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Pedro A. Ortega M.D.

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THE UNIVERSITY OF TEXAS AT EL PASO INSTITUTE OF ORAL HISTORY

Interviewee: Pedro A. Ortega M.D.

Interviewer: Richard Baquera

Project: Bracero Oral History Project

Location: El Paso, Texas

Date of Interview: March 21, 2003

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Transcriber: Vanessa Macias

Dr. Pedro A. Ortega, M.D. was born in Alquizar, Havana, Cuba, on February 22, 1927; while in Cuba, he was employed at a clinic for the workers and family of an American owned nickel processing plant; in 1961, he came to the United States, and shortly thereafter he was offered a position at the Public Health Office in El Paso, Texas; he worked at *Rio Vista*, a bracero processing center in Socorro, Texas, until it closed. Dr. Ortega recalls how he was employed as a surgeon at a hospital for the workers and family of an American owned nickel processing plant; the plant was attacked and bombed, which caused him to flee the country; in 1961, he came into the United States through Miami, Florida, at the very beginning of the Castro regime; after being in the U.S. for only two weeks, he was offered a position with the Public Health Office in El Paso, Texas, working at *Rio Vista*, a bracero processing center in Socorro, Texas; he describes the various procedures the braceros went through while there at *Rio Vista* and his role in them; his ability to speak Spanish proved to be very helpful; he briefly mentions the Mexican *coyotes* who charged men for the opportunity to become braceros; in addition, he comments that he never saw any evidence of prostitution while there; he blames the Mexican politicians for the failure of the Bracero Program, and he concludes that he would be willing to help restart the program because he feels there is a need for it.

Name of Interviewee: Pedro A. Ortega
Date of Interview: March 21, 2003
Name of Interviewer: Richard Baquera

This is an interview of Dr. Pedro A. Ortega taken at his office on North Harris Street in El Paso, Texas on Friday, March the 21st, 2003. The interviewer is Richard Baquera and this interview is for the Bracero Oral History Project.

RB: So if we could start first of all, Doctor, tell me your name.

PO: Pedro A. Ortega.

RB: And you were born where?

PO: I was born in Cuba.

RB: Where exactly in Cuba?

PO: South of Havana. Alchiza. The name is Alchiza. South of Havana. One hour from Havana.

RB: Okay, your birthday is?

PO: My birthday is 2-22-27.

RB: Okay, that's easy to remember. Your family, you have...?

PO: I have my wife, my son that was 11 years old in 1961, at the beginning of '61. Now we have three more children here, my son the oldest one that is Cuban and three more from El Paso. One is a doctor in Houston, one is a computer analyst and programmer in Dallas, my daughter is a teacher here in El Paso.

RB: I see. When did you come here in the United States?

PO: In '61, April the 5th, '61.

RB: '61, that would be the beginning of the Castro regime?

PO: Yes. Right at the beginning.

RB: Were you already a doctor then?

PO: I was being a doctor in Cuba for almost ten years. I was working surgeon was a nickel processing plant that belonged to the United States governments, Nicaro Nickel Company. We were the second nickel producer in the world. And that plant had forty-five hundred employees plus relative. We had a hospital to give services to the employees and the family. I was doing their surgery, we were (Unintelligible) locations, it's a revolution, we survived the situation and then I was waiting for the opportunity to come to the United States. I was seven months waiting for the opportunity until I was able to come to the United States with faking a cancer of my spinal cord.

RB: Oh, so they allowed you and your family...?

PO: Yes, my family and myself.

RB: Where in the United States, what city did you enter?

PO: Miami. We went through Miami, but we didn't want to stay in Miami. I was a push for some peoples over there and they told me that they were having a law for fifty (UNINTELLIGIBLE) physicians, that if I was interested at that time. At that time I was not able to say yes or no because I didn't speak English at all. All the American people (Unintelligible) speaking Spanish. I started in Miami and then they told me if I was interested in some other places, they offer me places in Alaska was a good (Unintelligible) because my son was 11 years old. I declined that and then they told me Los Angeles, I said that's fine, but you have to wait a month and for that you have to be feeding my family. I said I get (Unintelligible) closer to that, then they told me that in Puerto Rico, but in Puerto Rico was another month. I was looking for the ocean because I was living by the ocean in Cuba, I was. Then they told me the opening in El Paso, Texas in less than a month. Then they told me get a map and see where is El Paso, Texas. I got the map, I said, well, we are 800 miles from the Pacific and 800 miles from the Gulf

of Mexico, but we have the ring around it. I will get a boat and I will teach my son how to fish and when I got to El Paso...

