



Project: Documenting COVID-19: Stony Brook University Experiences

Title: Oral History Interview with Marie Turchiano - Transcript

Narrator: Marie Turchiano (MT)

Interviewer: Mona Ramonetti (MR)

Date of Interview: 02/23/21

Location: Zencastr (remote)

Transcriber: Kelly Chan, Mona Ramonetti, Chris Kretz

Interview Length: 00:43:12

Summary: Marie Turchiano is Director of Recreation and Wellness at Stony Brook University. In this interview she discusses the activities of her department during the pandemic, their adaptation of activities to the online environment, and how they worked to engage students. She also relates how COVID affected communications within the office and how it affected her life outside of Stony Brook.

00:00:01

MR: Today is February 23, 2021. This is Mona Ramonetti of Stony Brook University Libraries interviewing Marie Turchiano for the COVID-19: Documenting Stony Brook University Experiences project. Marie, thank you for sharing your experiences with us today and contributing to this project.

00:00:21

MT: Happy to be here.

00:00:22

MR: Oh, very good. So we're going to get started. First question is, what is your position here at the university and how long you've been here?

00:00:32

MT: So I've been here at Stony Brook University for the last twenty-one years and I am currently the Director of Recreation and Wellness.

00:00:41

MR: So twenty-one years you've been part of Rec and Wellness?

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MT: Yes, I have. My whole career here.

00:00:48

MR: That's impressive. Okay. So what groups or areas of campus are you most involved with? Including Rec and Wellness.

00:00:57

MT: So right now I currently oversee our fitness, our intramural areas, sport clubs, the Walter J. Hawrys Campus Recreation Center. I'm involved in a lot of departments within Student Affairs with collaboration, such as the Center for Prevention and Outreach, Student Health, Career Center. So recreation kind of goes outside of just Rec and Wellness. We try to kind of collaborate a lot with the Division of Student Affairs.

00:01:27

MR: Very good

00:01:28

MT: Also outdoor recreation. We do—I do a lot of rentals. Challenge course—we have a low ropes course, so we oversee our challenge course area as well.

00:01:42

MR: Very good. So what were you working on at the start of the spring semester, right before COVID?

00:01:52

MT: So we were, you know, getting ready. That was around March, so it would have been probably January, getting ready for the spring. 2019? Is that correct, the date? Two thousand—

00:02:05

MR: (talking at the same time) Twenty.

00:02:06

MT: Twenty? Twenty. Academic year. So we were getting ready for the spring which would have been our opening week. Right when classes start, we have a big opening week [during] which we do a lot of activities. That's kind of where we were at. And in mid-programming. So our intramural sports season would have been starting and getting underway. Fitness classes would have been getting underway. All our activities and programs were just getting to—started. During that time.

00:02:37

MR: Okay. When do you first remember hearing about the COVID virus, and what were your feelings about it?

00:02:47

MT: So—I mean, I think probably in December I maybe heard some things about it in China and never thought anything of it. Other than, oh, it's a virus, or it's like the flu. And then kind of in January heard it. I know February, heard about it again but never really thought it would come to Long Island. I mean, I remember hearing about it hitting Washington State, and I was actually going on vacation in February. Right during Presidents Week, and someone said, “Oh, are you still traveling?”

And I said, “Why? Why wouldn't I travel?”

And they said about COVID and I was like, “Oh, that's in Washington State. That's never going to come here.”

And again—and I thought it was just a flu that, you know, people would recover from very quickly. And I remember coming home and landing and people were trying to get masks, and talk at the university was like, oh, it's starting to come across the country. I just remember it like a wave coming across. So that's kind of where it was, like, oh—when I—the end of February I was like, this is not a joke anymore.

Not that it was, but it was like, now it's more real to me. And it needed to be taken seriously.

00:03:58

MR: Right. So as the Director of Rec and Wellness were you— I mean, were folks that you're working with, were they of the same mentality, I guess, or perception of what COVID was at that point?

