' worth of wood.

Sophina Calderón: And I thought 400 cords! Is there that much?

Céline Gounder: 400 cords of firewood is enough to fill *800 pickup trucks*.

Sophina Calderón: My brother and I, we were just mind-blown and we were like, wow. And so we just jumped on it and we said, OK, we'll run with this.

Céline Gounder: Along the way, they started to meet families, churches, and other groups that were also collecting firewood and other supplies for people in need. Sophina and her family worked with local officials to find someplace to process all this firewood.

Sophina Calderón: They were excited and they jumped on it and they helped us right away. And they gave us access to the fairgrounds.

Céline Gounder: The annual Western Navajo Fair had been canceled because of the pandemic. The local chapter house had erected a big white tent on the fairgrounds. That was the community's covid-relief headquarters. Public health nurses would stop by to pick up food and other supplies to deliver to families who couldn't travel because of covid. Soon, thanks to Sophina and her brother, they'd be able to deliver firewood too. Now, they were just waiting for the first shipment to arrive.

Sophina Calderón: My brother and I had gotten word that, OK, you know, the first load is going to come tomorrow.

Céline Gounder: Sophina rushed to finish her work at the clinic so she could get to the fairgrounds by lunchtime. She wanted to see the first truck arrive.

Sophina Calderón: Me and my quirkiness for liking picnics and things like that, I had stopped off at the store, I picked up a bag of chips and some sodas.

Céline Gounder: Sophina met her brother Ames at the fairgrounds. They climbed into the flatbed of his truck and waited.

Sophina Calderón: And we're just, you know, eating our chips and ... drinking our sodas and we hear this truck coming in. And you hear the semi and it's, it's sort of air brakes sort of slowing down. And he was like, "It's coming, it's coming!"

Céline Gounder: They opened the gates. Several semis drove onto the fairgrounds with the first delivery on Dec. 18, 2020.

Sophina Calderón: After the trucks left and everything was unloaded and everyone left, we walked around and we just stood out there watching, in front of the load that was just unloaded. And we said, "Wow, there's 30 more coming after this. This is, this is the beginning." And we stood there. And, and, and just sort of just, just stared at the wood ... and thought after all these years of hauling firewood, trip after trip one truck at a time, it was all great. And it was fun, but we just needed access to ... jump-start something bigger and to help the community in a bigger way, and we just thought to ourselves, we're going to help a lot of people.

Céline Gounder: And a different kind of help was just around the corner. The first covid-19 vaccines got emergency use authorization that same month.

Jill Jim: We had a really high vaccine uptake early on that we think contributed to the decrease in cases right after early January.

Céline Gounder: That's Dr. Jill Jim again. Soon, the Navajo Nation would roll out one of the most successful vaccination campaigns in the United States. By April 2021, the Navajo Nation had vaccinated 50% of its residents — more than any U.S. state at the time. But there were a lot of challenges along the way.

Jill Jim: When vaccine efforts were rolled out nationally, there were conversations about "go to your local CVS or Walgreens." But that doesn't work on Navajo because we don't have any sort of places like that.

Céline Gounder: The same forces Dr. Ernestine Chaco described that limited housing and other infrastructure on the Navajo Nation were working against Jill too. There were few clinics to cover such a large territory. Staff was also in short supply.

Jill Jim: We had dentists that were running the health command or running part of those response groups. So every person had to be accounted for in some way in their local response.

Céline Gounder: Many of these issues are true for large parts of rural America. What really stood out about the Navajo response was the community's ability to rally around vaccination as a common good. Jill

believes the devastating impact of the first wave of the pandemic shaped people's opinions early on about the importance of vaccines. That approach to thinking about the community and how someone's actions can affect others is a big part of Diné culture, she says.

Jill Jim: We have those upbringing and teachings about motivating people to have hope and also to be responsible for your own actions and that's really up to you. And we always see this term in, in our language, that *T'áá hwó' aji t'éego* concept, meaning, "It's up to you." And I think with covid, it was more like "It's up to you to mask up, it's up to you to not travel." You make those decisions, and if you make the wrong decisions, it could impact yourself, others that have underlying health conditions.

Céline Gounder: And the elderly. The threat of losing these older members of the tribe has repercussions outside a family tragedy. It could mean the loss of cultural knowledge passed on for generations.

Jill Jim: It's something that we're going to deal with as a tribe. And I hope after this, that we're able to come together and realize that our cultural teachings and our values still have to be carried on, especially our language.

Céline Gounder: Public health communication about vaccines was done in Navajo alongside other languages spoken on the Nation. The winner of Ms. Navajo Nation, a pageant that celebrates Diné culture, became a trusted messenger for vaccines and public health information.

Jill Jim: I think a lot also had to deal with our ability to govern ourselves.

Céline Gounder: The Navajo Nation's response to covid was much more robust than surrounding states. Mask mandates, curfews, and strict limits on social gatherings helped get the pandemic under control before vaccines were available.