RB: (Laughs) And saw the river.

PO: No water, the kids in the bridge, the (Unintelligible) bridge, hey mister (Unintelligible). And that was really, I think they were joking at that was the river. I really, I start working with the United States Public Health Service. I was the medical officer at the Bracero center.

RB: At the Rio Vista?

PO: Rio Vista, Rio Vista. The city was very far away from what is now. El Paso is growing that way.

RB: Right, do you remember exactly what month, year it was that you started working there?

PO: Oh, 14 days after I came from Cuba.

RB: Really?

PO: Yes, because I spent about a week... (tape interruption)

RB: Okay, que acaba de llega catorce dias despues de llegar. I'm sorry, 14 days after that, after arriving in the United States.

PO: I was over here in El Paso and the, (Unintelligible) the Braceros.

RB: So, they just automatic, wow, they gave you the job with the Public Health Service.

PO: Public Health, Public Health. One of those openings was Public Health, (Unintelligible) physician. I accepted one in El Paso. I really, I love it. I had the opportunity...

RB: Once you got used to no water. (Laughs)

PO: No, I don't care about it because I look for the water in some other places. The people, the weather, is unbelievable.

RB: The language, you know the language, so...

PO: Well, the language for me now is a mixture.

RB: Sure, like it is here for most of us.

PO: Most of the people, when they closed the Bracero center, they come for me today quarantine station at the Santa Fe Bridge. I worked there like a medical officer in charge handling visas and handling local passports. Then, it's interesting because this is one thing that is very important, we have 12 locals in the panel in Juarez for the American consulate that we working closely about X-rays and about this and that. From those 12 locals, in several years I was working there, we used, still have to, we fire one of them, the other one was selling X-rays, selling different things to the patients, getting money and I was checking the, I was (Unintelligible) 17 millimeters and they were doing that. Fourteen by seven was not that, we required at that time and they changed it. Anyway, that's the (Unintelligible) way. Then we were doing a very good job also at the Bracero and in the quarantine station because we were, you know, (Unintelligible) people coming through the border with syphilis or other diseases or tuberculosis. The Center for Infectious Diseases of the United States is in Atlanta. They didn't know what was going on in the border at all. They were coming one day, the people over here was trying, the one in front of the administration situation, administration situation over at the quarantine station, they were trying just to protect their position, but not telling the truth to these people. I was not trying to do that because my conscious was like a doctor. Then they want (Unintelligible) to give to Mexico the program of X-ray screening to Mexico when we knew what was going on in Mexico. And then I resigned. I told, I sent a letter to them stating that they didn't know what they were doing because they were not here and they didn't know what was the good of the situation. And that was one talking about the Braceros.

RB: How did you get there, first of all, you were at the...?

PO: First of all is because I start working with US Public Health Service. Instead of them having one doctor to be changing every six months on the program of the Braceros, they would have me working full time, you know speaking Spanish, you know? That was a very important part.

RB: I think you mentioned that before that they had Army doctors?

PO: Army doctors, somebody from Beaumont. Army doctor coming from Beaumont for six months and they sent another one for three or six months, depending on the condition of the...

RB: So you started working at the Rio Vista in '61?

PO: '61, '61, the beginning of '61. Then to me it was very good program. They way they were coming from Mexico, the way they were so aggressive in their mentality because they were poor people coming from Mexico to work over here like farmworkers. I was able to talk to them personally about the conditions, we just speaking Spanish. But we have, I remember the day we have more Braceros was 3,123. We process them in one day. That was continuously, continuously. They were coming, the first thing that they were coming was to the...

RB: To the bridge?

PO: The bridge. They get some fumigation from over there from our side, lice and whatever. Then they bring it, brought to the center. We have, the first person that we have was the screening person. After they were, of course, registered. They were screened...

RB: They would arrive...

PO: They arrived, that was a, like an assembly line.

RB: Yes, that's what I've heard it describe.

PO: Then they got there, the first inspector (Unintelligible) in the Quonset, we had Quonset of the...

RB: Meadows?

PO: Melons?

RB: Must have been very warm, hot.