00:04:16

MT: (talking at the same time) Yeah. I mean, I think—I don't think we were kind of really taking it as seriously as it should have been. You know. I know we were talking about it, and then you

would hear about cases and then people dying, and—again, it wasn't overwhelming to where it was when it came to Long Island. And then it really affected us when we had to shut down the building and shut down the department and shut down campus at that point. And then it was like, oh, now it's getting—now we're, now it's getting a little scary.

00:04:46

MR: Right. You know, I actually—I'm just remembering the last meeting we had at Rec and Wellness, and I think we were in a different conference room. And the atmosphere—you weren't present. Tom [St. John] was leading the meeting, and I think that's when it became very sobering. I think it might have been the February [meeting], it might have been the—

00:05:07

MT: Yeah, it probably was the break that I was away that week, and he took over the meeting. And I just remember, I think someone—actually, someone gave me masks. They're like, "Oh, take these masks." And I was like—she's like, "When you go on the plane, make sure you wear them."

And I was like, "Really?" And she's like, "Yeah, wear them."

And I was like, "Okay."

So I didn't wear them there, but I did wear them coming home because we were watching the news—we were in another country. And I remember watching the news and was, like, okay, this is—we should probably start protecting ourselves.

00:05:36

MR: Right. So how did you learn about the plans to close the campus?

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MT: It was kind of like, happened all of a sudden. I think there was a lot of talk going on and what will happen and literally it was like a phone call and saying, "Okay, you're closing the Rec Center down now."

And then everything else was kind of a blur. The entire campus stopped, you know, and it was just little steps leading towards that, like, what would you do if you had to work from home? What's your plan, if we had to have you guys work from home?

So we had to kind of produce some work plans. How—what we would do if we were home. So that we would have a good enough workload that we could kind of transfer our offices into our private residences.

00:06:25

MR: Right. Now, you guys were affected, I think, more so than the others because I think they had taken charge of the Rec and Wellness building, no?

00:06:34

MT: No. So what happened—they did take—so the state took control of our intramural field complex where they built the field hospitals.

00:06:42

MR: Okay

00:06:43

MT: Which are currently still there, the field hospitals. But yeah, they came in. There were quite a few locations that New York State was looking at, and I think the best location was the field location. So that's where they decided, you know, we're going to build the field hospitals.

Right when the curve was at its highest is when that decision was made. And, unfortunately, they never used the field hospitals because by the time they were built, the curve was going down. Which is good.

00:07:13

MR: Right. You know, I'm glad that you state that because I remember hearing stories that the Rec and Wellness actually—the building itself—was set up as a temporary triage spot, and I think that was the understanding a lot of folks had prior to the field hospitals being constructed. But I'm glad you cleared that up. It was just the field hospitals that were constructed?

00:07:38

MT: Yeah, they were—I mean, they were looking at our rec space, the recreation - the Walter J. Hawrys Campus Recreation Center. They were looking at this space as a triage area. But once the state takes it over, they keep it, you know. So the field hospitals, they're not planning—I don't know when they're going to take them down, but that space is now unavailable to students.

And I think the Rec Center—knowing the value of it to students—if we were to take that offline, it would still be offline to this day. So the university was trying to redirect resources, and the location of the field was the best resource. And the athletic complexes, too. Their field complexes had field hospitals as well on their sites.

00:08:20

MR: Okay. So what did you have to do to prepare to leave campus?

00:08:26

MT: Um, well, we had to get—it was kind of interesting. We don't think about laptops or anything. We have everything in Google Docs which is nice. But it was very—we had to kind of run around and get laptops and make sure the laptops were all updated with the latest software. Some of the, you know, our home computers aren't meant to be at work, right? So we don't have a lot of the programs that we have on in front of us. So that was a challenge.

We had some, like, probably three weeks to really prepare ourselves to kind of, this might be the outcome, is that we're going to work from home. So we had to put a list together [of] what the projects were we were going to work on and a lot of it was redirected towards the end of the spring and how we're going to turn our programs, in-person programs, to virtual.

So we did a lot of that the first few—the first month was really trying to engage students because there was no social interaction at that point.

00:09:25

MR: Right. And how effective were you at engaging the students at this point? Or did people not realize the severity of the situation just yet?

