Kara Vuic: This is May 29th, 2004, in San Antonio, Texas, at the Army Nurse Corps Association Convention. I’m Kara Vuic. I’m interviewing Marion Kennedy. You were with the recruiting command during the Vietnam War, right?

Marion Kennedy: No, I was with—the—that was Doris Cobb. I was with Department of the Army in the offices of the deputy chief of staff for personnel. I was in the manpower division of that and as such, our office had responsibility for recruiting for the entire Army. We were the office that dealt with the recruiting agency that the Army had a contract with. I’m sorry, not the recruiting agency, the—I can’t always recall the exact words.

KV: The publicity?

MK: It was an advertising agency who developed some of the brochures and films and whatnot that we used in recruiting. Our office submitted ideas to them and looked over their material to make sure that it was accurate and whether or not we thought it was interesting and would appeal to the public.

KV: So part of what they developed were the brochures and the ads for the Army Nurse Corps?

MK: Yes.

KV: So how did you come up with suggestions to give them?

MK: Well, when the chief of the Army Nurse Corps felt there were certain things that should be emphasized in the recruiting literature, she would tell us and then we would pass it on to the advertising agency. After you’ve looked at a few—we used to
call them throw-aways—but where it’s just a piece of paper that’s kind of folded in half
that people will pick up when they see it in a pile in the post office or an office or out in
public, you develop a sort of a feeling of what you think would appeal to people and what
you think would be unappealing.

KV: What kinds of things did you think would be appealing to the Army Nurse
Corps?

MK: Things that emphasized the professionalism. Usually we liked to have them
in color. Of course they’re much more expensive when they’re reproduced in a large
quantity in color than what they are in black and white, but let’s face it, we’re a color
conscious generation. So we like to have our things in color and tastefully presented.

KV: So you emphasized the professionalism?

MK: Yes.

KV: What other kinds of things?

MK: The other thing is that nurses are generally very much interested in
humanity or they wouldn’t be nurses. That’s the sort of thing, too, that was depicted in
some of the pictures.

KV: Had you talked to nurses or did you do surveys with nurses to find out what
kinds of things they were interested in or just kind of go with your gut?

MK: Well, I am a nurse. I’m no longer active in the profession, but I think I had
a pretty good gut feeling. In your day to day activities, other people would say to me, “I
think that’s a good idea,” or they’d see something and they’d say to me, “I don’t think
that’s such a good idea.”

KV: Did you have ads from older generations maybe or ads from the fifties that
you kind of made more modern or did you start new?

MK: We did have some but most of the ones—I think the Army as a whole and
the Army Nurse Corps got a little more interested in advertising and publicity shortly
before the Vietnam War began. They really cultivated a much more astute feeling
towards that sort of thing than what they had had before.

KV: So you would go to this advertising agency and give them suggestions about
what to say?
MK: Yes. For example, if we needed a new film about the Army Nurse Corps
which the recruiters would use in their presentations to different groups and often the
advertising agency would recommend, “Well, we can emphasize this in the film and then
we can also have as a follow-up this brochure which will”—so forth. Then also have
advertisements that maybe were taken from one of the scenes in the movie. If it was a
good movie you could get all kinds of supporting data from that.

KV: Do you remember any of the films that were made to recruit for Vietnam?
MK: We did not make any films particularly for Vietnam. We made them for
recruiting of nurses generally.

KV: So it was just for the Army Nurse Corps and not to get you into this war in
particular?
MK: That’s right. As I said, nurses have sort of a professional feeling about
helping people. The young nurses, at the time of Vietnam, had that feeling very deeply.
So it was not difficult to go one step further.

KV: Did you think it was important to show nurses in a white uniform or in
fatigues?
MK: We showed them in every type of uniform they would be wearing. We had
a dress uniform that was Army blue. As part of one of our recruiting campaigns, we got
the chaplaincy to accept the picture for the front of one Sunday bulletin. We showed an
Army nurse in her blue uniform wearing her hat. I think she was holding a hymn book.
That, I thought, was a very striking picture and a very good thing because a lot of
mothers wondered about sending a young daughter off to the Army or off to any of the
military services for that matter.

