

Interviewer: To have a theatre play with the students. And we're going to have a theatre play on November 24 where the students, and if we're on time maybe we could use some part of your study to play in the theatre.

Interviewee: Mm-hmm.

Interviewer: You can ask us to change the name so you're okay with that. And if you're here we want you come to know.

Interviewee: Yes. Let's see.

Interviewer: This is Sunday. I don't know if you're available.

Interviewee: Yes. Weekends.

Interviewer: Usually it's at noon.

Interviewee: Okay.

Interviewer: But the most important part is the exhibition.

Interviewee: Okay.

Interviewer: So you put an X here.

Interviewee: For anonymous, right?

Interviewer: For anonymous.

Interviewee: Mm-hmm.

Interviewer: This is date, and we're in the second –

Interviewee: 12.

Interviewer: Mm-hmm. November 12. Wait, 11, 12, yes.

Interviewee: 19.

Interviewer: 19. We're almost in 2020. Can you believe it?

Interviewee: Right.

Interviewer: And here it's the sign. So it says here if you can put the –

- Interviewee:* The name.
- Interviewer:* The name. Mm-hmm.
- Female Voice:* _____ that's what he said
- Interviewer:* _____ but it's like everybody in the house is still sleeping _____
use that one _____.
- Female Voice:* Good. Yeah.
- Interviewee:* And I have some problem with my hand; this isn't good. I had troubles by grabbing the pencil.
- Interviewer:* What happened in your hand?
- Interviewee:* I had a surgery here because my fingers were like – how can I say –
- Interviewer:* Like arthritis?
- Interviewee:* Yes, like arthritis. And I had a surgery, but it wasn't good. I have some trouble to grab tiny things and to write.
- Interviewer:* I should bring a pencil more –
- Interviewee:* No, no, no. Well, here it is –
- Interviewer:* The cell phone, the phone.
- Interviewee:* Over here.
- Interviewer:* Will you have this cell phone for a long time?
- Interviewee:* All the time. Yes.
- Interviewer:* So when it's time for the exhibition we can call you and we can give you a personal tour of the exhibition so you can see everything.
- Interviewee:* Mm-hmm.
- Interviewer:* Thank you. We have those papers. Do you want a copy of this? What we can do if –
- Interviewee:* No. You can send it later or –

Interviewer: Okay. I can send it by mail if you prefer.

Interviewee: Yes.

Interviewer: Okay. Perfect.

Interviewee: Okay.

Interviewer: We're going to send him a copy of this.

Female Voice: Okay.

Interviewer: Are you going to sit?

Interviewee: No, take a seat.

Interviewer: How' that?

Interviewee: Take a seat.

Interviewer: How' that?

Interviewee: No, take a seat.

Interviewer: We can share the chair, and you can sit down.

Interviewee: No, no, no. I have no problem. Take a seat.

Interviewer: No. We can't do that.

Interviewee: No. How you'll be like -?

Interviewer: We can do -

Interviewee: Take a seat.

Interviewer: Yes. Take a seat sir.

Interviewee: Okay.

Interviewer: You need to be comfortable or -

Interviewee: I'm fine. I'm fine.

Interviewer: So to start with the interview your name -

Interviewee: Okay.

Interviewer: So do we do anonymous name or we do the real name here?

Female Voice: I'd say to say the anonymous name is –

Interviewer: So please tell us an anonymous name here so the full name won't be shown in the transcription.

Interviewee: Okay. My name is Julio Alberto.

Interviewer: And today's date.

Interviewee: My date of birth is July 23, 1958. Now I'm 61 years old. I was born in El Salvador, my country is El Salvador. I arrived to the United States in November 1999. It will be 20 years since I came from El Salvador to the United States. I work in construction, in a construction company, it's **building steel erecto**. We build buildings, just metal, iron. Well, I've been working in that same company for 14 years without interruption to date.

Interviewer: How did you get here to the United States? Why did you decide coming here to Richmond?

Interviewee: Well, I got here through the illegal way, by land. I crossed the border illegally, with no passport, but illegal. And since I came here I was well welcomed. I've not had any problems with the justice. I try to have a life without problems with the law. So that's a part of my story.

Interviewer: Did you leave El Salvador because of financial or political reasons?

Interviewee: Yes. This was basically because of financial reasons, because the economy in our country is too bad. And to help my children and my family, that's the goal for most of immigrant people, to help the family. And that's the reason we all emigrate here looking for a new opportunity. In my case, not for everybody, but due to the treatment we received from the persons who were taking us here I decided not bringing here my family, my children, because it took me almost 3 months to get here to this country. And some people say they come here in 30 days, 15 days, 20 days, this was an eternity and hell for me.

So that's the reason I decided not bringing my family here and from here I help them to survive in our country. So I live alone here. I have family here but you know how live is here.

Interviewer: Yes, working.

Interviewee: Here everybody survives as they can. So that's the reason why I'm alone in this country.

Interviewer: Do you have children? How many children do you have?

