Background:

Lourdes Lee Kong was born in the Philippines in 1953. Her family moved to the Philippines to avoid political strife in China. Lourdes was raised with 9 other siblings by her mother because her father died when he was 45. Her mother owned a small business in the Mindanao region and was very influential in their neighborhood. Lourdes did well in school, and learned 4 or 5 languages before attending college. Lourdes’s mother encouraged her to pursue nursing like her older sister had rather than chemical engineering, dentistry, or an MD. So Lourdes attended University of Santo Tomas for a 5-year nursing program. She was a member of the ROTC, and very active on campus. After graduating, Lourdes moved to Houston, Texas and worked as a ward clerk in the Methodist hospital, despite her stellar scores in school. She was humbled by her position, and was a hard worker nonetheless. Lourdes was eventually able to work her way up in the hospital. She is currently retired.

Setting:

The interview centers on the areas of labor and capital to develop a working history around childhood experiences, family life, and daily activities. Much attention is given to her experiences growing up and her career in medicine at the Texas Medical Center. The interview was conducted in a private conference room in Fondren Library at Rice University. It lasted approximately 77 minutes.

Interview Transcript:

Key:

<table>
<thead>
<tr>
<th>LR</th>
<th>Lucas Riccardi</th>
</tr>
</thead>
<tbody>
<tr>
<td>CW</td>
<td>Chavonte Wright</td>
</tr>
<tr>
<td>LK</td>
<td>Lourdes Lee Kong</td>
</tr>
<tr>
<td>—</td>
<td>Abrupt stop, false start</td>
</tr>
<tr>
<td>…</td>
<td>Speech trails off, pause</td>
</tr>
<tr>
<td><em>italics</em></td>
<td>Emphasis</td>
</tr>
<tr>
<td>(?)</td>
<td>Preceding word may not be accurate</td>
</tr>
<tr>
<td>[Brackets]</td>
<td>Actions [laughs, sighs, etc.] or interview notes</td>
</tr>
</tbody>
</table>

**LR:** So first, we'll just introduce ourselves. My name is Lucas Riccardi.

**CW:** I’m Chavonte Wright, and we’re interviewing you for the Houston American Asian Survey.
LR: Yes. Um, if you don’t beginning by telling us a little about your childhood, uh…

LK: Certainly. My name is Lourdes. Lee is my maiden name, and Kong is my married name.

LR: Okay.

LK: I have a very interesting childhood. I was born—I am by nationality, origin-wise—my parents are both from mainland China. And I was born in the Philippines in 1953. Um…I have an interesting childhood with exposure to Philippine culture and, uh, we were brought up—we—I come from a huge family. Well, big. A family of ten children. Um, my mom was a single mom, I can say, because my father died, um—

LR: [overlapping] When you were how old?

LK: —at age 45 and I was only 2 years old. My mother was a phenomenal woman. She raised us by herself. And she didn’t have relatives in the Philippines ‘cause they came from China.

LR: [overlapping] Okay.

CW: [overlapping] Can I ask—

LK: [overlapping] But she was very strong.

CW: —why you moved to the Philippines?

LK: My parents moved to the Philippines to get away from all this, uh, unrest. The communist unrest and everything.

CW: Okay.

LK: So, um—this…my mom’s image was very interesting because she was a very strong woman, and, uh, my father was the opposite. He was very gentle. They used to own a business, a general merchandise with some partnerships with friends. Uh, so my mom was just a—a homemaker, you know, with 10 children. But when my father died… So my mother said, “Okay, we need to redo our household issues, you know, the—the finances.” So she went to the partners said, “I’d like to take the shares of my husband.” In those days, there was hardly any written contract. Everything was by shake—by the shake of the hands and by word of mouth. And so these so-called friends told my mom, “Oh, we don’t have money. The business is bankrupt.” So my mother said, “Really?” So you—she went back home and told the maids—there were four maids—“I can’t afford you because, uh, I don’t have much money left.” Uh, one of them didn’t want to leave because when my mother hired the maids, they belong to—they become part of our family. They eat the same food that we do. And in the Philippines you’d be surprised—the household—there’s a lot of cultural issues that probably nobody really discuss. When you are in a family that has money and has maids like we did, some families actually…. The maids—the servants don’t eat the same food as the family. They have different—the rice, for example, which is a staple, just like the bread here. There is first-class, second-class, third-
class rice. Grade. So usually in other families—that we found out, they would buy the third-grade or the second-grade rice for the servants, and the house—the main—the family eats the first-class grade. And my mother find that very offensive. So she actually have not—she—the servants eat the same food that we do. We often complained to my mom because with 10 children, sometimes we finish up all the—the food. My mother said, “Leave some for the servants! Leave some for the servants!” And—but if we happened to have consumed everything, my mother will say, “Okay.” [clears throat] She will say, “All the maid go to the cupboard and get the canned goods.”

Like Spam, sardines. Um, those are considered, um, priced, um, [clears throat] specialty because they’re imported. And, over here, you say something to someone, “Spam.” They say, “Ooh, no! I don’t want Spam!” [LR and CW laugh] But Spam and the canned sardines, they’re all imported. They’re supposed to be, uh, special, you know, like—I had ducks (?) in the freezer. They’re all imported. At that time, it was not manufactured at all in the Philippines. So I used to tell them—the maid, “Ma, can I sit with you again and—and eat with you?” [LR laughs] She said, “You just ate!” [All laugh] But that’s—that’s um, you know—but because we are—we grew up very close to the maid. I would sneak into the maids’ quarters, and we’re not allowed—my mom would not allow us to read the—the servants’ comic magazines. Uh, but I would sneak in and read it and sit on their bed while they’re ironing. [CW laughs] And I would—that’s how I learned their language. So I’m very close to the servants. I’m just always close to the servants.

[0:05:21]

LR: What language did they speak?

LK: They—the servants, uh—I grew up in the part—the Philippines is comprised of 7,100 islands, and there’s 3 main regional area: the north, where the capital city is from—the—is—is Manila; and the Visayas region, which is right in the middle where lots of multiple islands. The recent Haiyan typhoon hit that middle part of the Philippines.

LR: Okay.

LK: And then I’m from the south. So I’m a country girl. The south is called Mindanao. And is habit—it—a lot of them—um, we have a lot of Muslim influence there, partly because of the proximity of Indonesia and Malaysia. It’s just, you know, a stone’s throw away, if I can say that. And so we—most of the maids did not come from within our region. They come from the Visayas region.

LR: Okay.

LK: So they speak Visayan. And, to my knowledge, unless they have updated it—and most likely they have—I think there are 86 dialects in the Philippines. So I speak 4 or 5 of them. Not—not enough. But the Visayan language, we picked up. My mom also managed to speak—mostly in—speak Visayan to communicate with the servants and the customers.

CW: How old were you when you moved to the Philippines?
LK: I was 20—Oh, no! I was born there.

CW: Oh, okay, you were born there.

LK: [overlapping] I was born there.

CW: [overlapping] Okay. Thank you.

LR: Then what language did you speak with your family?

LK: We spoke Chinese mainly, and we, eventually as we get older, mix it with the Filipino, uh, in our town, it’s called Zamboanga, 80 percent of the core language is Spanish. So it—when we speak it, it sounds like we’re speaking Spanish. But it’s what they called broken Spanish. It’s called Chavacano.

LR: Okay.

LK: And so—and the Visayan, I speak that to communicate with the maids. And then we go to school. In the morning, we have Chinese sessions. Sometimes they’re reverse—but a certain year, it’s, uh, Chinese school in the morning and English and Filipino in the afternoon. So from—we start school at 7:15 AM. So the chauffeur will take us to school at 7. Start school at 7:15. They pick us up at 12:15 for a break of one-hour lunch, and morning classes are all in Chinese. And in Chinese, we learned 2 languages in Chinese. The national language, Mandarin, and an immediate translation in Fujianese, which my parents are from. So it is complicated, but, for example, uh, if I’m talking to you, “What is your name?” And then I have an immediate translation in Spanish, “¿Como se llama?” And it’s instantaneous translation, side-by-side. So we actually learned 2 in the morning. And then in the afternoon we have English, and it’s required we have one session in Tagalog, the national language of the Philippines. So we actually are learning like 4 languages at one time.