KV: What do you think they thought about sending their daughters to the
military?
MK: Well, I think some mothers were a little—what should I say—a little
uncertain whether they really wanted their daughters to do this. But if you’re going to be
a nurse and you’re going to pass the state boards and you’re qualified to do certain things,
you want to do them. Even if your mother says, “I wish you wouldn’t,” you do it
anyway. It’s part of the make-up of being a nurse or being a professional nurse. Then we
had several different pictures of Army nurses in what we called hospital duty uniform.
We had some pictures of nurses in fatigues. In Washington, D.C., off the Mall, is a very
good statue of nurses waiting for a chopper to come in and pick up a wounded soldier
that they’re taking care of. I don’t know if you’ve been to—you’ve seen that statue?
KV: Mm-hmm. And they’re all wearing their fatigues.
MK: And they’re all wearing their fatigues. We tried to show them in a uniform
that would be appropriate for what they were doing.
KV: Did you advertise to male nurses?
MK: Oh, yes.
KV: How was that different than advertising to female nurses?
MK: Not that much different except it was a man in a man’s uniform.
KV: Was that something that you really talked about and did you try to get a lot
of male nurses?
MK: Oh, yes. We tried to get as many as we could. Actually, it’s interesting but
there for a while, the retention rate—you know, the initial amount of time that someone
signs up for—or at least it was when I was on active duty—was three years. Then you’d
ask them to sign up for another three years or go Regular Army or extend their period of
commitment. We had a better retention rate among the men than what we did among the
women. The men seemed to be more career minded than what the young ladies were.
They saw it more as a favorable career pattern for them. I can’t recall the exact number,
but anyway, at that time there weren’t as many men in schools of nursing as there are
now. So we had pretty good recruitment from the men.
KV: How did you approach—when the women’s movement started in the late
‘60s and the early ‘70s did that impact how you had to deal with recruitment? What did
you think about that in the offices or talk about?
MK: Well, the late ‘60s and the early ‘70s, I was out of that particular office. I
was back in teaching in administration. So I can’t really—
KV: How long were you in the recruitment division?
MK: Five years.
KV: What were the years? Do you remember the years?
MK: Oh, yes. From ’62 until ’66 I was in Department of the Army. Then after
that, from ’67 to ’68—I’m wrong. I started in ’63 and I was in Department of the Army
from ’63 to ’67. Then the latter half of ’67 and the first half of ’68, I was in Department
of Defense for one year, also recruiting.

KV: How were those two positions different?

MK: When I was in Department of the Army, it was recruiting for Department of
the Army. When you go up to Department of Defense it was recruiting for the Army,
Navy, and Air Force.

KV: For all of them?

MK: Mm-hmm.

KV: Did you have to deal with recruitment of enlisted men?

MK: I did in Department of the Army but not in Department of Defense.

KV: The Department of Defense was just for the Nurse Corps but in all the
branches.

MK: Yes.

KV: Okay. Well, I have some ads that I found in libraries and in the Archives.
Maybe we can look at and you might remember or—let me find one that was from the—
this one was from ’62. “A New Career: U.S. Army Nurse Corps” has got all the women
in their little hats.

MK: My predecessor would have had that one.

KV: Okay. So let’s see. What about, “A Bright Adventure of Army Nursing”??

MK: This one I recall.

KV: Is this woman on the front, is she a model or is she an Army nurse?

MK: Sometimes it was an Army nurse and sometimes it was a model. I rather
think this one was a model. I’m not sure anymore.

KV: But you worked on developing this brochure? Is this one you worked on?

MK: No, this is one that had been worked on I think before I came in.

KV: Let’s see. I think this one is ’69.

MK: Well, then that would have been after me.

KV: Okay.

