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Interview no. 219

Jose Roman, Jr., M.D.

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BIографICAL SYNOPSIS OF INTERVIEWEE:

El Paso physician. Dr. Jose Roman was born in Marfa, Texas. His mother was born in Marfa, but his father came over from Ojinaga, México during the Mexican Revolution. He was educated in the Marfa Public Schools and graduated from high school in 1948. He attended Texas Christian University in Fort Worth, Texas, and was a premed student. He received a B.A. in Biology in 1952 from TCU and a medical degree from the University of Texas Medical School in Galveston, Texas, in 1956. He served his internship in the old El Paso General Hospital. He specialized in General Practice in the old General Hospital and also specialized in Pediatrics doing his residency at the Children's Hospital in Denver, Colorado. He served as the medical doctor for the Trans-Pecos Cotton Association for over a year.

SUMMARY OF INTERVIEW:

The Bracero Program.
OR: Dr. Roman, when did you first hear about the Bracero Program?

JR: Well, of course, I have known about the braceros and about what they do for a long time. I suppose you could say my interest in it was kind of superficial until having finished my internship in old El Paso General. I received information that there was an opening in the Pecos Valley area for a physician to work for a clinic that was established there by the cotton farmers of the area, and the opening was a position to give medical care to braceros on and off the cotton season. During the "on" season the population of braceros would be around 25,000 to 30,000. They needed help and the pay was good. I had just finished my internship; I was in debt and poor and had a family. So I decided to work there because it represented an opportunity for me to start working right away and to start earning money, plus being able to do some good.

OR: What exactly do you mean by superficial?

JR: Everyone knew for years that the Mexican and American governments had an agreement to allow a certain number of people, with some farming experience to come into this country during the appropriate seasons—for example, the cotton picking season. They would come in and work, especially in the areas where there was a big requirement for a lot of people to work. And you couldn't hire enough people from local communities to do the work that needed to be done in such a short time, so the program was established to do this. Of course, I didn't know at the time how the medical care was handled, although I had some rough idea. I knew they had to receive medical care somewhere, but that was about all I knew.

OR: What were your responsibilities?
I was in charge of the clinic and rendered all the medical care to these people. Anything that we couldn't handle there, we would sent to El Paso or Odessa, the two biggest medical centers close to Pecos. Otherwise, we were responsible for total and complete care of the braceros.

Can you give us a general description of the type of characters the braceros were?

I would say that perhaps 95% were common laborers from all over México: hard workers, had a lot of physical endurance, un-educated. They came from almost everywhere in the interior of México. Some of them didn't speak Spanish; instead, they spoke some peculiar (I would suspect) Indian dialects that no one but the members of their own group understood. Since the work they had to do was mostly a mechanic sort of thing, once they got over here it was easy to communicate with them by sign language as to what they were supposed to do. As they interrelated with other Mexicans from other areas that spoke Spanish, they also learned how to speak it. Eventually, a lot of the ones who stayed here during the cotton picking period, which might last two or three months, learned Spanish and even a little bit of English.

What age bracket would you say most of the braceros fell under?

The ages ranged from 18 all the way up to the 50s. I don't remember if the program itself had any age limitations.

What about their marital status?

I would say a large number were married with large families back home.

What would you say was one of the main reasons the Mexicans were attracted to the program?
Economics. They would come over here and in a short period of time earn several hundred dollars. [They would] go home with a good amount of money, which admittingly by our standards [was] small, but by their's [it was] substantial.

Do you think most of them wanted to return or would [they] come over with intentions of staying here?

I would say most of them came here with the intentions of returning, because by law, they had to.

What kind of housing was provided?

Housing consisted of mostly a barrack-type building, usually a frame with corrugated steel roof and sides, with cots lined up maybe 40 to 50 to each side with appropriate windows; two or three gas, coal or wood heaters for the winter; shower stalls, a place to clean up, and outside toilets. They came over with one change of clothes, one pair of shoes, a light jacket, and a straw hat. The farmers usually formed a group of 50 or 60 of them, and [they] would see [to it] that [the braceros] had housing, bedding, medical care and food; but anything else, the braceros had to provide for it. During the peak, we had about 25,000 assigned to the Trans-Pecos Association, and I was the only physician employed by them; but there were other physicians caring for them in the community and in the larger cities.

What about their diet?

The diet consisted primarily of beans, potatoes, rice, bread and sometimes vegetables. There were two or three cooks for 40 people. The better food was served in the clinic. The patients got a more balanced
diet and better quality food, like meat and vegetables. At the clinic, they ate three meals a day; whereas in the fields, sometimes they would only eat one meal a day.