PO: Well, not, we have air condition. They came over there and we start checking for any deformities and then in the same line, we were then checking for other deformities in the skin, then they were going to the lab, okay. In the lab, we draw the blood, we have special tests for syphilis and one thing that's very important, after our tests were done, actually for syphilis, we were working on that test because the companies making that test didn't know and we have the volume of the patients to work with.

RB: Oh, so in a way, it was still experimental.

PO: Experimental. We were researching on that. Unless our (Unintelligible), our test. Then we had the (Unintelligible) test that was a very fast, was not a (Unintelligible) and that was faster. Then everyone have a number, they all have a number. We got X-rays, chest X-rays. Chest X-rays, 70 millimeter, was a view, a special view and we were reading.

RB: Seventy millimeter, is that small?

PO: Small, small, it's a very small. It's about a four by four. Okay? But with those views amplified and I was checking the X-rays about any condition that is suspicious or tuberculosis or whatever. When we check that, I got a number and I put the number and on a loudspeaker, we call that person. We then have that person for a fourteen by seventeen (Unintelligible). We got the X-rays done immediately and we were clearing the patient for any tuberculosis.

RB: So that would be a second X-ray then?

PO: A second X-rays in case the first one was (Unintelligible). One thing that we were doing, as soon before they got to the blood test was checking for gonorrhea, checking for different diseases, infectious diseases. Venereal diseases.

RB: That would be done other than the blood?

PO: Oh, no that was done. We had one person that physically that was having some discharge, we were able to examine that and determine what was the problem. After we checked the blood pressure and they were waiting for their result, anyone that could possibly for the blood pressure with syphilis, we would call them through the loudspeaker because that (Unintelligible) to the other areas of the detention facility, of the processing facility. Then we call those people for X-rays or for that, at that time, we were also researching some types of penicillin. The vaccine did not exist at that time. We start using the vaccine on 2.4 million units to protect that person to not be contagious in the United States. That would be more than six months of protection they can go through. (Unintelligible)

RB: So they were not automatically rejected?

PO: No, they were not rejected. We were protecting for not being infectious because they were getting every six months, often every six months they were getting their contract. The people with tuberculosis, sometimes we reject them. Depending on the situation. Any infectious or contagious diseases we were not able to control, rejected. That line continued around the facility until they were all in the buses to different places. The first thing, they were buying in the United States at that time was the transistor radio. Transistor radio. The second thing they were buying when they were going back, sometimes first or second year, third year, was the sewing machine.

RB: Oh, really. Larger?

PO: Larger sewing machine. Then one thing they changed almost as soon as they start working was huaraches. You know what are huaraches?

RB: Oh, yes.

PO: They change the huaraches for tennis or other shoes.

RB: More comfortable?

PO: Many of those people entering the United States, like Braceros at the beginning, they got their status of resident aliens.

RB: Oh, so many of them stayed?

PO: Because they were good workers. Many of them on the ranches prefer them and they were coming to the center to get those people re, you know, appointed to their position. (Unintelligible). We have people from all over Mexico.

RB: That's another question I was going to ask you. Do you remember what states, what areas? Everywhere?

PO: We have, I remember one time, we start getting people positive for syphilis.

RB: More than usual?

PO: More than usual. All of them were coming from one small place in the state of Guerrero. The state of Guerrero is south of Mexico. They were Indians. They were almost all of them were (Unintelligible). They didn't speak Spanish, they worked while an interpreter. The short (Unintelligible) with syphilis. More than 15 of the same place with syphilis. When they was giving them the vaccine, the 2.4 million units, we have in that line, cots, army cots, you know, because that vaccine was given with a 16 gauge needle. 16 gauge needles is like a...

RB: I don't know.

PO: It's a very thick one. Because there...

RB: It's a major dose.

PO: It's a major dose and was very thick. And they were fainting. Fainting. And they would have the cots and we would put them over there with ammonia, reviving them, taking care of them. When they were feeling fine, they can continue.

RB: That's unusual, from one town, from one...

PO: One town.

RB: Family.

PO: One thing that is not good is that Mexican outsiders to send Braceros over here when they were shouting morditas.

RB: Oh, really?

PO: Yes. And then because I knew that many of them were coming and coming and coming again and more than \$1500.

RB: Dollars?

PO: Dollars. To have the Bracero able to come to the United States.