LR: Wow.

CW: Wow.

LK: And we didn’t get home till 5:15. So we go back at 1:15 till 5:15.

LR: Wow. Wow. Um, so you said that your mother, uh—well your parents, were—were business people.

LK: Oh, yes.

LR: Um, and then after your father passed, what occupation did your mother have?

LK: Oh. My mother just assumed the business. She went over—

LR: [overlapping] Okay.
LK: —with the maids through—with boxes and sacks of whatever took whatever she can take from the store. [LR and CW laugh] This is really fascinating story, you know? I—I was told to write about it. And then she decided to open up a store without license. She didn’t—she—my mother never went to school. When she was in China as a little girl, um, you know, during those times girls didn’t go to school. But her parents were pretty progressive that they sent her to the next town to go to school. She would escape (?) back home, and they gave up on her. And during those times, also, it was fashionable, or—or so—socially eh—better or the elitist will bind their—their—their feet. Have you heard about feet binding?

CW: No.

[0:09:47]

LK: Okay. In China, the smaller your feet, the more socially—the more elite you are. So they tried to bind my mom’s feet. Ev—you know, you will see if you ever travel to China, go Google it, you know [loud banging sounds] feet binding in China. There’s the cutest little shoes, but their feet is so deformed because it’s contracted. My mother will unbound it every night when everybody’s asleep. So my mom probably has the biggest feet during her generation. She has size 7. So—but she’s very determined not to be confined to that, you know? She didn’t agree with that. So she was very strong-willed. So, I just have to relay that to you.

That’s how my mom—um, that’s why she didn’t go to school. She—she was not educated, but she was very smart and very kind. So she opened up the store and became successful to the point that the other partners came and visited her. Said, “Can we join you?” Said, “Nope. [LR and CW laugh] Because I have 10 children. They open the drawer. They get a dollar. I mean a peso or two. I don’t have to answer to anyone. It’s my own children, my own money.” So—and she got in trouble with the government. But she was quite feisty. [LR and CW laugh] She opened up the store right in the marketplace. And this is interesting. That’s why when people talk about environment plays a role in your upbringing, there may be some truth to that? But not really. I grew up—up to 4th grade, which is—how old would I be? I started [counting] 7, 8, 9—about 10 years old. It’s in the market. You know like markets. Next door to us was a prostitution place. And we’re in the midst of market.

LR: What town is this in—?

LK: This is in Zamboanga.


LK: It’s—Zamboanga is known as the city of flowers because it’s so—you know, lots of flowers everywhere. But my mom was so strong that the next-door madam would come and talk to my mom and said—he said—they call her auntie or mama. “Auntie, you are very different. You talk to me and you know what I do for a living.” She said, “What you do is—with your business is your business, and it’s up to God to judge you. I’m not judging you. But, you stay away from my laborers. You stay away from my children. If you do not stay away from them, then that’s when you’ll have problems.” So they respected my mom. And all the hoodlums, the gangsters, you
know, when we go down—when I go to the maid—with the maid to the market to shop,
[whispers] I love going with the maid ‘cause I get treats! [CW and LR laugh] And you know
these young people will do a wolf whistle, you know? And then we’ll hear, “Oh, don’t do that!
That’s mama’s daughter.” We kinda have a protection. The reason: my mother took care of the
poor people in the neighborhood. When there is a—a poor guy, you know, um, he’s a drunkard.
Or we call him Tarzan. He walks around—I remember this—without clothes on, you know, just
his shorts. He gets so drunk. He’s actually really harmless, but he gets so drunk he falls and have
a cut. My mom will get the laborers to go get him, bring him inside the house, and she will clean
his wound. And that’s how kind my mom is. And I think people saw that and respected her.

LR: Mm-hmm. It seems that she was a pretty like prominent figure in that area.

LK: Yeah, she was very prominent. When she goes to a shop, the manager comes down to tend
to her. And she doesn’t want attention. She calls the phone…. Our clothes with 7 children, you
should see some of the pictures I have. They’re all of the same fabric. My mom was very frugal.
She said, “When you are frugal, you can save some, and you can help others more.” So she
would buy a ream of cloth—you know, the material, a bolt. [laughs] And she takes the bolt to the
seamstress, and the seamstress will measure us. And we all come with different design, okay,
[CW and LR laugh] different styles, but the same fabric. Remember The Sound of Music, when
Julie Andrews pull the drapes? Have you seen Sound…? [CW laughs]

LR: Yeah.

LK: And they all—and that’s how we looked! [CW and LR laugh] Same material!

LR: Did your, um—did your mother, and your father, um, with your whole family encourage
assimilation to Filipino culture or did you maintain uh, cultural ties to China? How do you feel
that your childhood upbringing was?

[0:14:36]

LK: It’s very interesting. Yeah. This is where I think, maybe if I talked to a Filipino, they would
not realize. Um, I grew up in—in a household with Filipino servants, and we speak Chinese and
we speak Filipino. As a child growing up, I didn’t understand discrimination or thing like that.
We were just—we thought we just belonged there. But when we go out to walk, we’ll hear these
Filipino kids taunting us. You know, “Chi-chi”—you know, the Chinese, um, you know—
taunting Chinese verbiage. It hurt—it’s very hurtful. But my mom always told us, “Don’t worry
about that, you know? That won’t hurt you. When it comes—when they, uh—I’ll teach you one
day how to respond if you ever come across some really nasty, you know, com—verbal abuse.”

So we—in answer to your question, my mother, maybe because she felt she belonged to
the Philippines and would like to contribute, that’s how she was helping the poor people and
everything. But yet also she felt the discrimination. Uh, a subtle one, for example, if she did not
naturalize to become Filipino citizen, she can’t operate the business. That’s how she got in
trouble. And—and so—you can’t own property either. You have to be naturalized. I said (?)—
unlike in the US, you know, people complain about discrimination. If they go to the other
countries in the world, there are other discrimination that still exist. You know, you can’t own
business. You can’t own property. In the United States, you can. A foreigner can come, as long as you have money, you can buy the property. So, um, we were taught that…. I have to really qualify this, because I—I don’t want my mother to be misunderstood. She’s dead, but I talk to her as in the present tense because she’s always alive in my heart.

Um, she told us to avoid mingling with the other Filipinos. So, you know, you can play with them; you can have best friends with them. But in terms of marriage, she said the only reason is because—even coming from within culture—the upbringing is still different. And when you marry, you still have individual differences to deal with. Some idiosyncrasies. Much more if you’re coming from another culture. There’ll be more friction. That was her rationalization. So, it was very difficult because I went to university with all the Filipinos, and, you know, I have crushes on the young, [CW and LR laugh] good-looking, you know, guys. And they have—they start calling me. I was very active at university. I was the core sponsor of the ROTC. I was, you know, everywhere in the campus. I was in the presidential palace. But… I have the back of my mind that I can’t date any one of them unless they’re Chinese. And it was very disconcerting. But I also understood my mom’s—you know, and she—she rules us. [All laugh]

You know how, nowadays the psychologists will say that’s emotional abuse. The way I look at it, because she was confronted with a situation with 10 children, she’s doing her darndest best to bring us up the right way. So she said, “If you ever have sex outside of marriage, you’ll be disowned.” [All laugh] You know how strong a statement that is? Because we were brought up to always respect mama because she was there for us. I mean, she sacrificed a lot for us. And so that was like, “Oh my God.” She said, “I will—you will be disowned. I will put your name in a newspaper, officially, that you’re legally disowned. And I don’t know where you’re gonna live.” So that was scary, huh? Because 7 girls and 3 boys. I think that’s—

LR: [overlapping] Right.