00:09:35

MT: No, I think people realized at that point because that was March. I think we got shut down—I'm going to say mid-March? I'm not 100 percent sure when we shut down. But within the week, the staff at Rec and Wellness, I mean, did a great job with going online and doing a hybrid. We did virtual fitness classes and then virtual trivia, so that's kind of what we were able to offer the students within a week of us closing the Rec Center. So we were kind of—we jumped on it. We kind of did a lot of research really quickly about what other schools and recreation departments were doing across the country, and a lot of them went right to virtual fitness classes and then trivia, engaging in online trivia.

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MR: And the students were very responsive to these, this new change in programming?

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MT: Yeah. I mean, we didn't get a huge amount of people, but we did—we reached out. We got people. We offered it—so we're able to offer programming, which is what our goal was. Now, you know, maybe we had five or six people in the fitness class, but that was five or six people that could benefit from it. Our trivias—we'd have about twenty people on our trivia. And at this point, I'm assuming students were going home and they're in their own house and they've got other distractions and they're dealing with COVID on a personal level. So we didn't really have anything really set in stone until this past fall semester is when we had a program ready to go with a hybrid model.

00:11:06

MR: So I'm going to circle back to—you mentioned you had to run around and get laptops. Is it that your department had to purchase them, or how did you get these laptops?

00:11:17

MT: Oh yeah. Well, we purchased—actually, prior to, I mean, once COVID started coming and being talked about more, I had our administrative assistant order laptops. But at that point, it was right before it started getting crazy. They didn't come in in time so we had to use the old laptops that we have hanging around, and they're slow and they're not updated the way they need to be. And again, at that point, we couldn't get them updated. We just had to use what we had.

00:11:45

MR: Right. And getting back—or actually, I'm going to circle back also to, you had mentioned the field hospitals. And we're coming up on the fall, and those, I guess, will still be offline? Is there a contingency plan for Rec and Wellness to deal with those or no?

00:12:08

MT: Well, we've got to wait for the state. I mean, again, they were put there for a reason, to save people's lives. So, you know, at this point they need to stay up as long as they need to stay up and that's the way—that's fine by me. Once they come down, we do have a five-year plan in place. We're trying to save money now to pay for the renovations of the fields once the field hospitals get broken down.

So it's not going to happen in the fall. I mean, from what I heard—I haven't heard anything about the fall 2021 that the hospitals are coming down. So we'll just have to wait and see what—how the university handles it with the state. I guess it's a state decision when they come down.

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MR: Right. Okay. How did you feel about leaving campus?

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MT: I mean, at first it was fine. It wasn't like—I didn't think I'd be gone for so long. So I think it was just like, all right, we'll see you guys in a week, and that would have been it.

But then a week turned into a month, and a month turned into many months. And it was just kind of like, you came back, when we came back in July, I think, was the first time we're allowed to come back, you're just—you left your desk like in a riot because you had to leave. So it was kind of like it's—everything stopped in time for a year. Six months.

So it was, you know, the longer it took, the more we didn't have that much social interaction. And you're kind of missing other people besides your family because all you are is staying at home because I literally didn't leave my house. I literally stayed home. Didn't visit people for the first—especially when it got bad on Long Island or specifically in Suffolk, I heeded the warning of staying home.

And it was, for three or four months, there was really no social interaction except with your family members. And then FaceTime. And then when you got to FaceTime someone you're like, oh, this is nice. Like you kind of miss it. You miss the interaction with people.

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MR: Yes. Yes.

00:14:10

MT: I remember dropping off food for my parents, who are elderly, and just being—seeing them at the door. And didn't, you know—I didn't go near them. I just left it at their door. And I saw them come out, pick it up, and then go back in. And that's tough, you know.

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MR: Has that changed much or—

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MT: Yeah, I mean, they got their shots which is great, so. They got their second shots and now they're— and my father's ninety-three. Again, if someone in his population would get it, what are the chances of surviving? So I just, you know, they were—calling them every day, like, don't go anywhere, stay home. Whatever you need, we'll go out and get it for you.

And just trying to protect them over me. If I got it, hopefully I would survive it. But you hear so many stories of people that are healthy and not surviving it.