RB: So they had to pay that off first of all and then they...

PO: Then they process it. And that was one of the reason why the program failed.

RB: You think it ultimately failed?

PO: Oh, yes. Failed because abuses.

RB: On both sides or mostly on...?

PO: No, no, the other side. Over here, we didn't get any, anything, we were trying to protect, they were poor people, they were coming to work, okay? That's it.

RB: That's basically, when you would talk to them, they would tell you this is why I'm come?

PO: (Unintelligible) paying for.

RB: It almost sounds like the coyotes of today that...

PO: Yes, it's like the coyotes today, but coyotes, you know, legally. (Unintelligible).

RB: So in the hut that you had, there were maybe three or four different stations?

PO: In the place that we have?

RB: Yes.

PO: No, we have the first station for the physical examination, then we have the second one for infectious diseases, then the third one we were checking the vision and we were checking also for X-rays that they would have to develop. Then they were going through the lab, from lab, everything they would need, from there transportation and the...

RB: Rest of it. Sometimes over 3,000, it was a very quick...

PO: 3,000. The largest amount of Braceros one day over there was 3,123.

RB: It's interesting after forty years, you still remember.

PO: Oh, yes, because that was a record. We have to read those X-rays, we have to read those tests, we have to process those people. But we were sworn and I say, before I got over there, that was a completely disorganization. And do you know why? Because these people from the Army doesn't care. They were new ones every time and so they...

RB: So they were...

PO: When we organized them, that area over there, everything was running smooth. The people from the (Unintelligible) farmer that were having problems with our department before, oh, they were so glad we were working that way because that

was no more friction, no more problems, no more delays on processing the Braceros.

RB: Do you remember, more or less, what percentage of the Braceros that came through, what percentage had, was rejected or had some major disease?

PO: Well, mostly syphilis, but that were not rejected because we were giving them vaccine. Then, they (Unintelligible) was tuberculosis. Those were rejected. (Unintelligible) tuberculosis, if I would known some (Unintelligible) changes in that place, that was it. One thing that (Unintelligible) I was a surgeon. I came to the United States and I had just processing the Braceros and being a radiologist because I was checking X-rays. I would have so many (Unintelligible) cases, I was considered at that time, I think, the number one person in the United States that was reading (Unintelligible) X-rays.

RB: Than anybody else.

PO: Than anybody else because when I was (Unintelligible) for the bridge, we were having about 800 daily. What doctor in the United States was able to read 800, not 3,000, daily.

RB: You were confident in the machines?

PO: Oh, no, yes. We had very nice machines. We have very nice machines. We have very good technicians. We were processing that in the road, one after the other after the other because they were coming in bulk.

RB: The Bracero that would come in, you didn't know them by name, they had a number, is that right?

PO: Oh, well, then we start calling, when we were calling them by numbers, we were calling them by name.

RB: Oh, okay.

PO: (Unintelligible) todavia.

RB: We're resuming the interview, we were talking about the stages and I think I asked you what percentage of Braceros were rejected and I think you said...

PO: Not too many. Not too many. Mostly with tuberculosis. With contagious diseases like gonorrhea or syphilis, we were giving treatment for that. Deformities, sometimes, were not that bad. Not too many people with deformities. Some other people with other types of problems like skin problems, if we suspect that the skin problems were due to any, any infectious problems, then we reject them because we were not given treatment for that. If we suspect that that was just sometimes a hygienic problem, we pass them. The change of the aptitude of the Braceros in the beginning, since the first visit to the (Unintelligible) through the third or fourth, because I was there and I was able to see them almost every six months, was completely different. They were changing mentally, they were happy people, they start changing the way they coughing, the rashes, the many things that they were taking over there, and that was really, really, it was very sad when they closed that program.

RB: Do you think that's to you the most striking change in the Braceros is how they were just totally different?

PO: The government was too involved and they were trying to get the same group of wages that people working in the United States. That was a problem that was designed for those people coming to the United States and then they were improving, improving, improving. Then politicians they were trying to get more and more and more, like always, no? And they killed the Braceros program. It's like the unions sometimes.

RB: They are supposed to be for the workers, but ends up...

PO: But they are for the people, the one in power, the leaders.

RB: So in a way maybe you think it was too successful?

PO: The what?

RB: The program was too successful and maybe that's why the politicians....?