Interviewee: Yes, I have two children who are already married. But I have a grandchild who is a daughter for me, because my wife and I adopted her since she was born. My daughter got pregnant and the person who made her pregnant wasn't responsible, even today I don't know who he is. I don't know who the father is. Well, and since she was born I went to the town office to give my name and say I was going to be responsible for that baby. Now she's 21 years old and she's studying. She's completing the university. First God she'll be an engineer next year.

And I'm helping her from here, and also to my other grandchildren, but she's my priority because she depends on me.

Interviewer: How many more grandchildren do you have?

Interviewee: They're four including her. But as I was telling you she's something more special for me than my other grandchildren. I think on her as my daughter.

Interviewer: How do you communicate with your family? Because you don't go there, right? Have you gone back?

Interviewee: No. I've not gone back. By phone. And now with the modern technology we can see each other. Previously we just sent pictures. But now it's much easier. We can see each other and we're chatting and we're seeing each other. They show me the house. They show me, "Dad, look this. Look this. Look at the dogs. I have this." And I do the same thing here. I show them, "Look, this is the house where I'm living at. At this moment I'm shopping in these places. Look how the stores are here." And we show each other. That's a way to communicate with them.

Interviewer: Why did you decide for Richmond as the part of—?

Interviewee: Well, the person who helped me to come here was my brother, a younger brother who was already here. And he was here in Richmond. He's a mechanic. One of his friends came here and he knew he was a mechanic and he helped him to bring him here. So that's the reason why I came directly here.

Interviewer: So you got here in 1999.

Interviewee: Yes.

Interviewer: When did you learn about the AIDS or HIV epidemic?

Interviewee: I don't know exactly the date. I don't know for how long I was living with that virus without knowing. I can't tell you exactly. But when I started suffering diseases; previously I didn't had many diseases. But about 3 years ago I started suffering so much and going to the hospital and with pain and a great discomfort I was feeling. Well, I was going to the hospitals, to the doctors, different doctors. But they never told me. I had blood tests and all that, but no doctor told me that I was infected with that virus. So they gave some medication for my symptoms, but I felt like the medication wasn't doing well on me. And every time I had something new and like that. I was suffering so much during these 3 previous years.

Interviewer: That was before you came here, in El Salvador or here?

Interviewee: No, here.

Interviewer: Right here.

Interviewee: Yes, right here. I'm talking about 3 years ago from this date. So in 2017, at the end of 2017 I was seriously sick, by this date, almost in November. I was seriously sick. I was working in **Norfolk**, no, in North Carolina. And I went to the hospital in North Carolina and I had some tests. But I was feeling without energy to walk. I was getting tired easily. I was getting tired with a minimum movement. I just wanted to be sitting. I didn't feel any energy.

But even when I had blood tests in the hospital they didn't tell me, "Your blood is contaminated." So in January I came here and I didn't go back to work. And one day in January I was so seriously sick that I couldn't breathe. I was in the point that I couldn't breathe and I was feeling like I was dying. So in my mind I said, "I don't want to die here. I was feeling like I didn't have energy and the strength to say I was going to survive. And I already went to hospitals in Richmond and North Carolina, many hospitals. And no

one was telling me the reality of what I was having. They gave me medication and painkillers and nothing.

My brother and my nephew are living in this house. And I told my brother, my passport was expired, but I asked him to take me to Washington to get my passport so I could leave. I wanted to leave because I was feeling like I wouldn't last for a long time here. And he told me – well, he was watching me but he didn't say anything. And that day I told him and he said, "No. You can't take that trip. You won't resist travelling to El Salvador for 5 hours by plane. You won't resist."

And he took the decision to immediately take me to the hospital. He told me, "Wear a shirt, get a coat because I'm going to take you to the hospital instead of going to Washington." And he took me to the hospital. And to be honest, I didn't want to do anything. So when I got there the doctors attended me and I was quickly admitted and I took some test and got oxygen, and serum, and everything. Because they said, "This person is dying." I guess my level of defense was from ten to five. I was in the last part. The doctor explained all that to me. He told me, "You wouldn't last for one more day. You'd die if you didn't come here."

And I was in observation for 3 days with medication and oxygen and therapies. And I had pneumonia, brain stones, my liver was about to explode because I was vomiting blood. Everything got more complicated. And I didn't want to talk for that reason. But they got all that under control.

And after 4 days the doctor came and tells me, "Mr. Flores, did any doctor or nurse in a hospital tell you that your blood is contaminated with the HIV virus?" I said, "No. Never. No one." "Have you had any tests?" "Yes, I've had many of them. But no one has told me anything." "Well, let me tell you that you're contaminated and with the highest level of contamination. So that's what made your defenses to get so low. But don't worry because we'll help you."

And they had me there for 8 days. And after I was discharged they referred me to the VCU Hospital. I was referred to be in control with the hospital of this specialty. And that's how I got to the hospital. Dr. Bergman treated me. He's following my treatment. He has had me in a treatment with medication, blood tests, and all that. And I'm grateful with them because of the medication and the talks they gave me because that helped me a lot. And with the following, of course I'm following the medication.