00:15:05

MR: Right. So what was your routine, if you did have one, during quarantine?

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MT: So basically it was just kind of like, I tried to make it as a work day. We had, my son and my partner all had—you know, my son's going to school, so he has to start school at a certain time. So he'd get up, start school. I would start as soon as he started school. I'd go on to my laptop and start working.

And every day with my staff, with the Rec and Wellness staff, we set up meetings at 10 o'clock every day, so every day at 10 o'clock we always checked in with each other. We had a half hour of interaction, an hour—we would just talk about work and then personal stuff and then talking about COVID and how everyone is feeling and how they're getting through it. Even, oftentimes, we'd be on a Zoom call listening to Cuomo's daily press conference, too.

So we stayed connected at—our work family, we stayed connected every day. Just because I felt it important that we stay—just try to treat it as a normal, as normal as it could be, work day.

00:16:19

MR: Yeah. I'm gonna hop on the term you just used there, “work family.” I think, more often than not, we tend to take our interactions at work for granted. And I don't know if you folks experienced it, but I think a number of us here did as well, where we—that void was clear and present for a long time in terms of that second family, second entity, in your life.

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MT: Yeah. I mean, we missed each other. I remember the first time just being in the same office with each other, we were like, Oh my God. Hi, how are you? I get to see you. I can't touch you, I gotta stay six feet, I gotta wear a mask, but it's good to be back.

It's good to have some kind of normalcy back in our life.

And work was normal. Work is a routine for us. Every day. And you missed that, you missed—that whole routine stopped. It literally stopped in its tracks, and now you're working and trying to keep yourself safe, your family safe. And sacrificing your social life and what you do just to keep you—to stay away from this horrible virus.

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MR: How did you—do you think you found some success balancing the private and work life? And if you did, when did it actually kick in for you?

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MT: So I think when—in March, probably in kind of May—when the weather started to change and it was nice—and June. I just remember going to a meeting—at home—and then bringing my computer outside and sitting outside with the sun. And it was nice and warm. It was just nice to get the sun out, and it was nice to be outside in clean air, in fresh air. At that point, towards the summer, it was kind of like, all right, I can step away from my computer for thirty minutes and go outside and relax. You know, and enjoy the sunshine, enjoy being outside. But still, I really didn't, honestly, do anything until—I think the first time out was going back to work, honestly.

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MR: So you felt beholden to your computer, like most of us did?

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MT: Yeah, yeah. I mean, I think it was just—I think it was more work, you know. I think we worked more during COVID and at home than we did at work because always at work I can step out of my office and talk to Tom or talk to Marlene [Kasman]. It didn't have to be anything about work. It could just be anything. But here [at home] we were kind of focused on goals that we had to accomplish. So we really didn't have any—too much interaction with other people other than our families, who were already busy doing their own stuff. So it was just me and my computer and that was it. So you're—

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MR: Yeah. It can have a sort of an isolating feeling after a while.

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MT: And you know, I felt responsible. I'm here. I'm getting paid. I was fortunate. I mean, so fortunate that we were able to keep—continue our jobs and continue to work, that I felt it a responsibility to make sure that I'm getting my work done and not slacking off and not doing anything. I felt very focused on, you know what? I'm fortunate. I see on the news people are losing their jobs. They have no money. They can't pay their rent, and I'm here working. And I'm fortunate about that. There was nothing I wanted to do to ruin that. So you know what? When someone called me, I was there. I answered my phone immediately. Answered emails immediately.

00:19:56

MR: Right, right, great. So what do you think gave you the most comfort during this time period? I mean, we're still in it but not as entrenched, I guess.

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MT: I just think—just knowing my family was safe, just being safe and knowing that people were okay. Knock on wood, no one in my immediate family has gotten COVID. So it just, you know, we didn't have those pressures around us. I didn't have to send someone to the hospital and leave them there. And that was one of my biggest fears. If my parents ever got sick, we'd have to leave them at a hospital and walk away. I mean, to this day you still have to, which is—to me—is scary.

And even in Italy when they were turning—the elderly people, that were old, they weren't even saving their lives. They had to—they had overflow with COVID patients. So they were prioritizing who to save, and I was like, that's scary.