LK: —the thing that she could do to—to keep us, you know, in—in—in, you know, proper. And she often tell us, “If you try to bring food in the bathroom, your hands will curl—curl up like this permanently.” [whispers] I used to remember that, and now that’s emotional abuse according to the current psychology, but I don’t look at it that way. It’s just her way of instilling fear. And I look at it differently. Fear, if—if it is to prevent a child from getting injured, I think to a certain degree is acceptable. Like you tell a child, “If you cross the street without looking, you could die. You could get killed.” That’s fear. And I think it’s a healthy fear. The way she wanted to maintain hygiene with us because, you know, how—how can she keep up with 10 kids running around? You know, bringing food in the bathroom, that’s not clean. So sometimes I need to run to the restroom in the middle of—during the dinner and I still have food in my mouth and I said, “[gasps] I’m eating in the bathroom!” I look at my hands, literally, to see if it’s curling up, you know? [LR laughs] But this is just an example, I mean. But I don’t blame her for that. She—she did what she could by herself and had managed to have a successful business. I hope I’m answering your question. I digress.

[0:20:15]

LR: Absolutely, yes.
CW: [overlapping] You are.

LK: I—I’m—

LR: We’re happy to hear whatever stories you have to share, so…

CW: Mm-hmm it’s not completely (?)…

LK: I’m supposed to write it down for my children.

CW: Well now you’ll have it on file!

LR: Ask (?) maybe about…?

CW: Yeah. So, um…

LK: Did I answer your question, Lucas?

LR: Yes! Um, I mean, from what I understand, um, your mother kind of wanted to assimilate into the Filipino—Filipino culture for the good of her business, but she also wanted you to maintain—


LK: Yes, but I wanted to stress the—the discrimination part of like marrying into your own culture.

LR: Mm-hmm. Yes.

LK: Within the Chinese culture, there are still regional differences. We were not allowed to marry Cantonese.

CW: Oh.

LR: Okay.

LK: That’s another regional difference. She said the Cantonese lifestyle is—is like—this is—it’s like the, um—the people from Milan. They like to be fashionable. Even if they have nothing to eat, they would rather have a Porsche or something fancy or the [indistinguishable 1 word] gallant (?) signature stuff rather than food. That they want elegant. She said, “That’s the Cantonese.” So we were not allowed. But, my mother was progressive, as I said. As the years go by, one of my sisters actually married a Cantonese because, she said, “Oh, well, I think times have changed.” [All laugh]

CW: So I wanted to ask you, you said you were active in your university. What university did you attend [overlapping] in the Philippines?
LK: [overlapping] I went to the University of Santo Tomas. And it is different from University of Saint Thomas. And University of Santo Tomas is actually 25 year old—25 years older than Yale. It’s a pontifical university, in other words, it is under the mandate and the control of the Pope.

CW: Okay. And, um, so you ended up majoring in nursing?

LK: I went to—this is how naïve—I was from a small town, and my mom would allow me to go to the capital city for my education, but would not allow one of my sisters. Because she’s—my one of my sisters—they’re really pretty. And I’m kind of more on the mother—on the—aunt—they call me lola, grandma, because I always looked homely. [CW laughs] And so—and I’m always like, when I have a party invitation I don’t want to go. She will encourage me to go. And my sister used to resent me for that. She said, “Mama let you go and I can’t go without you coming and tagging along.” Because I never want to go. It didn’t interest me.

So going to the capital city, I had to take an entrance exam. Do you realize how naïve and how—when I look back—[whispers] Oh my God, that is—I could have not made it. I didn’t apply to any universities—just one. Took the entrance exam, and I just by the grace of God passed it, but that’s what I’m saying is—I—nobody counseled me as to what to do. Teachers then are not counseling students what they should do. So I went to University of Santo Tomas and I went to the 5-year program. It’s a pyramidal nursing program.

CW: Right.

LK: It’s—it’s very strict. I don’t know if there’s (?) still now. The initial applicants were, um, over 2000. There was a lot applying. They only accept the first 1000 for the first year. And then…. No. No, the first 300. They only take 300 students. So I made the cut. And then, thereafter, if you make that cut, if you maintain the grade, then you can stay. Otherwise, you have to leave. So we have 2 years of theory. All just theoretical studies. We have to encompass all pharmacology, maternal and health, all the biology, and micro and botany, everything. And then on the third year, we become proper students. They called them proper students. Half a day of clinic work—clinic studies—and half a day for theory. And so we—for 3 years. So we have to rotate for that 3 years all the services, which I hope….

I am a nurse, when I—I train nurses at, um, hospitals. It breaks my heart to know that they’re not given the full, you know, studies. Because even with that intense studies, I still feel I still need to know more. We had to know everything about a disease process, every symptom. Like say, jaundice, when somebody turns yellow. My clinical instructor will snap her finger, tap her feet. You had to the answer within 10. Why is the skin yellow? You have to give her the pathophysiology to the cause of that tinge. And—and that is good because it makes you think. You—you know, you just don’t go into a patient’s room and say, “Oh. Skin is yellow.” That’s it. You’re not thinking. Why is it causing it? Should I look at the urine output? Should I look at the, you know—the belly, feel if it’s…you know? That I had an intense training in and I’m very grateful for that.

[0:25:31]
CW: So you chose to come to the United States post-graduation, and what was that…

LK: Let me go back a little bit about my—why I ended up in nursing. That was not my first choice.

CW: Oh! Okay.

LK: I wanted to be a chemical engineer. [LK and CW laugh]

LR: Okay.

LK: But the only chemical engineer that is really good in the Philippines at that time was called, um, the, um Mapúa Institute of—they call it the MIT of the Philippines. Mapúa Institute of Technology. But 95 percent were boys.

LR: Okay.

LK: My mom wouldn’t let me go there. [LK and LR laugh] So, I said, “Okay. What about dentistry?” She said, “No, because dentist, the mouth is the dirtiest part of any—of the human body. And no. I won’t let you deal with that.” So we still listen to our mom, you know? That—that—just the age (?) you do what you want to take. So I said, “Okay. Nursing.” So I went into nursing ‘cause my oldest sister, uh, took nursing.

LR: Okay.

LK: And that’s—and oh, I wanted to be a doctor. I said, “Okay, after chemical engineer, then this, and then, okay, what about being a doctor?” She said, “Nope.” I said, “Why?” She said, “Well, look. You have to go through 10 years of training, you know? Your 4 year of undergrad and then another 4 year and then 2 year more. That’s 10 years!” She said, “You just get married and have babies and not work as a doctor. It’s a waste of money.” [CW laughs] That’s—she—you know, she has to compute. So, uh, I ended up in nursing. [someone sneezes] So I hope that helps you, you know, that’s part of Asian mind—mindset.

CW: [overlapping] Yeah, this is important.

LR: [overlapping] Absolutely.

CW: Mm-hmm. So, uh, coming to the United States, what was that transition like for you?

LK: Very difficult.

CW: Mm-hmm.

LK: It’s complicated.

LR: [overlapping] In what year did you do that?
LK: I came um, at age 24.

LR: Okay.

LK: I graduated 22, 23? It was very difficult. It was not a choice for me to come here. Um, I, um, was married to a physician from University of Santo Tomas. He came—he was sponsored by Baylor. That was my first husband.

CW: [overlapping] In what year did you get married?

LK: Yeah, I got married here. Well, you know, legally, we got engaged in the Philippines. You know, you have to have a formal thing written. And he’s from the capital city. I’m from the south. Um, complicated. My whole family, then…my mom had managed to build up the business very successfully, you know, and they were successful, but the—the father you know, they—they had their own ways so….