Female Voice: I'm sorry to interrupt, but the light is perfect right now, and it will be perfect for about 10 more minutes. So if we can take a quick photograph.

Interviewer: The photographer has everything ready, this is perfect, and the light from the south is perfect to take the photograph. If we can take the photograph now, and then we can continue with the interview.

Interviewee: Okay.

Interviewer: Perfect.

—

Female Voice: Yes, please

Interviewer: Now it's a little bit cold. You'll need to heat a little bit.

Interviewee: Yes. It's too cold now.

Interviewer: This is the first time I wear a jacket here. I didn't wear any jacket until now.

Female Voice: There we go

Interviewer: Well, where I was?

Interviewee: I don't remember where we were left.

Interviewer: You were in the hospital and they told you that –

Interviewee: Well, when they send me with Dr. Bergman. We were left there.

Interviewer: Mm-hmm.

Interviewee: They sent me to Dr. Bergman and he took my case. And he told me, "First we'll assign you a psychologist." And they helped me to see many things about what AIDS was, what it was about, how you could get it. So they told me that many persons relapse and they can even die because they don't have knowledge or they stop taking the medication, because of the way other people treat them. So the psychologist helped me to see that many persons can mock you, mainly discrimination. So they told me that sometimes even the family can discriminate you. And they told me that affects the

person so much. And you have to make an effort to overcome all that coming, teasing.

And I took that seriously. And thanks God I was able to do that – this isn't a disease, they tell me this isn't a disease, this is a virus. So I overcame this. And thanks God at this moment I feel strong with the last news I received from the doctors, that the virus isn't detected in the blood by the laboratory devices.

But they tell me, “Don't be negligent with the treatment, with the medication. Don't be negligent because we're telling you these news and you stop taking the medication, because that can come back. This looks for a way to lodge in your body, and most of the times it lodges in the bones. So that's why it's very difficult to detect it there. But it's there. So the person stops taking the medication and after 6 months it goes back to the blood and even stronger. So don't be negligent. We'll be watching you every 3 months or more. You don't need me to be watching you with the lab tests every 3 months like we previously did. We'll do this every 6 months or more, it depends on how you look, and we'll have the lab tests, but not as frequently we were doing during all this time. I hope you can continue with your treatment. And I'm here if you need me.”

And that's how – I give an advice to the people in my case to seriously take the directions from the doctors. We need to be conscious that maybe we won't be healed or get free of this virus, but you can have a healthier life, and continue with your regular life working, and with everything. And even when we know that's still with us, but it's not that easy to say that I'm going to easily infect someone. That's more difficult. But you have that and you have to live with that and be conscious that you have that in your body.

So I give advice to all the people to follow the doctors' directions and the medical treatment, and follow it exactly as the doctor tells you from the beginning. I already have a year with this treatment, and through a year I've been able to get the oldest one this level I have right now. And the doctors, and mainly Dr. Bergman tells me, “This is something you achieved in a record time. Very few people are able to get to the level you achieved, because some of them stop taking it, they relapse, but not you. You continue reducing this more and more to get to this point right now.” So this is a special call to the people to continue with the treatment.

Interviewer: How frequently do you go to see Dr. Bergman? How many times do you see him?

Interviewee: I've been going every 3 months. I saw him in June and I'll see him again until January, in 6 months. So he was telling me, "You don't need me to see you so frequently, but it will be more sporadic. And this is the same thing with the labs. You don't have to this every 3 months." But he told me, "In January we'll have the other lab tests to see if you got worse or you keep the same."

And I'm aware with the pharmacy if they're late to send me my medication. That's something I learned from them to keep insisting if the pharmacy doesn't send it to me on time, to be aware for them to send it to me.

Interviewer: Is your medication coming by mail or you go to the pharmacy?

Interviewee: By mail.

Interviewer: By mail.

Interviewee: Yes. They send it by mail. So that's what I can say to the people.

Interviewer: When did you learn about the virus? Before you knew you had it, did you hear about the virus or –?

Interviewee: Yes, I had heard about the virus. Even coworkers in El Salvador died at a young age. I think that one of factors is that the situation in our country is very precarious, and this can be with the medication, and something else is the person's willingness. And this is what I'm explaining, that not many persons take this seriously, or maybe we wane emotionally. But I can tell you that it's too hard when they tell you that you have this virus. This is something so hard and you feel this is your end. That's the true.

When the doctor tells you, "You're infected." You feel like your world falls apart. And this was something even harder for me because of the situation I was living in the hospital. For me it was so hard in the situation I arrived to the hospital. But for me at that moment when I was fighting to survive in the hospital because in the situation I arrived to the hospital was – even the doctor told me, "One more and you'd die."