00:20:58

MR: Very scary

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MT: And that was happening here at some point, too. And I was like, I can't—I mean, at some point it's got to get better.

So that just kind of was like, okay—a wake up call. Just stay home. Don't do anything. And I love being at my house, you know. I have a nice outdoor patio, and it was just like an oasis to get away. It's set up with an outdoor TV so we could just hang out outside and relax. Had a fire pit. So those were things that we could enjoy and not stay in the house all the time.

00:21:34

MR: Right, absolutely. So we all make the assumption that we kept in touch with each other via Zoom, but is there any other way you kept in touch with people during isolation?

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MT: Honestly, it was through Zoom. Or if it was a neighbor, some elderly neighbors that we checked in on, but it would be across the fence. Telephone. Just a couple of times—like, in the street—that [I] would go to my parents' house because they don't know how to use zoom or anything. But basically that was literally it. I mean, there was no other way.

We would just do—during the holiday, I remember Thanksgiving and Easter. We kind of did a big family Zoom because, again, we didn't celebrate any of those holidays together which we normally do. Even Christmas we didn't spend together.

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MR: Strange, right?

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MT: Very strange. But again, the purpose—it was done for a reason. We chose to make that decision because I know people that have gotten together for Thanksgiving and they all—fifteen or twenty of them got COVID. Even when they asked you not to get together for Thanksgiving and I said, “Well, there you go. That's the reason why.”

00:22:52

MR: Yeah. It's so far reaching.

00:22:57

MT: And again, it's one Christmas. It's one Thanksgiving. It's one Easter, hopefully. Hopefully by then, the next time it comes around, it's—we'll all be together.

00:23:04

MR: Right. So was there something that you thought would be a concern that wound up not being so?

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MT: Um. No, not that I can think off of the top of my head. I mean, work-wise, I think we had a pretty good, solid plan. You know, the concern with the Department of Health and getting the Recreation Center inspected, but it ended up not being an issue. It ended up going great. So that was kind of a stressful period when we had to re-configure what the Rec Center is about because gyms couldn't open at one point. So the Recreation Center is considered a gymnasium so we re-thought about what the Rec Center is and made it into more of a community center. So if you take out the free weights, take out the track, take out the cardio—we kind of turned the gym into an arcade and backyard games that you wouldn't find in a gym.

So that's how we were able to open the Rec Center prior to opening quote, unquote, the gym. From, I guess September I think we opened—Labor day weekend—up until October, mid-October, it was kind of a community center. And then once the Department of Health came in,

gave our inspection, and cleared us, then we were able to open the Rec Center. I think October—towards the end of October, early November. As a gym.

(Talking at the same time.) I'm sorry. So that was the only concern, really, was the Department of Health inspection because the university was very—I wouldn't say worried, but they were making sure that we had our i's dotted and t's crossed, you know. Just because they wanted to make sure that we were set up the right way because it was important for the students to be able to go somewhere. Because the students were just as isolated as everyone.

00:25:07

MR: Right. Did you find that the students wanted to communicate with you more than usual or less or it was just—they just went in there focused?

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MT: I think they were—you know, obviously, now the students are just coming in, working out, and leaving, right? So there's no more social interactions because we aren't able to do that. The students that work with us, yes, they're social. They come in, they stop at the door—because we have some rules, like no one goes in anyone else's office. You stay at the door. And they'll sit, stand at the door, and talk which is great. Again, people—we miss all this.

The good thing—I said that there's some good things that came out of—again, COVID, I'm not saying it's great. But there's some things that came out that were—for me, personally—were good. We have a smaller staff so we got—I got to know the student staff a lot better because we don't have as many. We went from two hundred staff members to maybe fifty. So our pro staff is now able to really engage and socialize on a professional level with our student staff which makes the operation of the Rec Center run very smoothly.

In the Zoom meetings—we can have a Zoom meeting with the sport clubs at nine o'clock at night. I don't have to stay on campus until nine and then have everyone meet—come to the Rec Center to meet. Now, we can do everything at home which is, to me, a benefit.