We were gonna get married in the Philippines. We had a formal engagement. They came to our town, all this big thing. And then, they said the marriage has to be in the capital city. My mother said, “No, no. It has to be in our town. It’s in the girl’s hometown.” [clears throat] And they didn’t want to do that. So there was such a lot of discourse between the two family. My brother said, “Okay, the only solution is you just go to the States and get married there.” You know how that broke my heart? ‘Cause I wanted my oldest brother to walk me down the aisle. But, at that time, you know, I said, “Okay.” So…

But he was sponsored by Baylor so he had to come here, uh, um, Houston, Baylor College of Medicine, first. And then the hospital sponsored me to come a year later. And that’s how I came. It was difficult because everything in the United States you have to do yourself. There was no such thing as servant. And I was willing to do that. It was just an adjustment, you know? The Philippines have only two seasons: the wet and the dry. And over here, I came in February. It was cold. [CW and LR laugh] And my—my ex-husband was so…was seem (?)—partly, I think, my brother—my oldest brother, who’s like a father to me—my three brothers told me that I was their favorite sister because, again, I was like the grandma. [LR laughs] Whatever they tell me to do I—I was the goody-goody of the, um—of the 7 sisters. So, uh, my oldest brother told my ex that, okay, with Lourdes, you have to be careful. She likes to spend a lot of money. [CW laughs] She likes to buy matching purse and shoes once a month at least.

[0:30:09]

LR: Was this true?

LK: Yes. [All laugh] My professor used to—every time I go to class, “Miss Lee, what do you have today?” [LR laughs] A matching purse and a matching shoes! Well, partly because my brothers will send me money and they’ll tell, “Don’t tell anybody I gave you this money.” So I have loads of money every time! I mean, because I was their favorite, you know?

LR: Right.
LK: So—he, for one—my ex—that (?) I was so—when I came, he took all my paycheck. And rationed as to how much money I can have. I can’t have maids, you know, and I remember this, that I wasn’t allowed to turn on the heater during winter because, he said, “This is the beauty of nature. When it’s winter, enjoy the cold weather. When it’s summer, enjoy the hot weather.” [deep breath] [whispers] I was crying, you know. I was washing the dishes. It was so cold, the water. And, you know, I’ve never washed dishes at home. So I—it was not fun. It was not good. So, and…those were—I guess I adjusted to the extreme. Now I don’t want anybody to do anything for me.

CW: Um, what neighborhood were you living in when you moved?

LK: Parkwood Apartments. Uh, or first we stayed at Halman (?) Hall inside the Medical Center. That was the residents’, um, apartment complex for Baylor students. I don’t know if it’s still there.

LR: When your ex-husband…

LK: Fabro (?)—Fabro (?) Hall, when my husband was a resident, uh, with Baylor College of Medicine at the rehab—physical medicine and rehab.

LR: Your ex-husband, when he moved to the United States, was a student at Baylor or he was working at Baylor?

LK: [overlapping] He was a resident already.

LR: [overlapping] He was doing his residency.

LK: Yeah. He was accepted, and then he became a fellow, and [sighs]—and after he finished his residency, he was a chief resident. He was very smart. And so we—we had to move out of the apartment because, uh, we had the—the first daughter. And that’s only for—you—it’s—it’s not allowed—children are not allowed. So we moved to Parkwood Apartment right by VA. And, uh, I think I still remember the number. [All laugh] So that’s where we moved. And—and then when I continue working we eventually move to, um, Missouri City, Thunderbird North area. We bought a property.

CW: Okay.

LK: So…

LR: Uh, what was the ethnic makeup of, um, the different areas you’ve lived in in Houston?

LK: The eth—well, we live basically a very sterile area in—in medical center for 4 years because he was a resident there, and then we moved again just within the medical center in the VA complex. Um, all are association was with fellow medical students, fellow residents, and their—his doctors and my nurses friends. I worked at Methodist hospital. And, um, that’s an interesting part of my life. Uh, very humbling. And um, so—then we mo—after about 2 years we
saved enough money, we bought a property. My husband would not let me get money from my family. My mother— and brother who had tried to send money from me, but he would always take it. So... um... What was, uh, my job at Methodist hospital? Okay, we’ll get to that when you come there. I’m sorry if I digress. There’s just so much history!

LR: [overlapping] No! That’s fine. No, no, no.

CW: [overlapping] It’s so good, though! [LK laughs]

LR: Thank you for everything. Um, is residential diversity important to you? I know that, um, in Houston there are, you know, pockets of specific ethnic communities. Is that something that was ever attractive to you, to live in a Filipino or a Chinese-American area?

LK: Looking back, not really. I was just... I think I had no choice. We just go where we had to find a place to be close to the medical center. Now, we actually... If I stop every now and then it’s...

LR: That’s okay.

LK: Um, very diverse. Our next-door neighbor was Korean, downstairs they were from the Middle East. And, uh, it didn’t—it wasn’t important. And, uh, I have, um—I have contacted fellow Filipino, uh, groups. The funny thing about ethnicity, and I don’t know if you have interviewed other people?

[0:35:05]

LR: No. [LR and CW laugh]

LK: Is within the Filipino culture, just like within the Chinese culture, and I’m sure in the same Italian, there’s I—let’s say what we call competition.

CW: Yes.

LK: Keeping up with the Jones.

CW: Mm-hmm.

LK: I was just reared by my mom to—don’t care about that. So that’s why she didn’t mind if we lived in that neighborhood. Because we were protected. Most of the rich people lived in a—well eventually we moved to—we built our own compound. My mother’s business flourished. So it was in a good neighborhood. I think the most important was crime. If the crime rate was low, I think that was one of the consideration that we had to look into. Nothing to do with ethnicity. I just—I could very well be placed anywhere in the world and I—I will still be very comfortable because I guess the way that we are, we—we—we look at the person, not... But I find it fascinating to live with different people ‘cause I’m learning a lot every day. So, then after we moved to the—it’s, uh—Quail Valley area. My husband decided to open his own practice. So—
we—where there’s an opening we moved to Beaumont, Texas. That’s where my daughter was, uh, raised. She was born in Houston. But, yeah, she was raised…

**CW:** [overlapping] How many kids do you have?

**LK:** Two.

**CW:** Two? Okay.

**LK:** The interesting thing the place that we moved into…our next-door neighbor, they’re all white. We were the only non-white. My next-door neighbor, husband and wife, were lawyers. They were prominent lawyers in town. [pause]

I have to stop, I’m getting my wind. [All laugh] [pause]

She came and greeted us, very friendly. She’s this typical Southern, just like a Southern belle, but very smart. She’s a lawyer herself. She’s still friends with me. First thing she asked me, “[gasp]” She said, [whispers] “You speak English!” [LR laughs] And she’s so pretty. I mean, you know. And I said, in my heart I said…. [pause]

I have to stop. I get a little winded. Sorry. I have a heart issue.

**CW:** Oh, okay.

**LK:** That’s why she has to drive me.

[The recorder is turned off for a short break and is resumed a few minutes later.]

**LK:** Again, she was surprised that I could speak English. My English is really not perfect, my children will correct my grammar every now and then or my pronunciation, but I told them, “Hey, look, I didn’t grow up—I wasn’t raised in United States. My English pronunciation is based on the things I learned in the Philippines and that has the Philippine accent.”

But there’s one interesting twist that y’all have to be very—pay attention to. It's just something about people looking at different culture, we just all are in disgust or whatever. And, someone said, “What do you mean?” I said, “Well, if a British guy, let’s say the Beatles, John McCartney, would pronounce something ‘organ-ization’ and the way we pronounce in the United States ‘organiz-ation,’ you wouldn’t say anything about it, would you? But if a Filipino, Asian or Spanish person would pronounce something, it’s the same thing that's said differently, you would say, “Eh! That’s Wrong!” What’s with it?!