MK: But there’s just something about her that makes me think that she is a
model.
KV: Okay. We’ve got lots of pictures of nurses. That’s probably the blue
uniform and the dress uniform.
MK: This is our dress uniform. Now this one, just by the way she’s standing and
holding herself, I would say that was a model.
KV: The one on the page across from appearances of the onset at the top. Page
three.
MK: I could be wrong. I shouldn’t be commenting on these. But now, when you
look at this, she looks like a model to me and this one does not.
KV: Just kind of the way they’re posing at the bottom of page three?
MK: There’s just something about them. As I say, I could be wrong. But that’s
after me.
KV: You see few African-Americans in these ads, too. Occasionally you do, but
you see few.
MK: Well, I’ll tell you what, while I was in Department of the Army, there was
someone—a black—and I don’t know what organization was sending him, but our
advertising agency at the time was an advertising agency in New York. Their idea was
that whenever they went out to film anything, they would take it as it was. They would
not stick somebody in there to portray a certain race or anything like that. I told him that.
He was complaining. I said, “Well, I’m sorry,” I said, “but our policy is so-and-so.” I
think that’s one reason—there weren’t that many. I can remember my job after being in
Washington, going back to San Antonio, was director of an educational program. We
had not too many blacks but anyway, I remember we had—it was either four or six from
Tuskegee. They could not pass their state boards and we had to make special
arrangements to have them tutored for a certain number of months and then have them
retake state boards. So there weren’t all that many programs for black nurses that were
good, that they learned enough to pass their state boards. The blacks were still kind of
concentrating on black institutions. Once in a while you would see a black student like
this. Generally speaking, they were astute. They really were. They were not a model put
in there.
KV: So like in this picture on page five, she’s probably a real student in a class
somewhere?
MK: Mm-hmm. I think probably this whole thing was just going into a classroom and taking a picture. Now this is the officer-basing group. Yeah, this is after I left Washington.

KV: We’ve got some pictures of people traveling. This looks like San Antonio, actually, maybe. The Riverwalk, page seven.

MK: Yes. It could very well be.

KV: I’ve seen a lot of pictures of nurses with men, kind of in this romantic picture. Not just hanging out but they’re dancing or they look like they’re better than friends, maybe. Was that something that you had talked about in your recommendations?

MK: No, we just said that of course they join the officer’s club. When we were at school, at my last job, there were a lot more men than there were women so they usually found a date. They were early twenties. You know how that goes.

KV: Then you’ve got some pictures of hospitals.

MK: Yes. We had a field exercise out at Camp Bullis and this looks like a field exercise picture.

KV: On page nine. Then a picture of the world with stations of where you may be sent. I see more traveling pictures all around the world on twelve and thirteen and then specialization. Was that a big thing that you talked about? Did you emphasize that you could specialize?

MK: Yes, we did. We did tell them that in their duty assignments, if they developed a preference for one particular field of nursing, they should go to the chief nurse and ask her if they could get assigned in that. Then when they get a little more experience, we also had some technical programs that we ran. For example, we had a nurse anesthetist program. We had operating rooms, OB-GYN (obstetrics/gynecology), critical care courses, and all kinds of courses for specialties in nursing.

KV: Was this something that you could not do so much in civilian nursing?

MK: You probably would not get your full pay in civilian nursing or you might have to pay for the program. But our programs, they were on active duty and they got full pay and allowances. Also, all of our specialty programs, we developed with the idea that they would be certified by the appropriate certified agency so that it was worthwhile for them to follow it.
KV: So if you went out into civilian nursing, you were still recognized?
MK: Yes.
KV: Okay. Here’s a page on anesthesiology, a page on research.
MK: Oh, yes, here’s the military. Yes.
KV: Then maternal and child psychiatrics. It’s kind of breaking down all the specialties, I guess, and a page for each. Army health, nursing, medical/surgical, post-graduate, a page on the Must Hospital. It was new. Financial assistance, your rank, it’s got all the insignia. Then qualifications and salaries and then personal questions women ask. These things about marriage were kind of changing at that time. You could now be married and be an Army nurse so that was different, I guess.
MK: But this would have been in a brochure with colored pictures and it would have been very attractive.
KV: Kind of glossy pages?
MK: Yes.
KV: Yeah, it looks real nice. Yeah, I don’t have an original. I wish I did. What about “Your Reward is the World?” Do you remember this one?
MK: No.
KV: That’s later, too?
MK: That’s later, too.
KV: This one’s got information about each of the hospitals stateside, so that one’s later.
MK: That picture was in one of these other things.
KV: “What It’s Like to be a U.S. Army Nurse,” ’68.
MK: That’s after I left there in mid-’68.
KV: Was this something you may have worked on developing?
MK: No.
KV: How long did it generally take to get a brochure published?
MK: A lot depended on how fast the advertising agency worked. It might take anywhere from two or three months to six to nine months. It depended on what it was. A full-color brochure like this one that we just looked at, that would take at least six months by the time they wrote the script and the script was corrected. Then they’d take a
selection of pictures to illustrate the script. Then it might take—once you have the
approval to get it printed in quantity, it would take a while.