I was on the litter and connected to air and oxygen and all that and I started praying to God, and this was a communication like talking to you at this moment. And I asked God to heal me and take me

out of all my problems. And thanks God he also put his powerful hand on my body, because I felt a great relief at that moment, because honestly I was feeling like – when the doctor told me, “You have this.” At this moment so many things came to my mind. I was about to die, but I wanted to die faster, and look to die in the fastest way. But then later I was thinking and I prayed God asking to take out of my mind those wrong thoughts. And he was the one who gave me the strength to keep living.

And thanks to him I’m here giving this testimony for the good of other people. So that’s why I’m here.

Interviewer: So strong.

Interviewee: Thank you.

Interviewer: How do you think you got the virus?

Interviewee: This is a long story because I was drinking so much. I was having too many sexual relations. I was with a woman and then another one. I wasn’t living in this house during that time. I had an apartment where I was living alone. Well, I was enjoying of the liberty of that life. And you know that we don’t know who or how many persons are infected with this virus. And I couldn’t say who the person who infected me was. Sometimes I used protection but sometimes I didn’t. I was so drunk. And I couldn’t say who was. I’d not be able to say that was. Do you understand me?

Interviewer: Mm-hmm.

Interviewee: I knew about it; I already heard about the virus, but I didn’t know how it feels when you have it. And this is very hard. I just know this is very hard. And now I make another call to many young persons, mainly youth, to get protection when having intercourse because one person can be clean, but you don’t know if the other person has been using protection. Because this keeps spreading from one person to the other one.

So in the way we can protect ourselves and be careful when having sex is getting protection with the condom for man and woman, that’s the way, because the pills or shots don’t help you with that because this is in the blood. So that’s the way to prevent, to be careful with the youth. There are some young people suffering this because they’re having intercourse at a young age.

I can remember when I was young we didn't worry about that. We didn't hear about it. But not right now. Just imagine how many young boys are looking for older women, or vice versa, they prefer older people and they have – you don't know who's clean. And we need to be careful with that with young people, either male or female, so they're worried about using protection. It doesn't matter if they need to have them in their wallet, or anywhere, but they need to be aware because you never know when you can have the opportunity of a woman or a man tells you, "I like you." And you never now at what moment. You need to be ready with that always in your wallet.

Interviewer: Exactly.

Interviewee: You need that in your wallet. You need to be ready at every moment to avoid the consequences in the future. That's my advice for youth and all the people.

Interviewer: And you were told about this, did you tell your family?

Interviewee: Yes. Immediately after the doctor told me – when the doctor told me in the hospital that I had this problem I first told the people living with me here. My responsibility was for them to be protected here. My life won't be the same one here. If they decided not having me here I had to look for a place to go. That's one of the things I analyzed being in the hospital, if after leaving the hospital they told me, "I'm sorry but you can't live anymore with us." They were in their right to do that. But they backed me up, they supported me with that.

And I just take some cautions because my cases was in a high level, so I couldn't be touching and eating by using the kitchen utensils such as plates, forks, spoons. And if I'm using what they use there's a risk of infection. So I took my stuff to my room. I cook my food. So to protect them and be careful. That's how I learned. This is a new learning for me to learn to survive with this problem. And this isn't easy.

Interviewer: No.

Interviewee: No. It's not easy.

Interviewer: Not really.

Interviewee: This is something very difficult. But I can tell you that you can move forward. You can move forward when you want to do it.

Interviewer: Before coming here, what did you do in El Salvador?

Interviewee: Well –

Interviewer: I'm trying to imagine your life in El Salvador and when you come here.

Interviewee: Yes. In El Salvador – well, I started working and becoming more independent from my parents when I was 14 years old. I started working when I was 14 years old because we had many needs. We're 12 siblings in total. Only my father was working. We were living in the field. He didn't have enough money to pay our school and buy shoes and clothes. He didn't have enough. I didn't have shoes until I was 12 years old. And I went to the school like that.

But when I was 13 years old and I was maturing and got into a different stage of my life I was feeling other emotions, attraction to women, and I was ashamed of not having shoes, and going to the school like that. So I stopped going to the school when I was 13 years old. I just completed the school when I was 13 years old and I started working when I was 14 years old. I became independent. I started working as a mason's helper. And I learned the mason job with the people I was working with. And we went to work to a different department.

After I left I started getting used to leave alone. I was buying my clothes and I helped my parents with food, so they could use the food to raise my younger siblings. I'm the oldest male of my siblings. And in that way I helped them.

And I could complete the fourth grade studying at night, making the effort to work during the day and to study at night. So I could complete the fourth grade. And I was doing that until I was 30 years old and I said I won't work for a boss. I tried and tried until I was independent to work on my own. I got a debt because over there it's very difficult to save a big amount of money.

So I got a debt for a minibus. And during that time it was being used, I guess this was in 84 or 85 or something like that. The minibus transportation was in use due to the situation in the country where the guerrilla was destroying the transportation and everything was more difficult the minibuses came. And this was when I took advantage and started with the minibus. This wasn't so good or so bad, but I was doing that.