**CW:** Mm-hmm.

**LR:** Right.

**LK:** You see? The—so I—I just tell them, I said, “Stop!” Like, my husband, [indistinguishable] I pronounce LUM-bar, you know, the lumbar? He said “No, it’s LUM-bar.” I said, “No. It’s—what’s the root word for the lumbar? [snaps fingers] It’s—it’s—it’s Latin! There’s no “uh” in—in—you know, it’s “Luh.” [Laughs] He said, “Luh? Okay” [All laugh] I said as long as you understand it, let it be! How to pronounce it—we’re not in a competition how to say it right.
How—the British say it differently. I talked to the Irish people they can’t pronounce the “H”! - “I’m hungry,” [All laugh] “Onestly” Well it makes it correct because they’re English, right? Well, I just had to put that in.

**LR:** Absolutely.

**LK:** [overlapping] Talk about diversity, you know?

**LR:** Yes!

**CW:** Mm-hmm.

**[0:39:40]**

**LK:** So going back to my neighborhood, she actually, when I told her, “Yeah, the medium of instruction in the Philippines is English.” So she said “Ah, that’s so good to know” Ah, she has five children. And so—then one day she brought me a stack of legal papers, and she said, “I just want you to know about this”. And I looked at it. It was a restricted deed, in their neighborhood. There’s a restricted clause that’s only for white people to be in that neighborhood.

**LR:** Wow.

**LK:** And we’re non-white. Now, I didn’t know how to take that. I actually have that paper saved. And it’s called a Calder Terrace (?) subdivision. It’s supposed to be—it’s—the—the house is set back way—and it’s like one of those plantation area house.

**LR:** And what year is this. Sorry.

**LK:** This was in 1980.

**LR:** Okay.

**LM:** Mm-hmm.

**LK:** In Beaumont. And I said, [softly] “Okay.” So, she said, “No. I just wanted you to know that you’re the first non-white in our neighborhood, and I’m glad you’re here.” Should I question her sincerity or should I wonder why she gave it to me? You know, what’s the purpose of knowing that? But then again, that’s knowledge. So I thank her for that, and I just didn’t address that. And we became friends. She still talks to me and she—we—we exchange books. Isn’t that interesting?

**CW:** Yeah.

**LR:** Times have changed. [laughs]
LK: Yeah, but you know, to question her intention was not an important factor because, if I would have confronted her, it would have just created a tension and through the years I think I’ve just proven her that no matter what I am—if I’m Hispanic, Asian, Black or whatever—it doesn’t matter, it’s the being that is important. And if we continue to do that by behaving, to a higher level I think we will accomplish that. So—so I thought I need to throw that in. That was...

LR: Absolutely. Thank you for that. Do you mind telling us about, um, your first job in Houston?

LK: Yeah, yeah, very humbling. I, you know, graduated top of the class in a 5-year very strict program. I passed the board exam [snaps] just like that. My TOEFL—we were required to take TOEFL, which is—well, uh, English as a second language—um, my scores were close to perfect. I’m not bragging, I’m just saying, you know, how humbling my first job was. There was a rule in United States at that time in 1977 that unless you pass the board in the United States, you can’t work as an RN. You can work as a graduate nurse, which is under the supervision of an RN. And…so, it was a blow, you know, because I passed the board flying colors in—in the Philippines. But they didn’t want to recognize it here. The director of nursing at that time was Ms. Berkey. She married and she became Ms. Graves. I’m amazed I’m remembering these names! [LR and CW laugh] But there are times when I can’t remember them! You inspire me, both of you. [LR and CW laugh] So, um, she called me to the office, said, “Look. Clearly, I saw all your scores and—and let me just advise you this.” She said, “Work—don’t work as a GN; don’t work as a nurse aid because all you do is emptying bed pans and changing bed sheets.” I said…. “Work as a ward clerk.” And I think I wrote it there. “Work as a ward clerk.” And she said, “The reason being you’re new in this country, there are a lot of terminology, a lot of, uh, diagnostics tests, lot of things. You’re right there at the desk, you learn all this”. And so I said, “Okay.” I saw—I followed her advice I was very—I was very, uh…. I came to the United States thinking all Americans are good-looking. [CW laughs] All I know is from the movies you know I never met—an—a real. Sorry, but this is real, you know?

LR: No, absolutely!

LK: We all see the James Bond movie, the—the Charles Heston movie. We—we go to the movies twice a week. My mom would take us, the whole row, the ten children. [LR laughs] Uh, we go twice a week. We—Monday—we—school day, we go to watch Chinese shows, and then weekend we go to English shows, or…. We don’t even go watch Filipino shows, just English or Chinese. I just think about that. Never thought about it.

[0:44:30]

And, so I came to United States thinking everybody was—it was…my impression that all Americans are so smart. They are good looking. They’re gorgeous. They’re so bright so smart. Uh, when I was working, I saw [indistinguishable] like it was just, [whispers] “Oh my God!” I said. “Did I just see her do that?” You know, I was talking to myself [CW laughs] because you know like patients and the—the call system, you know, you have to answer the call button during those time. Patient will need something and then the nurse will come. I said um, “Room so-and-so Mrs. [indistinguishable] needed help.” She said, “Uh, it can wait.” And she just sit there.
[sighs] It bothered me ‘cause, you know, I’m a nurse. I can do that. But I’m not allowed to. So I just said, “This is frustrating.” So...after about... That’s very humbling, yeah, you sit there, you know you can do better than these people around you. And I follow the rules. So the rule was you don’t speak your native language...in the work environment. So I’m out, uh, in the ward, there are a lot of Filipino nurses, right? Well I don’t look Filipino according to them. Do I look Filipino to you? I’m more Chinese than—

**LR:** I would say you look more Chinese than Filipino.

**LK:** So, I never spoke to them in Filipino. I always spoke in English. Then one day in the break room there were some Filipinos. There were no American, no Caucasian, no—none other, you know, just Filipino in the break room. So [laughing] they were talking in Filipino, and I said something in Filipino and they just said “[gasp] You speak Filipino?! Are you Filipino?!” I said, “Yes, I am.” “Well how come you never talk to us in Filipino?” I said, “But that’s the rule. And it's also very rude to speak Filipino in front of other people who don’t understand the language.” “Huh? You heard everything that we said about you out there?” I said, “Yes.” [LR laughs] I said, “Yeah. Nothing bad except y'all think I’m stupid and dumb to work so hard,” You know, you said, [whispers] “Look at her. She’s working so hard. You know, just [indistinguishable] pay her enough. She’s working overtime and not charging overtime.” I said, “I don’t mind those.” I said, “That’s okay. I’ll take it. She said, “[groans]” And they were very clearly upset with themselves. Then I said, “That tells you that don’t assume things.”

So that’s—and then after about a month, my director called me. She said, “Lourdes?” I said, “Yes?” “Do you know how to type?” I said, “Yes?” Although [whispering] I didn’t go to typing school. I know how to type with looking at the—the letters on the typewriter, but I do it pretty fast. I typed your—you know, my thesis paper and everything. And she said, “Can you come? I lost my secretary. Come work in my office. Be my secretary. And this will expose you to other department.” [laughs] That’s always how she gets me. I said, “Okay, no problem! And she said, “I promise you”—‘Cause I was writing the board in July. This was like May. And she said, uh, “Once you pass your board, you can pick any unit, any shift, anywhere you want to work, you have it. So I work in her office. I reorganize her filing, and I color-coded the—the—uh, the shift work. And she was very pleased. The only thing—I—I learned from her. This is wonderful woman, wonderful lady. I do evaluation of the nurses and the nurses’ aides. She let me do it! She said, “Okay Lourdes. You read the evaluation. If they’re good, if they’re nurses’ aides and work a lot (?), they make only so much. Give them the full 10 percent. Let them—we get 10 percent raise. Give them the full 10 percent.” And I said, “Even if they’re so-so?” He said, “Yeah. They don’t make enough. So give them the full 10 percent. For the nurses, they make enough money. Give them maybe 8 percent, 7 percent.” For me, she was taking care of the people who really need the help. And—and I respected her for—that was how my mother was. So then after I passed my board, then I picked the work of the, uh, cardiovascular, and I worked among...my head nurse was Filipina and she knows I’m—I’m pretty stubborn. So um I followed a rule....