KV: They wrote the text that’s in the brochures and then you edited it?
MK: They wrote the text. We edited and made sure that it was correct.
KV: I’ve got some brochures that are more for the student nurses, I guess, on
educational benefits. Some that are the smaller ones, the things that you would pick up
that you had mentioned. Not the costly brochures. I think this one is a little bit later,
from ’73.
MK: Yes, that’s the one that—
KV: Here’s one on professionalism, “The World of an Army Nurse.” This one
has all the uniforms that you mentioned. So she’s in her dress blues and then her
uniform.
MK: That’s hospital duty and this is a summer uniform. It was a cord and very
comfortable to wear. It was one of our early uniforms that was wash-and-wear although
you could send them to a laundry and have them starched.
KV: This is in fatigues and then her evening dress. Is this a brochure that you
remember? Do you remember this one at all?
MK: No.
KV: No? I think this one’s even got some male nurses in his white duty uniform
and his ensign dress, the green and the blue. Let’s see. Here’s another, “What Are You
Doing Tomorrow?” brochure. It’s got a nurse.
MK: See, you didn’t know you were going to get someone so old that they pre-
dated the brochures, did you?
KV: No. We’ve got kind of travel and the same thing. Let’s see. “Fun Facts
About the”—facts, not fun facts, but, “Facts About the Army Nurse Corps,” which is
more written than anything else. Here’s an educational opportunities from ’65.
MK: We had a chief of the corps who was very interested in education, offering
education as a means of recruitment. We had three different educational programs at the
time that they could sign up and get some financial assistance. Then in return, they had
to agree to serve a certain amount of time on active duty. One of them was what we
called the Army Student Nurse Program. Then there was one of them that was for—at
that time there were a lot of schools of nursing that were three years in length at a
hospital basically so they could get six months. I’m not too sure anymore, although it
will tell in here. Then there was another portion of that program that dealt with people in
college who were going to a collegiate program of nursing. Their financial assistance
was a little bit more than the other program. Then we also have a program with
assistance having a baccalaureate degree and wanting to get a masters degree.

KV: Going back to school?
MK: Uh-huh.
KV: Is this educational opportunities that you worked on—the girl in the front?
MK: Yes, this is one.
KV: We can open it up this way, actually. We’ve got Plan A and B and tables
that break it down.
MK: That’s right. That’s why you have different—
KV: Not a lot of pictures, more—
MK: More facts.
KV: More nuts and bolts, yes.
MK: Exactly.
KV: Was this girl on the front was a nurse or was she a model?
MK: She was a model.
KV: Did the advertising agency find those people?
MK: Yes. Now she was in color. Most of the brochure, the rest of it, was black
and white, but the cover was in color.
KV: Then we’ve got another, “Facts About the Army,” and the girl is standing
with the flagpole. This was from ’65, too. It’s kind of a smaller version of the other.
There’s a picture on the back of a nurse and a male. I don’t know if he’s a nurse or
another guy.
MK: Yes, because we took our first male nurses into the Corps into 1955. As I
said, they were a little bit easier to recruit and a little bit easier to retain after they
completed their basic commitment.
KV: Did you try to seek out male nurses in student programs? How did you try
to get men?
MK: Well, our recruiters for all three services would go to schools of nursing and just talk to the whole group. If there were men in it, fine, and if there weren’t then we just concentrated on the advantages to women.

KV: There was a series of ads that were run in the *American Journal of Nursing* and then some in *Nursing Outlook*.

MK: Yes, that’s right.

KV: I’ve read some in *Mademoiselle*, I think, and *Vogue*. Were there some in other, more popular magazines as well that you remember?

MK: We had a trial program at one point of being in some of the other magazines and, I’m sorry, I don’t recall what magazines they were.

KV: That was just a trial program?

MK: That was a trial program.

KV: Did it work?

MK: I really don’t recall. Not spectacularly or I think I would recall. But you could see that in the corner of the advertisement would be a coupon you could clip out and send in for more information.

KV: Did somebody keep those cards? Would they be held somewhere in an Archive today?

MK: I have no idea. I’m sorry, I have no idea.

KV: Do any of these ads look familiar? “On and Off Duty, Army Nurses Have a Better Life”?

MK: No, I’m sorry, they don’t. That one doesn’t, no.

KV: Some of these were in color. They show up very well. Here’s one of your coupons. “Wouldn’t you take a minute to learn how you can help?” and then it’s got a coupon. This is not even—this one is a sketch of a wounded soldier. It’s not even a picture like this one is. Did the advertising agency develop these as well?