OR: What were the working hours?

JR: Long. They worked from sunrise to sundown, six days a week. If they got an afternoon off, it was usually on a Saturday, and they would go into the city to window-shop and drink. There was always some sort of entertainment for them, like dances; but with so many people, it was crowded and hard to do anything. Actually, their entertainment consisted mostly of walking around town and shopping. The Saturday afternoons and evenings that they were off, the downtown merchants would put out little vending stands outside their stores to sell to them. They hardly went into the restaurants and movies. They mostly walked and went to the bars. Incidentally, they only got paid 50 cents an hour for working. They were driven pretty hard. And if they did not meet certain requirements, they were dismissed and sent back. The Immigration was also a constant companion. There was always somebody checking to make sure that they were not illegal.

OR: What was the attitude of the community towards the braceros?

JR: I can't say whether they were welcomed or not. I think that probably they were confined to certain areas of the community. Naturally, I can't say really that people welcomed them with open arms. I think that they were tolerated because they were there to spend some of their money. I would say they were tolerated.

OR: What about the Anglo community?
JR: I would say the braceros probably confined [themselves] to the parts of town where they felt they were most welcomed--the poorer sections. They wouldn't circulate much about the town, but I can't say that they were kept from going to other places; maybe discouraged, yes.

OR: What about the Mexican American community?

JR: They probably didn't hold them in very high esteem; [the braceros] represented people that took jobs away from them. But on the other hand, since many of the Mexican Americans had little businesses where these men could go and shop and spend some of their money, the income that the braceros brought to these small ventures outweighed any ill feelings that the people might have had against them.

OR: What types of immunizations did they have to have before coming over?

JR: Most of them that came over were not immunized to any diseases whatsoever. The only thing that they checked for was for major defects, like debilitating conditions. They wouldn't let a guy come over if he had one arm, leg, a hernia, T.B. or venereal disease. They did some kind of health screening, but as far as being immunized against a specific disease, none. The only time I got involved in immunizations would be if they were to hurt themselves; then I would give them a tetanus shot. We were responsible for seeing that they stayed healthy. If they needed medical treatment, evaluation, or a medical opinion, we had a small makeshift hospital which would accommodate about 50 patients. So if any of them were ill and came to the clinic requiring some observation, hospitalization or in-patient care (not to the extent that they would require [care] in a large hospital), we would accommodate them there. With
the volume of people we were handling, it was impossible to take care of them in the city hospital that had about 30 to 40 beds. The hospital we had was rather a rustic, primitive type hospital. But any complex problems that arose would be sent to El Paso by ambulance.

OR: What were the most common complaints?

JR: Aside from the common complaint of respiratory infections, I would say, they were injuries, ulcers, and intestinal parasites.

OR: Were they reluctant to take treatments?

JR: Most of them took the treatment we offered. I doubt that many of them had any confidence in what we did for them. They took their medicine, pills, and injections because they were told to take them, but not for the reason we would take them. You know, when we go to the doctor and we are given medicines, we take them because we think they'll do us good. Well, they took theirs because they were taken there because they were sick, and somebody put the medicines in their mouths and gave them shots. But they didn't have the same confidence [as we do] that they would get well, because most of them didn't even know what medical care was.

OR: Would you say that the reluctance on their part to take their treatments was a unique part of them?

JR: Yes, because most of them were the primitive type, stoic; [they] could take hardship and accept illnesses as part of their lives. They tolerated illness and didn't complain much. They were not brought in until they were almost dead, and even then they still didn't complain. These were people from the hills, and were used to a hard life. [They were]
very unique in this sense. Sometimes, because of the lack of exposure to any type of medical care, they were reluctant to take treatment--except the ones that had been over here before.

OR: What about religion?

JR: I didn't see or have an opportunity to observe this, except that most of them did wear a crucifix.

OR: What were the rules on hygiene?

JR: No rules. Some bathed once a week; the ones in the clinic had to bathe every day. But the ones working out in the fields--no rules about it.

OR: Do you think they contributed a lot to the local economy?

JR: I think so, since some little businesses sprung out. I would say that most of the braceros spent some of their money there.

OR: What was the relationship between the farmers and the workers?

JR: It was a contract relationship. If the employer needed 100 or so workers, they could care less who they were. What they wanted was just to get some people to do the work. If the work was not done right, they would dismiss them, and they would either be sent back to México or to another farm. There was a certain amount of work that had to be done within a certain period of time, and they just went in and did it.