I have a doctor, uh—there are certain doctors with reputations. I was in the—the area where Dr. DeBakey is. So, um, there is a protocol at that time that when you put a three-way Foley catheter—I’m talking about technical stuff in nursing—you’re supposed to put an irrigation bag to irrigate, otherwise you just put the two-way. Well, this doctor put the three-way and in the protocol you have to hang an irrigation bag, and I did. [Whispers] This doctor came out of the room yelling, “Who put the irrigation? The—” He used the D-word “Irrigation bag up
there? I didn’t order it!” And I said, “I did.” [even softer] “Who the hell are you to put this there? You’re not allowed to put this! I didn’t order it!” I said, “Well, it’s protocol.” “I don’t care about protocol!” I said, “Well, I’m sorry, sir, but we are mandated to follow protocol.” And then he said, “What is your name?!” So I said, “Here. You want my name tag? You can have it.” [All laugh] And then—but—but my head nurse is known—is—she’s been in that institution for a long time. She just looked—like looked oth—looked the other way. And then the doctor came to her, “Who is this nurse that you have on your staff?” “Well, you’re dealing with her. Deal with it.” [LR and CW laugh] He said, “I’m gonna report you.” I said, “Be my guest.” I said, “You’re just barking the wrong tree.” And he said—he was so furious he left.

[0:50:41]

Uh, but I—I stood my—my ground, and there are some—unfortunately, I do say this—there are some physicians, residents or, you know, they take advantage of Asian or non—you know—Caucasian nurses. [rustling sounds] And—and—and to their defense, some of them—some of these people also allow it to happen. It’s just I won’t allow it to happen. So one of these Australian residents came around and put his arms around my waist. I just elbowed him. And he said, “Ooh, good lord! I’m just saying good morning!” And I said, “You can say good morning without touching.” And then, he said, “Touchy, touchy, eh?” “Yes, touchy, touchy, eh. Get off!” And he just walk away. Because I had to—you have to fend yourself.

LR: Right.

LK: Unfortunately, some of those who are insecure feel that they have to just let it be because, you know, they’re just nurses? I won’t allow that. So that’s my experience. I—I was very happy working as a nurse and then they started moving me—they—to—I rotate. Wherever they sent me, I go. I feel like it’s an opportunity to learn new things. I don’t want to confine myself.

Then they said, “Oh, we need somebody in medical surgical. Ah, well in medical surgical, I learn different things. I learned to ask in a very nice way. I am a very good nurse, that I can brag, you know? I am a very poor housekeeper. [CW and LR laugh] But…[LR clears throat] I had saw an order by, uh, this doctor. He said, “No dressing by nurses.” And I took offense to that. I said, “My nurses, they’re really good.” I was the charge nurse. And I said—okay, when the doctor came I said, “I have a question, doctor. Please help me. I am really confused.” I said, “Is there a reason, do you think I need to train my nurses to do dressings better? Because I saw your order, ‘no dressings by nurses.’ Right? Big letters in the front of the chart?” “Oh no my dear! No my dear!” He said, “My residents don’t know how to do dressing! My doctors don’t know how to do sterile dressing! Your nurses are really good, too good that my residents don’t know how to do it. So they just let you all do it. I won’t allow that. They need to know how to do sterile dressing.” I said, “Well, thank you very much.” So then when during the staff meeting I shared it with them. ‘Cause—I—they said, “Wow, we never thought that was the reason. We just thought he didn’t want us to do it.” I said, “Well, it’s always good to ask.” It’s—it’s very complimentary, actually. But it could have easily been misunderstood. Right?

CW: Yeah.

LR: Right.
LK: That’s my experience. And then, well, after that I went to ENT, I went to neuro. They were so short of staff. The neuro ICU is across the hall there, and I’m doing the ENT out here. When they don’t have a charge nurse, they keep the door open so I can go there and help them out. That was how bad it was.

LR: Wow.

LK: And, um...there is this system—and I hate to say this—it may be at all hospitals, but the hospital—I just shall not name the place—they have this Kardex that they used with different patients and different needs. It’s called Kardex. They don’t use that anymore. It’s, um, it’s a—it’s like a—what do you call it? Uh, like an address-o-graph thing that you see each patient has their own needs. So you flip it, and some of them has this card “VIP.” So the hospital has this little notecard that if the patient is a VIP, there is a VIP thing there. [sighs] God forgive me. They can’t fire me now ’cause I don’t work there. [CW and LR laugh]

I was a night nurse, the charge nurse. I worked nights because there was a cost differential. There’s an extra 150 dollar for working night shift. So I work night shift. When I see that, I take them all and I set them aside. [LR laughs] But I am [scratching sound]—I’m a good nurse in the sense that at night I write down all the patients with problem—all the name of the patient—had it on a sheet of paper and their temperature, their problem. When the head nurse come to make rounds, I— I pass it on to her. It makes her life so easy. She just go make... Nurses used to make rounds with doctors. They don’t anymore. They’ll go around all the patients and know their problems. And then, she’d say, “Oh my God! This is a VIP! What happened to the card?” And she ask me. But I say, “I don’t know.” [LR and CW laugh] But why—why is a VIP? All patients are supposed to be our patients here. We should care for them the same way. Doesn’t matter. I mean, if you treat everyone the way you treat your own family, there shouldn’t—we don’t need a card that says VIP.

[0:55:38]

CW: Mm-hmm.

LR: Right.

LK: And I have a story, this black nurses’ aide, she had a beef with me. [CW laugh] I was actually pregnant at that time. This is in the neuro-sensory building. And—

CW: With your second daughter?

LK: Um, was it my second? My second son.

CW: Oh!

LK: Yeah. She is one we call—I call them institutional person. Like they’ve been around the institution for so many years that they rule. She’s a nurse aide—she was a nurse aide, but everybody’s afraid of her ’cause she make such a big stink about everything and she was—and she’s loud. Uh, people avoid her. But when I’m in charge, when we have a difficult patient, very
difficult meaning a comatose patient that has diarrhea, that need to be turned every hour and big big guy. I don’t assign one nurse to that. I assign it to everybody. That every hour they change. That way, it evens out the work. And the nurse aide go help the nurse every time. We only have one nurse aide in the evening. And I know her name. It’s Rafi. I’ll never forget this. And, one day, we were doing our—we had a, um—a charity patient, and it was difficult. One day she sat down, she just wanted to do her vital signs, sit down, do her knitting, and—and then at 4 o’clock another round of vitals, and that’s it. That’s all she wants to do. And nobody dare say anything to her. But I make her get up every time that patient had a diarrhea to wash the patient, put lotion and powder and turn.

So one day, she sat down there at night and was write—charting and she said, “Miss Lee.” I was, um—she calls me Miss Lee. I said, “See?” She told me, “I don’t like you.”

[Whispers] Oh my God, you can hear a pin drop. Everybody was [jaw drops]. And I said, “Oh God,” I say. “Here we go again. Another drama. I hate drama.” So I turned around. I said, “You know what, Rafi? The feeling is mutual.” [All laugh] Sometimes you just have to say it! You know? I said, “The feeling is mutual. And—but it doesn’t have to stay that way,” I—I said. And she said, “But I’m not done talking.” I said, “Okay.” “I think I respect you now, but I don’t like the way you work. You work us very hard.” I said, “But that’s what we’re here for.” She said, “But one thing different about you is the black guy that is 6’4” is—had a stroke so he’s paralyzed—is dead weight. He had diarrhea, and you make us, every one of us, turn him every hour, regardless whether he was a paying patient or not.” I said, “He’s the one that needs the care the most. Right? He has no one.” So she said, “But I still don’t like you making me work very hard.” [LR and CW laugh] But then we got on fine that day—from then on.