MK: Yes.

KV: Then they would send them to you and you would approve them?

MK: Yes.

KV: Okay.

MK: And of course, this is a famous one, this picture.
KV: “Nurses Are Urgently Needed.” Was it just circulated a lot or what makes
this one famous? You said this was a famous one.
MK: I think it was widely used and that’s what I meant when I said this is a
famous one.
KV: Is this one that you remember working on to develop?
MK: No, I don’t recall working on it. I just recall—
KV: You just remember seeing it. Here’s another kind of similar—
MK: Now, this one is similar to a statue that’s in front of the Army Medical
Department Museum. Have you been out there?
KV: I’ve seen a picture of the medic statue. This is the one for, “You’re
Needed.”
MK: This is very similar but not quite. It’s not quite the same because in the
statue out in front of the museum, they’re using the rifle, the man’s rifle, as the pole for
the IV. The medic is not.
KV: This one seems—some of these don’t have pictures of women in them or
even nurses. This guy is probably a medic because he’s in the field. He’s not a nurse in
the hospital.
MK: That’s right.
KV: So it seemed funny to me when I saw this that it’s to get nurses, but it’s not
a picture of a nurse. So it seems kind of funny.
MK: Yeah. I can’t read that. My eyesight’s not good enough.
KV: “You’ve heard the news. You know American soldiers are fighting in
Vietnam. Could you face yourself and the oath you took when you became a nurse if any
of them suffered needlessly because there were not enough nurses? Of course not.” It
goes on.
MK: That’s what—the picture is composed so that hopefully someone who’s
involved in a medical profession of one kind or another, nursing or some other thing,
would read the text. They look at the picture and they read the text with it because
they’re involved in that profession.
KV: This one might appeal to men, too, because it’s not just a picture of a nurse
in a white uniform.
MK: Yes, yes, it might. Yes.
KV: Here’s a picture of a nurse.
MK: Yes, I recall this.
KV: “Ask an Army nurse about patriotism and she’ll tell you about serving in Vietnam.” Do you remember this one?
MK: Yeah, and there’s the coupon.
KV: Was this an actual nurse and patient or is this a model and kind of a stage scene, too.
MK: I think that’s a model. The reason I say that is it just looks like a set-up to me. They did try to make her look like a real person, but I can’t imagine anyone on duty having every hair in place like that.
KV: Then we have, “The Most Beautiful Girl in the World.” That one, you remember?
MK: No.
KV: No?
MK: But it’s a very good one.
KV: What’s good about this one do you think, in your opinion?
MK: Well, you can’t see since you’re not a military minded—she’s got the Army medical red. Maroon, you know, is the color for Army medicine. So she’s got that color scarf on.
KV: Is that something she would have worn on a daily basis?
MK: Yes, depending on where she was, she would. She’s in her field uniform.
KV: She’s got what looks like some bars on her uniform.
MK: You see her hair and not every hair is in place. Her hair is a little bit tousled so it’s very realistic.
KV: Yeah, she’s kind of looking down at you, too. Almost as if you were—
MK: As if you were the patient, yes. That’s one I think I’ve seen before.
KV: “Share great moments in the Army Nurse Corps. Be on work and off duty at the same time.” This is an Air Force ad. Little competition.
MK: It’s all right.
KV: One about the Must. The Must units.
MK: Yes.

KV: Then there’s one for OR specialties and anesthesiology, too. This is a woman. It looks like she got her fingernails nice and done. It looks like they’re painted. You can’t really tell, but it looks like they’re painted maybe.

MK: Yes, they do. You’re right.

KV: A lot of the anesthesiologists, the nurse anesthetists, were male nurses, right?

MK: Yes. It’s a very popular specialty with the men.

KV: I guess she’s a female.

MK: Yes, we have a lot of women who are nurse anesthetists.

KV: It looks like maybe this one, in color, her specialty—“Let the Army bring out the specialists”—she’s probably an OR nurse. It looks like she’s scrubbed in. This one, “She brings them back alive.” She’s an Air Force nurse but everybody that sees this one says she looks like another woman that did ads in the ‘60s. I think they said it was shampoo ads or something.

MK: So I’m not the only one.

KV: Some education ads, “Will pay ten thousand dollars.” It’s interesting in this ad. This is one that I found that there’s an African American and there’s a man. That’s kind of interesting, that one. These were a little bit later, these education ads. “Stay in school. The reason she wanted to be a nurse,” and she’s a little girl. She’s not even—

MK: I have not seen that one before.