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MR: Is that something you have to do? Have nine o'clock meetings?

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MT: Sometimes, yeah. Well, the sport clubs because they're students. They have classes. So when we have our meetings, we have our meetings later, at night, in person. So now, again, I—this is something that I would continue to do, is to do Zoom at night. Because we had 125 students show up at the meeting virtually. When, if we had it in person, we probably would have gotten twenty. And it's convenient for everyone. They can be home, they can be at lunch, at

work, and have a break and then kind of jump in on the meeting. So it makes it a little bit more easier to attain attendance at these meetings when they're virtual.

00:27:11

MR: Are there any—I mean, you pointed out some of the positives. Are there any additional positives you'd like to share with us?

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MT: I think people—I mean, personally, for me, it's just like you realize what's important in life. It really re-evaluates what you—what life is, and how lucky people, you know—I'm fortunate, very fortunate. That we are able to continue to work here at Stony Brook and to continue making our salary. What happens next month, or whatever, but we got through the bad parts of it. You kind of have to make the best of what the world gives you. So being isolated for so long, you just make good with what you have and appreciate it.

00:28:00

MR: Absolutely, absolutely. So you'd mentioned that you had to scale back both your staff and your student staff. If all goes well and we're fully back, we're fully functional, in the fall, is this something—in the practices that you've sort of incorporated right now—is it, do you think you'll be able to scale that up now, with a larger staff and—

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MT: Oh yeah, we would have to. Because we'd increase the building hours, we would increase the staffing. That all would have to—intramurals would be at full full capacity. Fitness classes—I mean, we went from, I don't know, forty-five fitness classes a week to maybe now ten or eleven. So it's a big change. But again, we're doing a virtual and hybrid. We can only have so many people in a room. Intramurals, a lot of the sports we do are high risk so we're not really even getting involved in the high-risk sports at this point. We just kind of have a skeleton schedule. The Rec Center is open more hours now than it has been. We're open six to ten which, in the past, it was nine to five so we're increasing hours slowly.

And no cases have ever been traced back to the Recreation Center. As far as I know, and my knowledge, we've never been—nothing has been traced back to anyone getting or catching COVID from here.

00:29:33

MR: Okay. Um. So do you think you will continue having sort of a hybrid menu of programming, or is it when you're back in person again, it's fully in person again?

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MT: I think we'll—I think intramurals will go in person full time. Fitness, we might do some virtual classes. Again, they were never really that popular. We would have thirty-five to forty at our fitness classes in perso, so we would kind of start—the majority of them would be in person.

The only thing that we're thinking about is staff. When we train our staff, we have a month—not a month, a week—of staff training. And a lot of that stuff that we can do virtually we probably will do now and not have to bring students in so early. So I think that's where we benefit—that we can do a lot of the stuff virtually and then bring them in, on campus, for specific trainings and not waste our time. You know, with these little—FERPA [Family Educational Rights and Privacy Act] and these small little trainings that we have to do with our staff.

00:30:43

MR: Right. Right. We keep—I know the Rec and Wellness Center is geared towards students, but did you take note of any faculty or staff members who were present during this time period and did use the facility as well as the students?

00:31:02

MT: I don't know exactly what that ratio was, but when COVID happened we stopped all faculty/staff memberships. We paused everyone—and graduate students as well. Then when we reopened, if people didn't want to come back we'd still pause their memberships for them. So we weren't going to start them if they weren't comfortable coming back to the Rec Center. And then anyone that we didn't have to refund—so if they said, Oh, keep our membership, I'm going to start back up in December—we would add another month to their membership.

So we tried to keep anyone who had a membership with us, to kind of pause it. And when they're comfortable enough to come in, that we would start it for them. And then give everyone a free month just to kind of—you know, obviously, it was a really abrupt stop when we had to close down the center. But I don't know exactly—I mean, I see a couple people here and there, faculty/staff, but to identify who is faculty/staff is kind of a little bit difficult.

00:32:06

MR: I see. How did you keep up with the news about Stony Brook?