In 1996 we created a cooperative already organized, and we started getting new minibuses, with zero miles, new ones. And this wasn't good for me. When we got the debt the monthly payment was too high and it wasn't good for us.

From six of us getting new minibuses only one of us could move forward, and the rest of us unfortunately lost the minibuses. And that's the reason why I decided to emigrate and come here looking for new horizons to help my family.

But I can tell you that fighting and fighting when you get in your head that you want to move forward you can do it. That's what I learned, and I also learned that with my case now. But you can achieve everything.

Interviewer: And I'm also thinking on your daily life, if you can tell us about your day since you get up until you go to bed.

Interviewee: Well, before getting up and when I wake up thinking that I'm going to work I thank God because he let me open my eyes and have movement. And this could look like a fantasy, but this is true. I still don't get up and I'm stretching in the bed and I do a movement and I say, "Thanks God because I can move my organism and the parts of my body." And I sit down and I pray, a short pray, not so long. And then I get up ready to work and get ready, I take a shower. And then I go to work. And always praying God to protect me in my job and give me the opportunity to come back to my home again.

And at night before going to bed I do the same thing by praying and thanking for that day and that new opportunity he gave me. And I ask him to let me wake up the next day. That's my daily routine.

Interviewer: And when you take your medication, do you do this during the whole day? Do you have pills? Does the medication have an effect on you?

Interviewee: Yes. I've established a schedule for myself. As I was telling you in the beginning, I have a HIV treatment, and I have a treatment for the other diseases I already told you about, the stones, the lungs, because this hasn't been healed. But the doctor tells me, "This is a long treatment because of the virus. This doesn't let you to be completely healed."

So I have some medication for the lungs and for the stones, and they told me they didn't recommend me to have the surgery, but I could treat it with medication. But at some point that will disappear and be reduced. So I have my own schedule, I take the virus medication at 6:00 AM, that's the first thing for me to do, that's my priority at 6:00 AM because I'm leaving at that time to work. And then at 10:00 or 11:00 AM I take the other medication.

With that medication for these two diseases I have two medications I have to take every 12 hours. So I take some together, and I take the other two at night, and after 12 hours. I only have two medication scheduled every 12 hours. And those are the two I take at night, repeating the doses. So that's how I'm moving forward with my treatment. But my priority is the one for HIV. I don't change it for anything and I try not to forget to take it every day.

With the other ones I've been taking them for that same time as the HIV one. But I never miss it. And the pharmacy doesn't miss it. Different pharmacies send me the medication.

Interviewer: And everything by mail.

Interviewee: Everything by mail. And thanks God I have no payments for the medication. The hospital has helped me with the medication. And the medical insurance I have also covers some part of the medication. So that's how I have my life with the medication.

Interviewer: Did you get any side effect? Sometimes they tell you if you're taking the medication for so long you don't feel well.

Interviewee: In the beginning during the first 6 months I was feeling stomach ache, but the doctor told me that he was going to change my medication because that medication was causing that effect. And that same medication he changed he said was affecting the sight. He asked me for tests because sometimes I was seeing blurry because I was having some issues. And he asked me for a sight test. And the result was that I have a problem with the cornea. I had all the tests.

The doctor first told me I could have the surgery, but then the specialist for the surgery made me the tests, some new tests. And he said he didn't recommend me to have the surgery. He told me, "In the way you're right now you can last for so many more years, you can last for up to 10 years with the sight as you have it right now. But if you have the surgery it could be that in 5 years you'll

see much less than you can see right now. You can have another surgery in 5 years, but I can't assure that you'll be fine."

So that's why I said no and I'll better stay as I'm right now. And I signed the surgery form. But he explained to me all the risks I could have. And that's the reason why I decided to cancel that treatment.

So thanks God this hasn't gone worst or improved. I feel like I'm as normal with my sight. And the stomach was improved with the change of medication from the doctor. This has helped me because I was feeling so irritated, I felt like burning, mainly irritation. But this has helped me. I've not had any ache after that.

Interviewer: And about your job. Can you tell us about your job in construction?

Interviewee: Well, previously my job in the company is **Airowa**, this is building, but we just build with metal, iron. Have you seen the iron structure buildings?

Interviewer: Mm-hmm.

Interviewee: But then you add concrete. Other companies come to build the walls and then you can't see the iron. You can't see iron when everything is covered. The job of the company is with the iron, to build with iron, and then the other companies come to do their job with the walls and everything. My job was connecting, throwing the blades, getting ready for the people coming with concrete from other company.

Our company only works with iron and leaves everything ready and throws the blades. The blades are used for – we call this the platform, the molding. So they can come to throw the concrete. That's what I used to do.

But after this issue with my head the year – let me tell you exactly, about June 2018 I had a seizure due to these stones. So the doctor gave the order for my job that I couldn't be in the heights, and my job needed to be in the floor. So the company considered that and they didn't let me to go up to connect or throw blades.

Interviewer: The air conditioner was disconnected, now I see.