KV: That’s an Air Force.

MK: But you know, when they talk with the very young nurses sometimes, they’ll say, “Oh, I have wanted to be a nurse ever since I was a little girl,” or “As a little girl, I always said I wanted to be a nurse.” Well, I don’t know.

KV: This is the same girl that was on the color brochure, this young lady from Lehighton, Pennsylvania?

MK: Yes. Lehighton. Not far from my home.

KV: Is this why this was chosen?

MK: No. That was someone in the advertising.

KV: It’s Small Town, U.S.A.
MK: That’s right.

KV: It’s not a big city so you can get out and do more. A real cute little girl. She looks little.

MK: Well, this is the same model that’s in several other pictures. So I don’t know if the advertising agency just took—in the other one, her hair is a little different but that was taken at the same time that the others were. They always take three, four, five, or maybe six poses.

KV: What about this one? “Officer, nurse, woman”? This is my favorite, by the way.

MK: That one I’m not familiar with.

KV: She’s in her fatigues. She’s got scissors. She’s working. Okay, this one, “There’s a special little something,” this is for the Air Force Reserve so that’s even a little more different. Here’s another Air Force. Yeah, that’s another Air Force. “How to bandage a war in the Army Nurse Corps.” You’ve got her working with a patient. Does that one look familiar?

MK: No.

KV: No. What about the genuine article?

MK: No, that’s not familiar to me either.

KV: This was Air Force and another Air Force. I haven’t found many Navy ads.

MK: No, I’m trying to think. There should be a few because when we started, back about—let’s see. I went down there in ’63. Back about ’61, ’62 the chief of the Army Nurse Corps realized that we would be needing a lot more nurses very soon. They started a special recruiting drive that they nicknamed Operation Nightingale. That was Col. Margaret Harper. They were just getting it planned and organized and what for. Her term as chief of the Corps expired and her replacement was an Army nurse by the name of Mildred Irene Clark. She appreciated the fact also when they really looked at manpower figures and Colonel Clark took a very, very active interest in recruiting. That was when they started to produce a lot of these advertisements. They used every possible resource.
KV: What were some of the problems that you faced in recruiting, in trying to get more people? Because there was always a shortage of nurses. You’re always trying to fill that.

MK: Well, yes. At one point the military services felt a little—fell, not felt—fell a little bit behind civilian nursing in their pay scale. Well, of course, in order to get a better pay scale for the nurses, we had to depend upon a better pay scale for the entire military.

KV: Because it’s all based on your rank.

MK: It’s all based on the overall compensation for the Army. That was one of the things that we had. The other thing was that different prestigious hospitals were having a little problem recruiting as many nurses as they wanted. So they started advertising and started promising a little more pay. So it was just a jumbled shortage of nursing. Then with Vietnam we didn’t have any nurses in Vietnam one year and then the next year we have a thousand. So you know that took a lot of recruiting to get that thousand on top of our normal amount of nurses.

KV: Right. Was the anti-war movement a factor in that? Did that kind of hurt recruiting, do you think?

MK: I don’t know. I wasn’t in recruiting at that time.

KV: That was a little bit later.

MK: That was a little bit later, but I think it could very well have contributed.

KV: Great. Well, I don’t want to keep you from the dinner.

MK: That’s all right.

KV: We’ll end this for now and then we’ll pick up, hopefully over the phone, and we can talk about broader things. You know your own nursing experience. I don’t want to just limit this to recruiting, but your own experience as a nurse in the Army and your years on active duty and in the hospitals and things. So we can finish up later, too. I just wanted to show you these while I had them in front of you, too, so we could talk about them.

MK: Yeah, I’m sorry I wasn’t of more help.

KV: No, it was very helpful.

MK: It didn’t go back quite far enough for me.
KV: Well, it seems like a lot of thick brochures and the glossy ads came a little bit after Operation Nightingale, like they realized, “We need them,” and started and so it was a little bit ’66, ’67, and ’68. It started to build up then with the ads and things. So this is all good information because I haven’t found any of it in the Archives, how these things were really developed. It’s very helpful. So we’ll talk more later, but we’ll end this for now.
Kara Vuic: Okay, the tape recorder is running and it is April 20th, 2005. I’m calling Col. Marion Kennedy who is in San Antonio, Texas. Okay, so last time we talked I had—last time I met you, actually, in San Antonio, I just had the recruitment ads. So I wanted to show you those while I had those right in front of you. So why don’t we start all the way at the beginning this time and we’ll kind of start with where you were born and grew up. That sort of thing.