See, what it is—it’s a respect for that human being, not for what they have, what they look like, but they’re—if they’re good people, they deserve the respect. My daughter accused me of being racist, my own daughter, [LR laughs] and I’ll tell you why. She is a free spirit. She likes to date all kinds, and it’s okay with me. But I am very discriminate. I don’t care what color you are, what nationality, but you have to be a good person.

[0:59:33]

Well, the—this was—this guy that was not good. I know that. [CW laughs] I had my mother—mother instinct, right? [LR laughs] So you—but she just, being young, she accused me of being racist. And I said—I said—and I quest—the thing is, I questioned myself. Am I really a racist? I am prejudiced. No question about it. I am prejudiced against people who are not nice, who hurt people. I don’t wanna be around them. That’s—I can’t deny that. If anybody hurt my children, or my family or my lover, I’m prejudiced against them. What—doesn’t matter what color I am with their character. So I was questioning myself to be really honest with yourself, you question yourself. Innermost part of yourself. Are you really racist? I said, [whispers] “Oh my God, am I really racist?”

So I was working at M.D. Anderson then, so [laughs] I looked around, you know, at all these black people who were working. I said, “Would I consider him to be my son-in-law?” [CW laughs] You know? I—I asked myself. I have to be honest with myself. This may come across to both of you as being very harsh, but…

**LR:** [overlapping] I think it’s important.
LK: —I question myself, okay? Then I—I said, “No, you know what? If he is gonna be my son-in-law, I’m really okay with that! [LR and CW laugh] He has college degree; he has a good job; he’s very nice.” So I approached him. [All laugh] I said, “Listen, Lucas, okay? Do you have a girlfriend?” [LR laughs] ‘Cause I was gonna introduce him to my daughter! And he looked at me, “Lourdes?! [LR and CW laugh] You’re old enough to be my mother!” I said, “Not for me, ding-dong! For my daughter!” And he just blushed. He was a black guy, you know what I mean. I said, “You are so nice.” I said, “I enjoy working with you. You have good work ethic, and I was thinking about you for my daughter.” He said, “Oh!” And just blushed. He said, “I am—I am—am…” He said, “I am so complimented. I, um—” He just, “I just don’t know what to say! But I’m married, Lourdes.” I said, “Okay. Stay away from my daughter.” [All laugh] But, general, um, you have to question yourself. You’re human. Feelings do come in; people do change. People do change. Um, only if they’re willing to, only if they realize if they’re doing something wrong.

LR: Right.

LK: That make sense? I have to share that.

CW: [overlapping] No, of course! Everything you share is good.

LR: [overlapping] Absolutely! No. We appreciate that. Um, speaking about, um—about race in the workplace, um, what are your thoughts on the model minority stereotype? Um, do you feel that people label you with this stereotype? Is this something that’s come up in the workplace for you? Um…are you familiar with that stereotype?

LK: Uh, tell me. Explain to me what you mean. I kind of sort of, but I wanted to make sure I’m understanding it.

LR: [overlapping] Yeah. Sometimes, um, there’s this discourse, um, about [clicking sound] Asian-Americans as a minority that, um…

CW: All others should model themselves after, right? So like, they achieve the most, they do the best in education. So, you know, there’s a stereotype, “Oh, you’re Asian, which means like you’re smart and you’re doing good and things like that.”

LK: [overlapping] And that you’re good in math.

CW: Yeah. Right.

LR: [overlapping] Right. And sometimes people almost use that against, uh, other racial minorities, saying, you know, “Here are non-white people who are able to achieve the success of the white race. You know, why can’t, you know, Black and Hispanic and Middle Eastern, South Asian, you know…” They almost use that against each other. And—and it almost erases Asian issues, as well, too.
LK: Right. That's really, really sad. And I know it exists. But, I think at one time it meant to set as a model. But it backfired. I think that's what happened. Yes, you're in the workplace. We had those experiences, that, you know, the Filipino nurses are known to be very industrious, and they are. They're actually very well-trained, the Filipino nurses. So the American trained nurses gets to be a little on the defensive side because none of the Filipino nurse—they’re very willing to help. They’re—uh, the nature of the Filipinos are really very kind, very giving, very accommodating. Even if they're really tired, you say, “Oh, are you tired?” “Oh, no, no! I’m not tired! I can still do this!” That's typical of Filipino. Their self-sacrificing nature, their—their willingness to do.

[1:04:37]

The minority with Asian-American…I believe the way it started was because, as first immigrant like my children, we came to a foreign country. [sound of paper shuffling] We had nobody to rely on. We want our children to—to be—to do their best and be better. So we then—we really instigated and promoted education and work hard. [louder paper shuffling] The problem is when they go to school, they’re exposed to all this. And if the family, like the tiger mother, and if family—Asian family insists on raising the child according only to the Asian culture, it is really a very conflicting experience for the children. And I feel for that. That is one reason why I did not insist on talking to them in Chinese and Filipino, only at home. And—and to do justice [indistinguishable] and send them out there into the world, in a very English-speaking world, they should learn English. I think that is our duty to the nation, to teach them to speak English. They are in this country. Then come, I should teach them Chinese and other languages. Which both children didn’t want to continue, which I did expose it to them.

But the minority thing, it becomes…. Th—there’s really two ways to look at it, or several ways. It’s good that the Asian community—Asian-American community—to really strive to do their best. That’s good. The problem in the—the other minority, the M—the—the Hispanics, and the Blacks and the—the Africans, instead of looking at it as a model as to (?) “They can do that? We can do that, too.” They become resentful of their success because the motivating factor is not there, I think. But you will see in the newer generation now—you can see the balancing. I—I see it in the workplace. I see a lot of, um, Hispanic, you know, being promoted to good position. It’s—it takes a long time, you really have to prove them, but that’s the real world. That’s reality. You can’t change a system overnight. This is what I’m saying to a lot of people. It may not be my time to see the change, but when you put the seed in, you need to cultivate, to water it so it will grow up to the point that you want it to be. You can’t expect the change overnight because, it’s not gonna happen and you’re gonna break something if you do that. Am I making sense here?

LR: Absolutely.

LK: So, at workplace I see that. You know, so, “Oh, yeah. She’s Filipino so they—she’ll stay over. Just ask any Filipino nurse. They’ll work over.” It’s just, yeah, assumed that we’re gonna do it. And then they kinda resent. Like when they assign 10 patients to me and the other…and I’ll just take it, and then the others say, “That’s too much. We can’t take that.” But because I’m taking it, they have to take it. So they will start [CW laughs] resenting. But it has nothing—you know, I just wish they’ll open up their minds. Say, “If she can do that, I can do that, too. I can
prove them wrong.” That’s the attitude instead of bashing one another. The problem with the Asian-American community, some of them really go overboard, too. It’s really unfair to the children. When they’re born into the United States, in this country, they have to be allowed to be themselves to a certain degree because you put too much restriction, they’re going to break at some point.

CW: Mm-hmm. So do you identify more with your Filipino, or like Chinese or American identity? And like, what would you say your children identify with?

LK: Oh, yes. My children they say, “I’m American.” I say, “Huh?” [All laugh] No. No offense meant. I said…. They think, actually, the children think of themselves as American. They don’t even think of themselves as Chinese, but if you ask them, “What’s your nationality?” they say Chinese.

CW: Chinese.

LK: Now, do I think myself as Chinese or Filipino? It’s…interesting. When I’m with the Filipinos, I feel I’m Filipino.

CW: Yes!

LK: When I’m with the Chinese, I feel I’m Chinese. Does that make sense?

CW: Yes, it makes perfect sense.