PO: No, the program was successful because governing what we were looking for. People coming to the States to work in the farms. People that were getting better treatment than there much more money. Medical coverage, no? They were start asking for more and more. Not them because many of them in the federal (Unintelligible) they were already...

RB: Not the Braceros themselves?

PO: Not the Braceros.

RB: The politicians?

PO: The politicians, the politicians.

RB: Politicians, American?

PO: No, Mexican. I will be more than glad if the program would come back again. I really, I think that would be a very nice operation. Let me tell you, I'm almost, not retired because I'm not planning to retire for (Unintelligible), if I will be able to help or be able to be in front of the farm, medically, I think that would be great.

RB: You would do it again?

PO: It's just like a sentimental situation, but I think I can produce more.

RB: Even with all the hard work that you (Unintelligible)?

PO: Oh, no, it's not really hard anymore.

RB: Not anymore, you think?

PO: No, it's not hard work, it's organized work. Organized work. And for me, that is easy (Unintelligible). I received my diploma 50 years ago.

RB: Fifty?

PO: Fifty, five-oh. 1953.

RB: 1953? In Havana, right?

PO: In Havana University. I was having so many, in medicine, I think it's ridiculous for me to...

RB: To what?

PO: To do not know what to do. I think I would be able to handle. I was doing orthopedic surgery, I was doing war surgery, traumatic, ok? I was doing gynecological surgery, I was doing general surgery, I was doing also (Unintelligible) surgery. Right now, I am able to do many of those (Unintelligible) in the United States. Not because I know more, it is because I'm getting old. (Laughs).

RB: Well, no, that's, they go together.

PO: Experience.

RB: Experience, exactly. So you were there at the Bracero center until it...

PO: Until it was closed.

RB: Closed, it would what? '64?

PO: Sixty, I think it was '64, yes, around that, '64.

RB: Now I understand that it was, was it mostly kind of a seasonal thing? You went there all the time, right?

PO: Oh, no, no, it was almost all the time. Not seasonal because they were looking for picking cotton, at that time they're started with machines for picking cotton. They were start developing that, at that time.

RB: So they didn't need as many workers for the cotton, but they needed for the other...

PO: No, no, no, but they were getting Braceros in other, I was handling the Bracero center, the medical aspect of the Bracero center once in Calexico, in Calexico, because they were trying to get people with more experience here to teach them over there how to handle them. In Calexico. No because I was a different seasonal harvest. Cotton was the main (Unintelligible) lettuce, or, or (Unintelligible).

RB: No, it's just that I've spoken to some people, I spoke to a woman who was a clerk-typist.

PO: What was her name?

RB: Her name was Socorro, today it's Socorro Perez. I forget what her maiden name was. Socorro. She was just out of high school and she worked there as a clerk-typist. As a matter of fact, I just spoke the other day to a man named Lowenberg who was one of the X-ray people.

PO: X-ray people?

RB: X-ray.

PO: Lowenberg?

RB: Lowenberg, Julius Lowenberg. But he was there before...

PO: Oh, (Unintelligible) before.

RB: He was there like early 50's to maybe...

PO: Oh, yes, early 50's.

RB: He was one of those people that went through that, the X-rays, like you did later on.

PO: And Socorro, this lady was there in what year?

RB: Also, I think about...

PO: At the beginning?

RB: She said she was just out of high school. I forget exact years, but it would be like...

PO: Because I remember the name.

RB: Later, 1950's, I think just before you were there.

PO: Because I remember at that time the people in the (Unintelligible) and people working in the main offices, not the Public Health, not the processing the Braceros medical (Unintelligible), but handling the transportation.

RB: I was wondering when you were working there, when you came to El Paso, what part of the city did you live in?

PO: I was living, I was living at the beginning, close to Chelmont center.

RB: I see, at Montana?

PO: Montana, Montana because it was a small apartments over there. We came, we were refugees. We have to start walking and getting things because we don't have anything. And then we start a (Unintelligible). Then I moved to Mission, in the same area, but I lived in that Mission for one year. I was living also close to the Timberwolf area, close to the base. (Unintelligible). And then, Cielo Vista Park.

RB: So, I was wondering also then, how would you get to the Rio Vista from, did you have to buy your own car?

PO: Oh, no, they provide me with a pick-up. They provide me with a pick-up. No, I got a car, I got a car when I, about three months later. I was here, I remember, I got a car. No, station wagon, but...