OR: Do you know how they were recruited?

JR: I think the farmer group would contract with the U.S. Labor Department to hire so many braceros. Then the Labor Departement, in conjunction with the State Labor Department, would work out their temporary working permits. This way they would know exactly how many would be coming over and when they would be processed through Rio Vista Center in El Paso,
Texas. The designated number allowed by the Labor Department came through Juárez to El Paso. The farmers then would say how many they needed, and they would provide transportation for them from the distribution area to Pecos. They were loaded in buses and driven to Pecos, to the designated place.

OR: Do you have any experiences that stand out about the braceros?

JR: Yes. One of the most fantastic things I remember is when a guy was brought in because he had been bitten in the arm by a rattlesnake. He was from a part of México--somewhere in a jungle--where they believed that the way to cure a rattlesnake bite was to find the snake that had bitten him, chew the head off, kill it, and skin it, then wrap the rattlesnake skin around the area that was bitten. And that's how he came in, with the rattlesnake skin wrapped around the area in the arm. He was sick for about two days, but got well without any problems. In fact, he was almost well when we got him, which was two days after the accident had occurred. Another experience that left its impression on me was about a guy that had a very bad accident where his lower trunk was almost split in half. He was in the clinic about two years. He had already been there six months when I arrived. Anyway, at times he was very depressed, and in order to cheer him up, I would kid him about how Mexicans were supposed to be machos and very brave. Since I knew that he was from Jalisco, I would tell him that the men who came from Jalisco were very manly, and he would reply, "Eso no es verdad, los hombres de Jalisco son hombres porque los hizo Jorge Negrete." Of course, you know who Jorge Negrete was.

OR: What were the positive aspects of this program in your opinion?
I think the program served as an education in its own peculiar way. I think some of the people that came over learned about the goodness of this country, and some even took back examples. It was good for them to see a developed country and some even learned about people and people's behavior—a different approach to life. I hope this exposure to the way we live, our health standards, hygiene, and family relationships helped them to better themselves. Of course, there are some bad things too. But overall I think the exposure and experience, on the other side, those of us who worked with them who had not had the experience, we also learned about human behavior. We learned to tolerate other people's inadequacies, and we learned about their country and their beliefs.

Economically, who benefits the most with this program?

It's a relative thing. On this side the economy of an area depends on a crop being picked, like the melons, onions, cotton, or whatever. And if they are picked on time and the crop is good (and obviously the economics is good), then the farmers realize a profit. On the other side, you take people who come here, who have never earned more than a dollar a day, and they come over and earn four times that a day (of course work a long hard day). They return to their villages or states where the economy is much lower than ours, and that's a big gain to them. By comparison, if I had to pick, and all things being equal, (and it's hard to be equal), I think both sides benefited.

Were you glad or sorry to see the program phase out?

My personal opinion is that the program was a good thing for everybody. The only objection is that if at all possible more local people should
be employed. For example, if you have 10,000 braceros coming over and you need 12,000 the 2,000 should be made up of local people who want to work. If you can't get them, then that's different. But of course, people over here are not going to work for the same wages as the braceros because their standard of living is higher. They have to ask for better wages and they should be paid more, but I don't know how that could be worked out. Overall, for farming communities, I think it was very good. I found some personal satisfaction in working for the program.

OR: Why didn't you continue?
JR: Because I had other interests. I was interested in specializing. It helped me save money to go on with my training.

OR: Do you have any final thoughts you would like to share with us?
JR: I think after close to 15 years, seeing the changes in the relationship between the two countries, seeing the problem of the so-called "illegal alien," and the economic problems in México (which are supposed to be the reason for the illegal aliens) I would say the bracero program was an economic aid to both sides. If such a program were re-insti tuted with the thought in mind that you have to protect the people on this side too, we probably would not have as much trouble with illegal aliens for economic reasons, because some would come over and work and help us and go back and help themselves and keep their economic standards higher. And it would be as big an incentive to come over legally than illegally. This would be a legal way of helping both sides.

OR: Have you returned to Pecos since the program phased out?
JR: Yes, I think I went back once after it began to phase out. I would say Pecos is not as much of a booming type of town that it was then. One of the reasons for discontinuing the program was because of the invention of the cotton picking machines; they were faster, and more economical. But I understand it is not better because the machines do not pick cotton as well. Anyway there was no further need for the braceros. From that standpoint the town is not as active as it used to be. I doubt that they produce as much cotton, melons, onions and whatever because of the lack of manual labor.