Jill Jim: Minimizing movement with what we can, so that people can shelter in place, and then offering vaccines, at the time, I think was highly effective.

Céline Gounder: But, like in many communities, vaccination rates on the Navajo Nation have stalled. At this recording, about 60% of the total population living on Navajo is fully vaccinated ... just under the U.S. national average. Beyond the Navajo Nation, vaccination remains relatively low for Indigenous peoples compared to other groups in the United States. According to the CDC, American Indians and Alaska Natives are the group with the highest per capita death rate from covid-19. These challenges have only gotten greater with the emergence of omicron. Jill hopes the sense of community and duty to protect one another will hold strong this winter.

Jill Jim: When they go out into the neighboring communities they wear their mask and people look at them weird because they're wearing their mask, but our tribal leaders and ourselves, we always try to say, don't ever feel uncomfortable, do not be ashamed that you're wearing your mask, that you're doing this to protect yourself and your elders and do the best that you can. So I think that's, that's what's different here, is that our people know that wearing a mask is very important and I just hope everyone could get on board with that as well.

Céline Gounder: Dr. Sophina Calderón saw that same sense of community solidarity at the fairgrounds. Sophina would work in the clinic all day and then cut wood at night. They had put out a call for anyone who could help to come chop wood. One man caught her attention.

Sophina Calderón: And I kind of thought, I wonder what his story is. You know, he comes every day and sometimes he brings his family. His wife will sit in a splitting machine sometimes and his kids would come and chop manually with an ax.

Céline Gounder: Sophina walked up to him one day to thank him for all the work he'd been doing.

Sophina Calderón: He was a quiet guy. And then finally, he said, "Do you know why I'm here?" I said, "Why?" And he said, "Um, I'm here because of you." And he said, "I don't know if you remember me, but last year I came to your office and I saw you in the clinic." And he said, "I saw so many doctors and no one could figure I'd been to the ER all these times. And no one could figure out what was wrong with me. And I came and I saw you one time," he said, "and I was frustrated by that time because no one could figure out what's wrong with me." He said, "You saw me, you heard my story. You asked me a lot of stuff. You listened to me. And you had me set up to see a surgeon right away the next day. And that's when they diagnosed my colon cancer." And his son was there that day. And so he pointed to a son and he said, "I'm here for my son. And I'm here because of you." So he said, "I told my family, we're going to come out here and help her."

Céline Gounder: Looking around the fairgrounds, Sophina started to see the thread running through all the people there.

Sophina Calderón: His oncologist was out there sawing firewood next to him. The surgeon was across the way in the next woodpile and it, it was awesome. It was just to, sort of, I stopped one time, and just stood there and thought like, wow, like all these people are out here, and the way these people are connected is really cool.

Céline Gounder: That strong sense of community and resilience helped get a deadly pandemic under control. It inspired a nation of people to get vaccinated to protect their elders, their culture, and themselves. It helped people like Sophina and her family step up in a time of need and do what formal authorities couldn't.

Sophina Calderón: A lot of people celebrate it and we've gotten awards for it and things like that, which is all great and it brings all this hope and this pride to the community for the work that we do.

But at the same time I had to kind of stop and think, what is it, and where is it higher up in our administration and those who manage things across the Navajo Nation — where is it that we're lacking that individual families need to out of their own pockets, and out of their own good hearts, have to do so much work for people that need all this help? Like, why is that happening? And it just made me question a lot of things like that.

Céline Gounder: Resilience is complicated. Many people I spoke with during the reporting of this season said they saw it as an intrinsic part of what it means to be an Indigenous person in the United States. It's

an admirable quality, but it can also be a burden. Too often, the Diné and other tribal nations are asked to be resilient when others are not. Over the course of this season, we're going to be sharing stories that celebrate the resilience of Indigenous people ... but always with a critical eye toward the root causes that force people to find innovative solutions to the public health challenges in their communities over and over again.

When we last spoke with Sophina, she hadn't had a chance to get out into the forest yet.

Sophina Calderón: But the family has done a couple of wood halls already without me. I had to put somebody else in charge of making the picnic. *(laughs)* It's an important job; everyone's got to eat and no one else, not the men, don't really think about, uh, putting a picnic together, so ... *(laughs)*

Céline Gounder: The pandemic brought a lot of attention to the health disparities and public health issues on the Navajo Nation. But despite the headlines and accolades, many of these challenges persist today. Sophina's family isn't deterred, though. They're going to continue to do whatever they can.

Sophina Calderón: My brothers and my dad, they're always like, well, if you can operate and run that chainsaw and carry that wood on your own back, and you can do that physically — that's a blessing to yourself, and if you can help other people that need help, because you're physically able to do that, then that's what we're going to do.

CREDITS

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I'm Dr. Céline Gounder. Thanks for listening to *American Diagnosis*.

END