RB: But they provided a pick-up for you.

PO: Pick-up for me, pick-up for me. I was provided a pick-up.

RB: That's what you would use to drive down?

PO: Pick-up, oh, I think fifty-some.

RB: But it served a purpose, huh?

PO: Yes.

RB: When you were there at the Rio Vista, like your day, did you take your lunch with you or did you eat at the, I know there was a place where the Braceros ate.

PO: We take the lunch. We have a lunch over there, we were providing a lunch and we were eating by the (Unintelligible) station.

RB: I see, but you never ate over by where the Braceros ate or anything like that?

PO: The Braceros, usually were having lunch or some boxes, boxes prepared for them to take on the trip.

RB: Oh, I see. You brought your own lunch?

PO: Oh, yes, own lunch, own lunch.

RB: Do you remember the ones that were rejected, what were, what were, was there a special...because I talked to somebody who said they would usually be handed over to a Mexican official or someone.

PO: We have a Mexican official right there. A person who was sent from the Mexican consulate right in the administrative offices at the beginning.

RB: You don't remember that person's name, do you?

PO: My gosh, the name, we called him Capítan Aguilar. But I don't remember...

RB: The rest.

PO: Aguilar. (Unintelligible).

RB: Was that about the only thing they did? Was there any other function, I mean the Mexican...?

PO: No, no, the Mexican, when we were rejecting them, they would taking care of those people and they were sending back those people. I don't know in what way.

RB: I talked to a couple of people who said it was very sad for them when they had to tell a Bracero that he was rejected because many times this was, they saw that this was their chance to make some money.

PO: Oh, yes. But, it's not, if we were able to help them and we were protecting them from syphilis or gonorrhea or from all the other diseases that were contagious, we were providing the medication for them to be able to work.

RB: Did you see any that were ever rejected, would they ever come back and...?

PO: Oh, yes, oh yes. Because sometimes it was a situation that they, and we were telling them what to do about some form of tuberculosis and we were advising them. Because the most important part in that situation that was, that we were able to speak Spanish. Sometimes they were not speaking Spanish, like the Indians, because they had an interpreter. Not an interpreter for English, for Spanish.

RB: For their own?

PO: Yes.

RB: You don't remember what type of Indians they were?

PO: Oh, the people in that area in the (Unintelligible) state of Chiapas.

RB: Maya, some type of Maya?

PO: Well, it's not really Mayan. They are Socheles and they are a different, different tribe. They are at the beginning Mayan, but not really. We (Unintelligible) never have anyone coming from Yucatan. No, no, no Yucatan.

RB: But most of the time they were from Chihuahua...

PO: No, they most from the South. There were people from Chihuahua, from all over the place. From all over.

RB: Do you remember, what was usually they would be processed, how long would a typical Bracero stay there at Rio Vista? A day or two? Less? Hours? Do you remember?

PO: Processing the Bracero?

RB: Like if one came in...

PO: One came in the morning, early, okay? And then in the afternoon they were in the buses...

RB: Already?

PO: Going to La Mesa or whatever in New Mexico or...

RB: Wherever it was?

PO: Wherever, Pecos.

RB: Do you remember some of the ranches around here where they would, some of the farms around here?

PO: Oh, yes, at that time, yes. It's been so many years, no way. Many of the ranches are (Unintelligible). I have people now that come into my office now that all Braceros. Some of them were processors at the same that I...

RB: Do they remember you?

PO: Well, they don't remember me, I don't remember them, but they told me then at we got to the point, I said, "Oh my gosh, I was the one that examined." Then we start talking about that. Citizens some, many of them, not resident alien.

RB: Do they ever tell you about their experiences?

PO: Oh, no, yes, we were able to discuss with them many of their experiences.

RB: Were they happy about their work?

PO: Oh, no, they were very happy. Ninety, 100% of them were happy about the program.

RB: You know, there's one other thing that I was talking to somebody the other day and he mentioned something that I've never heard before about the Rio Vista because I understand, well, we toured, have you ever been back to the Rio Vista since?

PO: I was (Unintelligible) there, by (Unintelligible) road and a, uh, nothing was there at that time. And then we have besides us the (UNINTELLIGIBLE) facility where they were making some research.

RB: Research. We were down there recently, a man that give us a tour. I think it was Correga.