Interviewee: Yes. So they didn't let me to do that job. Now they let me since they gave the opportunity. I started working in January 2019. I

started working again because I wasn't working for about 7 months; in 2018 I wasn't working for 7 months. I started working in January this year. But they didn't let me to work at heights, but in the floor or help with everything I could, or as **farwash**.

Soldering is used a lot and many persons are working by soldering iron at heights. While the building is getting higher the people need to go higher. But there are many persons also working in the floor. So my job is now in the floor. I need to be aware of where they'll be soldering, and if I see people working there I tell them, "Move and give them some time because they'll be soldering over there. And you can come back when they're done." That's my job now. That's what I do now. But always in construction.

Interviewer: Sure. And in others constructions, not only here in Richmond, you also travel to some other parts.

Interviewee: Yes. We travel to – we work a lot in **Charlottesville**, we frequently travel to North Carolina, to Norfolk, most the beach zone like Norfolk, **Chesapeake**. There's a lot of work on all this area for the company. So we work a lot on that area. And also here in Washington, Manassas. The construction companies work on that area. And our job is fast. To build a five floors building it's for about 6 months, for our job, the structure, 5 or 6 months as a maximum. We don't last for so long in the same place. We're moving to different places.

Interviewer: Do you know where your next trip will be?

Interviewee: For working?

Interviewer: Mm-hmm.

Interviewee: In Charlottesville they've been waiting for about a month ago. They'll start a job with the university in Charlottesville. The job is so big and they have just a few people. And here they're pressing us to finish quickly. In about 3 more weeks we should finish here. We're working with a VCU University.

Interviewer: Mm-hmm.

Interviewee: This is located in **Belvidere** and Cary Street. The job we're finishing is in that corner.

Interviewer: That are has many constructions.

Interviewee: A lot. Well, since I started working in the company, I started in 2014, no, I'm lying, since 2004 I started working in the company. And they always have been working for VCU. We're working all the time with the VCU. When I had the seizure I previously told you we were finishing another building next to the VCU Hospital. We were finishing a building for the VCU. I don't know if that was a school. I don't know what –

Interviewer: They're building a lot.

Interviewee: Yes, a lot.

Interviewer: Now they have the museum and all that.

Interviewee: Yes. And where we're going to is also VCU. I guess that university is from VCU.

Interviewer: Really?

Interviewee: Yes. As I told you, the VCU gives a lot of job to the company I work for. They keep us pretty busy.

Interviewer: I was going to ask you about something you want everybody to know about the virus or anything, a hope or something like that. And the other one is about a dream, what's your dream?

Interviewee: Well, first my dream is to have a final cure for this. If there's a cure or medication which is effective and that can heal mainly for people living with this. And we can have that relief that we were finally cured. That's very important. That would be my biggest dream, and not just for me, but for many persons. Do you understand me?

Interviewer: Mm-hmm.

Female Voice: I do have a question you may already have asked, which is how does Mr. Flores's undocumented status affect his healthcare?

Interviewee: My partner is asking how your undocumented status can affect your situation with the medication or when you see the doctor or the relationship with the hospital.

Interviewer: That's a very important question for many people. In my case and in my situation this hasn't been so difficult. This hasn't been so difficult because the company I work for is a serious company. They're not contractors. They're not people working individually,

but they're a serious and well established company. And we have benefits from the company just like any other serious company can provide.

So besides of the insurance we pay for and which is mandatory that every citizen needs to have a medical insurance, we also have a medical insurance from the company, and we don't pay for it, but they do, and they back us up, and this is besides the one we have. We have, we pay for an insurance, and the company always does the job of having the contracts with this insurance company. They're always looking for the best for the employee. So we pay for that.

But we also have another insurance which is the one I tell you the company pays for. And we also have another insurance for disability, and we also pay for that. So this isn't difficult for us even when we're undocumented, because we don't have a legal documentation, but we don't have that problem. The company backs us up with that. He's going to come –

Male Voice: No. I'm fine. Hello.

Interviewer: Hello. How are you? Excuse me.

Male Voice: No. Don't worry.

Interviewer: Come in.

Male Voice: I'll be working outside for a moment.

Interviewee: No. You can come in.

Male Voice: No. I'll be working outside for a moment.

Interviewee: Okay. Well, he's my nephew's husband, they're living here. I'm renting this room. That room was some part of the dinner room, but they made some changes so I could be here.

Interviewer: Yes, that's fine.

Interviewee: So for me the undocumented status hasn't been an issue. The company supports us. We don't have so many issues with that. As far as I know none of the employees from the company have issues about that.

Interviewer: That's good because sometimes we hear stories that are not –

Interviewer: We've been sitting for a long time.

Interviewee: But sitting badly.

Interviewer: No. What other questions? I was thinking about – do you have contact with other people with the virus for support? Or did you decide that this –?

Interviewee: No.

Interviewer: Sometimes there are some meetings with the community.