Marion Kennedy: I was born and grew up in the eastern part of Pennsylvania and had my early education there. Then I attended the hospital of the University of Pennsylvania School of Nursing. Then I went overseas with the University of Pennsylvania unit in World War II. Then when I came back, let’s see. What did I do? I didn’t do very much for a while and then when I started to work again, I went back to Philadelphia and I started to work on my baccalaureate degree at the University of Pennsylvania. I sort of just kind of did that leisurely and got my baccalaureate degree in nursing education in 1953. Then after that, in August of ’53, I came back into the Army Nurse Corps and was assigned to Walter Reed Army Medical Center where I was an instructor in the clinical specialist program. I did that for three years. Then I went to Germany for two years and I just loved it. I just loved it. After two years in Germany as an assistant chief nurse and as a training nurse in the 7th Army Field Unit, then I came back to the United States and was assigned to what was then the Medical Field Service School and what is now called, I think, the Academy of Health Sciences. But anyway, it was then in the old quadrangle and called the Medical Field Service School. I worked there as an instructor for four years and got a masters degree at Trinity University in San Antonio. Then after that I went up to Washington, D.C. and I spent four years in the Department of the Army in personnel. Also while I was at the Academy of Health Sciences, or rather—excuse me—while I was at the Medical Field Service School, I also had some experience in recruiting. Not very much but I did have some. So then when I went up to Washington, D.C. I had some additional experience in recruiting and I worked in the Department of the Army personnel department, which was actually under the
deputy chief of staff for personnel. While I was there is when we started, or they had already initiated some programs to expand the recruiting of nurses. So I worked with those particular programs. The acronym was DESPER. So people in the other departments always referred to me as desperate because they knew we were making a push to recruit more nurses. We decided to expand the student nurse program, both those on the diploma level and also on the baccalaureate level. They were very successful. It was because we were trying to emphasize the baccalaureate level that when the surgeon general decided to implement the Walter Reed Army Institute of Nursing program, it was decided that it would be on a baccalaureate level with the University at Maryland. So that’s how that came about. After four years of doing that I went to Department of Defense, again in manpower, to represent the nurses for the Army, Navy, and Air Force so that nursing would have a representative. I was there, let’s see, for almost a year. Then at the end of that time I went back to Ft. Sam Houston and was in charge of the Department of Nursing Science. I stayed there until I retired.

KV: When did you retire?
KV: ’72, okay.
MK: So I’ve been retired for more years than I’ve been on active duty.
KV: Had you always wanted to be a nurse?
MK: No, not really. It was just something that came about gradually.
KV: So was it in high school that you decided?
MK: Yes, during high school. It just so happened that we lived across the street from a couple. Her name was Elizabeth Hall. Elizabeth had been an Army nurse in World War I. My mother admired her greatly. At the time that she lived across the street from us, she was a nurse in a doctor’s office. I don’t know who the doctor was, but anyway, when my mother would see her come home every afternoon she would comment, “There comes Elizabeth.” So I think my mother did it by subtle indoctrination.
KV: So you decided then to go to nursing school. Had you given much thought to the Army at that point or was it World War II that brought that on?
MK: No thought at all at that point to the Army. As one of our courses when we were senior students, they had people come in and speak about the different opportunities
in nursing in addition to working in a hospital. Someone came in and talked about public
health and someone came in and talked about the military services and just various places
where professional nurses would be working. But shortly after I got my diploma, World
War II was looming. They started to recruit nurses for the units. Some of my classmates
and some of my other friends decided to sign up for the unit. So they talked me into
signing up for it also.

KV: What years were you in nursing school?

MK: From ’37 to ’40. But at that time you could not take the state board exam in
the state of Pennsylvania until you were twenty-one years of age. You had to be twenty-
one in order to apply. Well, when I finished my nursing program I was twenty. So I had
to wait for about six months until I could apply for the state board that was given after I
was twenty-one years of age. So until that time, I could only work there at the university
hospital.

KV: So that’s when they started to organize the University of Pennsylvania
hospital?

MK: Unit, yeah. They had a unit in World War I also. So there was a lot of
history behind it.