PO: Oh, he was one. Correga.

RB: He was a security guard I think.

PO: Yes, I think...

RB: Carlos, I think was his first name?

PO: I don't remember, but I remember the last name.

RB: A little over a week ago, he gave us a little tour of the place.

PO: The main building is still there and the Quonset is still there?

RB: The Quonset. There is a building that was in the middle where they had the showers and the toilets. The building is gone, but the foundation is there. But most everything else, it's kind of falling apart. But there's fences all around pretty much, two or three sides of the building. But this man told me the other day that there was some prostitution. Did you ever hear anything about...ever?

PO: Never, never. If they would have prostitution it would be outside of that place because in that place was not a space for prostitution and there was no way to get inside of that place unless they went down through the main building at the entrance.

RB: That's what I wondered.

PO: That was a fences.

RB: This person, this would be somebody that was there before you, but he said that there was some prostitution. I said, "But I thought the building was...?"

PO: Prostitution with who?

RB: That women would come from around here and then they would, the men there would presumably pay them, you know, for sex.

PO: Who will come from Mexico like Braceros if they don't have a single penny?

RB: That's exactly what I asked him, I said, "But I thought these men didn't have much money."

PO: Didn't have a single penny, they were very, very poor people, low (Unintelligible). What? Come on.

RB: I don't, that's...

PO: They were not spending nights over there. They were going out immediately. Sometimes when we were walking, walking in one of the patients because of some problem, medical problems, they were calling from transportation, “We are waiting for that patient, what is going on for that Bracero.” Number so and so and the name and, “Yes, we are clearing him from this situation. Maybe five minutes he is ready to go or not go.”

RB: So the only thing I can think of is maybe since this was before...

PO: I never, that was...

RB: This was in 19, middle 50's,

PO: And I was there for...

RB: See, I had never heard of that before either and I wondered if they didn't have much money, if the place was fairly well patrolled and enclosed, how, how could...

PO: That was completely, completely...

RB: That's all he would tell me. (Laughs) That's all that he would tell me about it.

PO: How old is he now?

RB: Oh, gosh, I don't remember his...

PO: Older than me?

RB: No, well, maybe a little bit older 'cause he was there before...

PO: Maybe Alzheimer's?

RB: Yeah, I don't know.

PO: (Laughs)

RB: (Laughs) It was something that surprised me.

PO: No, no, that was not, it didn't our, you know, when we were working in place, we know everything about the place.

RB: Yes, especially being, you know...

PO: No, we were working there...

RB: Since you are dealing with problems, sexually transmitted diseases...

PO: Well, yes.

RB: You would have, I presumed you would have heard...

PO: (Laughs) Never in my mind that was a possibility. Never. Never in my, I remember about the radios, I remember about the sewing machines, I remember the glasses, I remember those things. They were starting to look more like ranchers, no? Looking (Unintelligible)

RB: Somebody else also mentioned that these men when they came over, they usually sometimes would be brought over in cattle cars and it would take them several hours certainly to come over, so they would arrive here lots of time at the Rio Vista and they hadn't bathed.

PO: From cattle cars?

RB: From Mexico.

PO: I don't know because I, you know, from here to our facilities, okay, they were in buses.

RB: What this person was telling me was that sometimes they hadn't bathed and maybe...

PO: Oh, no, no, no that is true.

RB: So there was some sort of...

PO: From there, I do not know because sometimes they were really filthy. But there, they were able to take a shower, they were able to start shaving, they were able to eat.

RB: So that right away that would have changed?

PO: Oh, yes, change was completely. It was amazing the way they were changing.

RB: From the inside and out?

PO: Oh, yes. Mentally they were changing completely.

RB: Just one more question, so you really think overall that it was a failure, the Bracero program? The politicians maybe killed it?

PO: I think the Braceros was a great program. I think the Braceros was a great program. Only way, economically and also, and also the (Unintelligible) psychology.

RB: I see.

PO: Psychology.

RB: Okay, anything else you want, any other thing you wanted to...

PO: Thank you very much.

RB: Thank you very much.

PO: Just consider me, okay, that they some, some...

RB: You're willing to go back and start over, huh?

PO: Oh, no, start over, but helping, maybe, okay?

RB: Thank you very much.

PO: It's a pleasure with you.

RB: This is the end of the interview.

End of interview

DRAFT