LK: I have no—no di—like do I owe allegiance to China? No, of course not! I don’t like China, in fact, right now, I don’t feel like visiting China, what they’re doing to the world, no! I used to want to visit, but no. Um, the Filipinos have been very gracious, um, to me now that I’m an adult. As a—growing up in—in the Filipino world, in—in the environment, I—I was taunted and teased. But I think I’m over that. I’m an adult now. You know? [paper rustling] I think I understand, you know, those are just ignorant kids who are not taught properly. I hope I answered your question.

[1:09:59]

CW: Yes, you did.

LR: We probably have time for maybe one more question.

CW: Yeah.

LR: Um, let me make sure it’s a good one. [papers rustling]

LK: Would you write your names down? For me?
LR: Sure. Yeah, um, just because we’re focusing our interview on, um—on labor and capital, um, and how that intersects with race, um, have you felt the impact of—of a glass ceiling as an Asian-American and as a female? Do you feel as though, not just in terms of money, but also in opportunity or expectations that you…

CW: [overlapping] In your career path.

LK: In my career path, no. In the medical world, you actually don’t have any glass ceiling. I don’t think so. But in the financial world, and the other business world, yes. The reason I say that is because when I just came, as I said, the director looked at me—she looks at me as a Filipina-Chinese, and she gave me all those positions. When I worked at M.D. Anderson, within three months, I was promoted to be clinical care coordinator, and then I refused to take that. I mean and then they awarded me the quarter employee of the month and they want my picture, I said no. They reported me for refusing to have my pictures up. [CW laughs] Well, why do I have to take my—put my picture up? I don’t want my picture up there. So I—found a frame with a pre-printed Caucasian pretty lady. I said, “Here, put this up.” Make this of me. And they said—they said…. So, no I don’t think so. Not—not in the—so….

In answer to your question, it really depends on what area of—of, um, work environment you are. If you ask me, in the medical—if you look at it closely—look at the medical world, you have all kinds of ethnicity at the top of the rank (?)—at the top of the ladder. If you look at the financial world, it’s a different story. Except for Microsoft lately, they have, uh, this, uh, lady from India, right? But in the past…I think it is changing in the financial world. Especially when they know that everything now is going globally in the business world. It—it is to their advantage to have someone of—of diverse, um, uh, hierarchy up there on the higher rank. But I have never…like my husband, my ex, was, uh—he was made chief resident even if he was not a Caucasian among, you know, the—the rest of the residents staff were all Caucasian. It was only him that was non-white, and yet he was made chief. So in the medical world, I think they are based on their credentials and their performance. Not in the business world, I think they’re—they’re still working on it. That’s just my opinion.

LR: Right, so, um, it’s about time to wrap up, if you have anything else you want to address that you think we haven’t asked about, um, we’d love to give you an opportunity to do that.

LK: Just in terms of ethnicity, if the people are—uh, the world could just set it aside, not even worry about what skin color or your height, your look. Just appreciate the person for what—for their being, for their—their human, for their being or what they’re able to do, what they’re able to perform. It doesn’t matter if you’re…. [whispers] I have a story you’ll love. My—my current husband now, he’s a radiation oncologist. Um…

LR: [overlapping] For how long have you…sorry.

CW: [overlapping] And when did you get…? Yeah.

LK: For 12. I’ve been married for 12 years, uh, with him.

CW: [overlapping] Okay.
LK: And, uh, I was his—I—I—I built the cancer center for him. 2 cancer centers that I ran. And these patients, some of them—because he also practice out of Beaumont-Port Arthur and that’s a really like—

CW: I’m familiar with the area.

LK: Yeah. It’s not a very um, open city like diversity like Houston. Anyway, I would have patients that ask me, “Dr. Kong. That’s Chinese right?” I’d say, “Yeah.” And see, they don’t know that I’m—I’m related to him. I work in the office. I wear my lab coat. They say, “What does he look like?” “Oh my God,” I say. “You wanna—you want to know what Dr. Kong looks like? I’ll tell you what.” “But does he speak English?” I said, “Yeah, he speaks English. But I’ll tell you, he looks—he’s 6 feet tall, blue eyes. You know, Paul Newman? He looks just like Paul Newman.” [CW laughs] My—my husband is 5 feet 7, [LR and CW laugh] very skinny, gray hair, brown eyes. So he walks into the room, these little ladies. “Hi, I’m Dr. Kong.” [gasps] And they looked at me, “You—like you lied to me.” I said “Did I get you all excited?” [All laugh]

[1:15:03]

But still, some of the older generations who have never been exposed to other...you would be surprised. People in the small town area have never gone outside of that small town. So all they saw are the people that looks like them, have similar skin tone, color. No idea. Sometimes they—they will be remiss if they come—don’t come see my husband is one of the best radiation oncologists. You know, he was trained at M.D. Anderson. And he was very kind to the patient. And um, some of them will say, “Oh, so he’s not American? I’m not coming.” I said, “Fine.”

CW: Wow.

LK: I still get that. But in 30-some years, I had 2 calls. One, when I was working for my first husband. He was a physician, too, and when he—she found—he found out that he’s from the Philippines, said, “I’m not gonna let my wife see a dog doctor.” It is really very demeaning. And I said, “You know what, sir? That is too bad and I’m sorry that you feel that way, but you don’t have to come see him. Fine.” The second one was, um, working for my...Dr. Kong. They said, “So he’s Chinese? Does he speak English?” You know? Um, I said, “Well, I don’t think he would have graduated from the medical school here and go to Indiana as an—as a faculty if he doesn’t speak English and wrote many papers.” “Oh, okay. I just have to ask.” In fairness to those who ask, uh, some of the foreign doctors do have very thick accent, and I think they meant to ask, “Will I understand him if he speak English?” Because you do have to realize that sometimes they do have very thick accent and it’s very hard to understand. And when you’re suffering from cancer, it is something that you need to understand. So I’m just trying to be fair that they ask that question. For me, as a non-original English speaking person, it’s easy for me to understand different languages since I’ve been exposed to them.

[1:17:21]

End interview.
Interview questions and preparation:
1. Can you begin by telling us about your childhood?
   a. When were you born?
   b. Where were you born?
2. What was it like growing up where you did?
   a. What was the ethnic, class makeup of the area? Did your family fit into that?
3. What is your family’s migration history to the United States?
   a. What year did they migrate?
   b. Where did they migrate from?
   c. What occupations did the migrants have in their home country and the US?
   d. Why did they move?
   e. Where did they relocate to?
   f. Did they encourage assimilation or did they maintain cultural ties to home area?
4. How did you come to living in Houston?
   a. For how long have you lived here?
   b. What neighborhood did you originally live in?
   c. What factors led to your arrival?
5. What areas and neighborhoods of Houston have you lived in?
   a. Is residential diversity important to you? Would you want to live in a specific ethnic community?
   b. Where do you live now? Are you happy living in this area?
6. How important is it for you to continue the traditions and culture of your home country?
   a. Do you have children?
      i. What language did you speak with them at home?
      ii. Did you raise them with the culture of your home country or America?
7. Can you describe your education?
   a. What degrees or specific trainings do you hold, if any?
   b. What factors caused you to receive that education? Family? Work?
8. What was your first job?
   a. How did you get this work?
   b. Why did you choose to work there?
9. What was your first job in Houston?
   a. How did you get this work?
   b. Why did you choose to work there?
10. What is your most recent employment?
    a. How did you get this work?
    b. Why did you choose to work there?
11. How do job opportunities in your field compare to those available when you first started?
12. What are your thoughts on the “model minority” stereotype? Do you feel that people label you with this stereotype?
13. Have you felt the impact of a “glass ceiling” as an Asian American and as a female? Has the Asian-American community in Houston changed or transformed over the past several decades? How?
14. Do you feel as though you’ve had ample opportunities, or ability to take advantage of education, as a minority?
17. How connected did you feel to the culture of your home country growing up and how connected do you feel to that culture now?