Interviewee: No. I've not had – well, I've not had an opportunity. To be honest I've not had – I'm busy working and I have no time. So I don't have in my mind this. No. I live my regular life. I try to live my regular life. My job. And when I'm not working I stay here at home. I don't go outside. I try to avoid going out. And one of the main reasons is because of the problem I have with my head. And the doctor also prohibited me to drive. The doctor asked to call a taxi or look for someone to take me if I'm leaving. So I avoid leaving. I go to church with my neighbor. And that's –

Interviewer: You get a ride –

Interviewee: Yes. That's it. But I've not had the opportunity to share or to have time with people. No. And in the hospital with the appointments I have we all know were going there for the same reason. But to be honest, I don't know if the people don't go there or maybe they go to some other places, but the Hispanic people rarely –

Interviewer: I was going to ask you that.

Interviewee: I've not seen them. There are Americans and from other races.

Interviewer: But very few Hispanics.

Interviewee: I've barely seen Hispanics. So I've not had the opportunity to have time with people from our race. I've not been able to – as I told you, maybe they're in my same situation where we prefer to be anonymous.

Interviewer: Exactly. I think that's the reason.

Interviewee: So it's very difficult to know who the person living with that is. Do you understand me?

Interviewer: Mm-hmm. I was telling you that it has been very difficult for us to find someone in the Latin community to talk about their experience.

Interviewee: Right?

Interviewer: And we've asked many people. Dr. Bergman was the first one to tell us, "Yes. I can connect you with someone."

Interviewee: Yes. And I told him because I appreciate him. He speaks Spanish. He is –

Interviewer: Argentinean.

Interviewee: – Argentinean. Yes, he's Argentinean. And he's a joker, but he's a nice person, just like Daniel Lopez is also a nice person. He's from El Salvador.

Interviewer: He's also.

Interviewee: Yes, he's from El Salvador.

Interviewer: We just know each other by email.

Interviewee: Yes. He's a nice person. Dr. Bergman is a nice person. Before starting to work this year I was going to leave to El Salvador. To be exact, I had my tickets for January 3.

Interviewer: Really?

Interviewee: Yes. I was going to leave because I didn't feel well, and I said, "I won't be able to work anymore." But he was one the persons who tried to avoid I left.

Interviewer: Yes, because it would be more difficult.

Interviewee: And it was the same thing in the office in my job. They don't know in the office about this problem. They know I was dying and all that. But they don't know that I had the virus. I told my brother because we work together there. And I told him, "Please don't say anyone. I ask you for that favor. Don't say to any of the persons working here that I'm suffering this. And this is the reason why I was seriously ill." Because that was the reason and that

undermined my body and it was destroying my organism. And they don't know that. But they supported me; they told me, "If you need a treatment here you can have the best doctors to heal you. And we hope you get healed and you come back to work. Your job is here. Don't worry. We'll always pay for your medical insurance. And don't worry. Recover but don't leave."

They insisted, "You'll be losing more if you leave." And Dr. Bergman also called me. I went to say good bye to him. I scheduled an appointment to say good bye because I didn't want to leave without doing that because he's a nice person. And he took me like I was his son, "[REDACTED], don't leave. I know you can recover here. And my goal is that I'll see you healthy and recovered. It doesn't matter if you lose the flight and they don't give you your money back. Lose it but don't leave." He insisted so much that I lost my flight and I didn't leave and I'm here.

Interviewer: Thanks to the doctor.

Interviewee: And I stayed here thanks to him, because he insisted in such a way that I don't know why he didn't hit me with the belt. But thanks to him I'm here and I recovered. And that's why when he told me what you were doing I told him, "Yes doctor, I'll help you." Because thanks to him I'm here. Because if he had said, "Okay. You want to leave, go." But in my imagination like he closed the door and said, "You're not leaving from here." I take it like that. But I thank him. And that's why I couldn't say no to him now when you needed this, because this is some kind of testimony or something like that, right?

Interviewer: Yes, this is a testimony, exactly.

Interviewee: This is a testimony. And I told the doctor, "If this can help other people I can do it gladly. Count on me that I won't disappoint you." And I hope this can also help you for your job, for the campaigns you have.

Interviewer: Yes. The campaign is to prevent –

Interviewee: And I thank you for the job you do. Unfortunately you can't find many Hispanic persons from our community. But this is because we're not conscious of what we have. And we need to be conscious. Just like we got this we need to be conscious that we can help other people in their recovery. This is something difficult. This isn't easy.