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MT: Well, we were constantly getting emails, but my supervisor would constantly check in and send us emails or have meetings and say “Okay, this is what's going on.” I always had—to reach out to my supervisor if I had any questions, I was able to reach out. Our Vice President

was very communicative, communicated very well about what was going on and what the steps were.

We'd get our email once a day, once every three days, about updates of what's going on on campus. Very supportive of the work-from-home model, like 100 percent. Which was nice to hear, that they were supporting the work from home. And when they put it into full gear 100 percent, that it was nice to have something to fall back on.

00:33:00

MR: So when and if we go back full time again, are you entertaining the idea of hybrid work from home, work from work?

00:33:14

MT: Well, the funny thing—you know, we have the option, I guess, one day of working from home. The Rec and Wellness staff. But we don't. I mean, from day one, when they told us we could come back, we all came back. And we never really worked from home. We enjoy being in the office so we have never really used it. Someone has a doctor's appointment, they'll say, I'm going to go work from home and the last—you know, in the afternoon—that's fine. But 95 percent of the time we're in the office, and we don't want to work from home anymore. We're done.

00:33:48

MR: (laughs) So all of you—it's five, four or five staff members now?

00:33:52

MT: Four of us. It's me, Tom—yeah, four of us.

00:33:57

MR: And you're all back full time?

00:33:59

MT: Yep. Yep. Day one—July fifteenth, whatever it was—we all came back. I said, "You guys, you don't have to come back. You can—we can stagger who wants to work."

And they're like, No, we all want to come back. I said, "Okay."

It's just nice to be around people, you know. It's nice to be around people. It's nice to leave the house. It's like you were locked in your house the whole time and now you're able to go out freely. So it's nice to get out.

00:34:28

MR: Yes, and I like what you said. You had the opportunity to further engage with your students, your student staff, more so than you had in the twenty years that you've been here. Twenty plus years that you've been here, no?

00:34:44

MT: Yeah. And you know, I'm like, you guys are—I'm not comparing them to nurses or doctors in any way, but they're essential workers. They're face to face with people coming in. And I'm like, I appreciate you doing this. I appreciate you working and risking getting COVID for us. To me it's something that I applaud them for not—worrying about recreation and making sure that the building is open and working.

00:35:23

MR: So this is the final question on the list. I did ask you a few questions off the list, but this is the last one. What would you like people to know about this time in your life and what you experienced?

00:35:37

MT: Again, I hope I never have to experience anything of this. I guess it's a once-in-a-lifetime thing that happened to all of us. And again, we were able to—you weren't alone because everyone was going through the exact same thing you're going through. So it was nice to have other people to talk to and to tell you, This is how I'm feeling. This is what I'm afraid of. And people kind of acknowledged it because they were exactly feeling the same way as you. And you look back in twenty years and—I told my son who's fifteen, I said, "Michael, this is—you're going to look back at this time and it's going to be in the history books and you're going to be—your kids are going to learn about it and you've experienced it firsthand, what it means to be in a pandemic."

And the amount of people's lives that were lost and what we did. He'd stay home; he couldn't socialize with anyone. It's like Fort Knox.

And I said, "Remember it."

You know, you talk to your parents about—they were in the Spanish flu, whatever they experienced—the wars or what have you. And they were like, Oh, this is what I—the Depression. And they tell you all these stories and I'm like, Well, that's what we're going to be

telling people in thirty, forty years from now. About our experiences with this pandemic and you know someone who's died—whether it's a family member or friend of a friend. Everyone knows someone. It's like, Where were you at 9/11? Where were you during the COVID? It's just two life-changing events that have happened. In my lifetime, anyway.

00:37:12

MR: Yes, yes. I agree. Oh, here's a question, actually. I'll start—your meetings now with the four of you— are they in person, or do you do a virtual in the office?

00:37:28

MT: We actually don't meet now, anymore, because we're always talking to each other anyway. So we don't really meet. Actually, we have not set up a Zoom as a team meeting since we came back into the office, to be honest with you. That's funny. We just met when we were in Zoom, and then when we got back it was just like, Okay.

And we have a very—everyone has a very good relationship so it's constantly checking in with everyone. So it's—we all know what everyone else is doing which is really nice.