- Interviewer:* It's difficult.
- Interviewee:* It's not easy to make conscious and leave with that, but we can do something. And this can be definitely done.
- Interviewer:* Do you usually connect with the Hispanic community in your job? Are there many Hispanics in your job?
- Interviewee:* Yes. In construction even when the government – the government knows that the Hispanic community is working in the construction area. I'll tell you about different construction companies. The construction is managed by a group of companies, and each of them on their specialty. For us it's the iron, to build the structure. Let's say like we draw the human body, the human skeleton.
- Interviewer:* The bones.
- Interviewee:* The bones. The skeleton, the bones, everything you can see in a drawing. That's what we do. And then the skin comes to cover the skeleton. And that's what the other companies do. I don't know how you call the **sheetrockero**, but we usually call the sheetrockero to the people doing this job with the walls and giving a form. And then the plumbers come. And that's another company. That's not the same one. They're different ones. They're electricians, air conditioner. That's another one.
- The construction is built by different companies with a specialty. And all those companies use the Hispanic workforce. And there's no discrimination between men and women. You can go to the construction and you'll see women soldering. Just imagine women soldering. You'll see with the masons other group called the **brickileros**, and you'll see women attaching bricks.
- Interviewer:* Good morning.
- Female Voice:* Good morning
- Interviewee:* Are you leaving?
- Female Voice:* Yes.
- Interviewee:* You dad already came. Didn't you see him?
- Female Voice:* Yes.
- Interviewee:* Put on a coat because it's freezing.

Interviewer: Yes, it's cold.

Interviewee: And they're everywhere. I'm not an electrician but some women specialize on what they can do, and the opportunity they can have. And I can tell you that mainly in construction the workforce is Hispanic. And the government knows that.

Interviewer: That's true.

Interviewee: But they don't consider us to say, "We should help this people to be legal."

Interviewer: Yes, the situation is pretty bad here.

Interviewee: It's pretty bad. And it would be good that the government takes that in consideration. They really know that. And maybe that's why in construction immigration doesn't bother even with the actual situation. We're building a 19 floors hotel in Norfolk in front of the immigration offices. And there were about 300 people working in that building, and half of them were Hispanics. And they know that not all of them have documents. Some of them can have a permit like TPS or something like that, and some others are residents.

But the people who are resident don't like to work in construction. They're looking for a job in office or something like that. Most of the people working in construction are undocumented, most of us work in construction. Just imagine with this cold weather and working outdoors; they don't like to work like this, Americans don't like this.

Interviewer: They don't do it.

Interviewee: Just a few of them.

Interviewer: Yes, just a few.

Interviewee: Just a few. And electricians working with electricity and plumbing are so many more, but because they're working indoors. But in our job there's nothing protecting us from the cold weather, there's nothing protecting us from the sun during summer, and the weather is intolerable.

Interviewer: Yes, that's true.

Interviewee: So the people working in electricity, the sheetrockero and all that, they work in shadow and they're protecting from the weather. And the Americans work mainly in that area. But Hispanics work outdoors.

Interviewer: Thank you for job.

Interviewee: Thank you for your time.

Interviewer: Well, do you want to tell us something else we didn't ask you and you want to share with us?

Interviewee: No. I think I'm taking so much of your time with my stories.

Interviewer: No. Thank you so much for sharing.

Interviewee: I hope that what I said can help you with your job.

Interviewer: Yes. So we'll be in touch. We're going to show you the except – this interview he's been for about 2 hours, and we take some part of that interview and we do like 400 –

Interviewee: A summary.

Interviewer: Mm-hmm. We summarize. They're about 400 words. So we can share with you that summary if everything goes well. And so the exhibition will be open in January.

Interviewee: In January, right.

Interviewer: Your family can come, and this is free, and we can give you a free tour so you can see how the exhibition is.

Interviewee: Okay.

Interviewer: Okay?

Interviewee: Yes, okay. I just want to thank you for considering me.

Interviewer: Thank you.

Interviewee: And you know if I can help you in the future, I don't think so, because I think with this is – but that would be my dream. You asked me what could be my dream, and this will be to be able to say some day that I was healed and I'm healthy. That would be my dream. When the doctor told me, "The virus isn't detected

anymore.” And I felt like glorious. I felt a new person, just like I was born again. I even wanted to cry. To be honest, my tears came but because of the emotion I was feeling. I felt like I was healed.

And if in the future they say, “There’s a medication that can really cure this.” That would be wonderful, and not just for me, but for everybody.

Interviewer: Well, have a nice day, take some rest.

Interviewee: Thank you. Have a nice day too.

Interviewer: Yes, exactly.

Interviewee: And God bless you for the job you do.

Interviewer: Thank you. And your job too, which is really needed. And you said that not everybody do this. And we also thank you for that.

Interviewee: Yes, because we depend on him. We depend on him for everything. And everything else is our will, but this is mainly God’s will.

Interviewer: Yes.

Interviewee: We’re nothing without him.

Interviewer: That’s true.

Interviewee: Without God’s will we’re nothing, because we’re here. I analyze this, the virus doesn’t discriminate anyone, here we have poor and rich, anyone. I see in the hospital, and I don’t know the level they have, but with the appearance we can see on them we see they’re educated people. And a lot of people go there for the same reason I go there. So this doesn’t respect social status or anything, if he’s poor or rich. So I think we’re nothing without God’s will. We all depend on him. We can say, “No. I’m free because I have money.” No. This is like death, the death takes everybody –

Interviewer: Yes, that’s true. Time is time, right?

Interviewee: Yes.

[End of Audio]