00:38:00

MR: Yeah. When we returned, we returned partially, and I remember walking down the hallway in the library. And I saw two of my colleagues, and they were in zoom meetings. And I had to walk into one of their offices. Turns out they were having a Zoom meeting with each other, and they're right across the hall from [each other]—I mean, I laughed.

00:38:22

MT: But it's kind of weird. Yeah.

00:38:23

MR: Yes, yes. It was a little strange—surreal at the same time.

00:38:29

MT: We had a lunch in our conference room, but we stopped that pretty quickly. It was one time and then there was—someone was exposed to someone who had COVID and I was like, Well, that's the end of that. Not that we let our guard down, but we were just getting too comfortable. We were six feet apart. We had our masks except for eating and then like two days later they were like, Oh, my friend has COVID. And I was like, Oh, great. We were all in the same room. And then you think about it and you're like, How stupid am I? Why am I doing this? I wouldn't have done it and blah blah blah, and then you're kind of like stressed about it for the next three

days to see if you get anything. Or you got to get your test and, you know, any kind of exposure that you might have had indirectly now is on your mind. Because you're like, Oh, did I get it?

00:39:22

MR: And you know the behavior is still not second nature to us so we still have to think about putting that mask on and—

00:39:30

MT: Oh, yeah. I just literally ran out of my office to get my laptop. It was charging. It was two feet away, but I didn't have my mask on. And then I saw people and I'm like, "Oh my God. I'm sorry, I don't have my mask." I put my hands over my mouth. And it was like, What am I thinking?

00:39:47

MR: (laughing) Yeah, yeah. It's been, what, almost a year now, and I think there are times when I go somewhere, and I have to think, Oh, that's right. Was it last week, I think? I was walking down the hall, and everybody walking towards me had a mask. And I had to—I didn't think about it. Turns out I didn't have my mask on. It was in my hand, but again, it wasn't second nature still. It's been a year, almost a year, and it's still not—

00:40:18

MT: Well, it's funny because we bought lanyards so we have our masks around our neck at all times. I have it around my neck at all times because I would never remember it. So when I need it, I just pick it up because it's on a lanyard now. And that's kind of the giveaway, a lanyard, to keep your mask intact and around your neck.

00:40:43

MR: Well, is there anything else you'd like to share with us?

00:40:49

MT: No. I mean, thank you for the opportunity. I think it's—the perspective that you get from something, being involved, being in this, changes your perspective on life. Especially when Suffolk County was the highest COVID rate at one point, and you're watching the news and you're like, That's where I live.

This is the worst it's—in every town and small town in the country, Suffolk County is number one. That's crazy to me. And then you're like, Are they reporting this across—in the news in California, in Montana, that Suffolk County, this little place in Long Island, is the highest rate? So you get put on the map for something that's horrible.

00:41:38

MR: And you folks are coming back to work in July and seeing the—I remember just taking a walk, at lunchtime I take a walk, and there's something still very jarring seeing those hospitals.

00:41:51

MT: Oh yeah. I mean, they were there to keep people from dying. The intention was—I think they had, I'm going to say three or four hundred people in each hospital. That's what the numbers were. Like ridiculous amount of numbers that they were going to be able to fill those hospitals with. And you're just like, that's crazy. And they have five of them set up. It's not just two. There's I think five or six they set up here.

00:42:20

MR: Wow. Well, thankfully, they weren't put to use. To full use, I should say.

00:42:27

MT: Right. And then the thing is, why didn't they put up sooner? And why did they get put up right when it got really bad? But, you know, who knows? You can't think about that hindsight.

00:42:39

MR: Yeah. Who's going to be able to predict this? I don't know.

00:42:43

MT: I don't think anyone did. Like I said, when it was in Washington State I was like, Oh, it's not coming here. It's a flu already—I've had the flu before. It's not a big deal.

00:42:55

MR: (laughing) Yeah.

00:42:56

MT: That's my thinking in the beginning, and then I'm like, People are dying that are healthy.

00:43:01

MR: Yes, yes. It's very, very scary. Well, thank you. Anything else? You're cool?

00:43:08

MT: Yes.Yeah, I'm good.

[end of interview]