KV: What did you think about the Army when you first got in? What did your
family think about you signing up?

MK: Well, of course my mother didn’t like it. My father was no longer living,
but seeing that I was going with friends made her more agreeable to it. I didn’t feel as
though I was going in the Army. When we reported for active duty we had to report with
our civilian nursing uniforms because our military uniforms were not issued to us until
after we were at Camp Claiborne for a week or ten days. So the first week we went on
duty the day after we got there. That was our training program, was to go on the Army
wards. We became familiar with the different hospital forms that the Army used and
their particular protocol in taking care of the soldiers.

KV: When was the hospital deployed during the war?

MK: We went to India. We left in January of 1943 and got to India in March of
’43. I was there until the spring of ’45 when I went to Calcutta and I worked in Calcutta
while I was waiting for transportation to go back to the United States.
KV: What did you think of India?
MK: Well, it certainly was a very different terrain and climate than what I had
experienced up to that point. But, you know, I was working mainly with people I had
worked with that the young physicians in that hospital had been medical students while I
was a student nurse. So I knew many of them. The hospital started out with just four or
five wards and each ward was a separate, temporary building. At one point we had as
many as twenty-five hundred patients at a time.
KV: Wow.
MK: So it was a large general hospital. We took care of both American and
Chinese patients.
KV: What was that like with the language barrier?
MK: Well, we had an interpreter, but the Chinese we had, I don’t know what part
of China exactly they came from, but they were very demonstrative. I learned a few
phrases like if they were going to have surgery the following morning we would say to
them (speaks Chinese) meaning, “tomorrow.” (Speaks Chinese) and that meant they
were going to get cut in the morning. They knew what we meant. Then we’d say (speaks
Chinese) which meant, “don’t drink anything.” All the other patients would gather
around and there would be much jibber jabber as they explained to the casualty what was
going to happen. We had a great time.
KV: You were with General Hayes, right? Is that correct?
MK: Yes.
KV: Wow. What were your living conditions? (Editor’s note: Audio cuts off and
there is silence for a few seconds)
MK: Were improved, as I’m sure she told you.
KV: So they just generally got better as time went on?
MK: Yes.
KV: Was this really your first time away from home?
MK: Well, when I was in training I was sixty miles from home. I had traveled a
little bit, but you know families didn’t travel as much before World War II as they did
afterwards. Well, you know people in West Virginia years ago didn’t travel very much.
KV: Right. So what was that like being gone so far and for so long?
MK: Well, mail was very slow. So of course I missed mail, but aside from that we were with friends we’d known for five years so—

KV: So that really helped.

MK: It really did help a great deal.

KV: What wards did you work on? What were you assigned to?

MK: Well, the first five or six months we were there it was over the summer time and we had mainly malaria patients. They hadn’t as yet gotten a preventive medicine unit up there and of course adabrin came along a little bit later. So it was mainly malaria. But then in the fall we started to get casualties. From then on—the preventive medicine unit had arrived and our malaria cases gradually decreased as our casualties increased.

KV: Then you came back home in the spring of ’45 or in the middle of ’45?

MK: I got back home in July of ’45.

KV: Were you out of the Army Nurse Corps at that point?

MK: No. After I went home for a month’s vacation, then I went back to Walter Reed. Excuse me, I did not. I was assigned to Valley Forge General Hospital. I worked there August, September, and October for about two or three months. Then I was discharged from the Army.

KV: Did you really have a choice in that? Did they just tell you you were discharged or did you want to leave at that point?

MK: No, I had a choice. I had decided that before I ever got to Valley Forge that I would not stay in the Army.

KV: Why did you make that decision?

MK: I don’t know. They just asked me, “Do you want to be discharged or do you want to stay?” Well, I was at Valley Forge. It was out from a small town. There was very limited transportation, and none of us had any money to buy a car so I thought, well, if I get out of the Army and I go back to Philadelphia, even if I don’t have car, there’s always the subway and trolley cars. At least you could get around the city. But at Valley Forge, I couldn’t. There was very limited public transportation anywhere.

KV: So what did you do then when you went back home?

MK: Well, I stayed home for about—I went home in October and I think I stayed there until the following March and then I went back to Philadelphia.
KV: Were you still working in nursing then?
MK: Well, I started to work in nursing in March, yes. I lived with a young lady who had been my roommate in training. She had not gone into the military. She had stayed back and had worked in the hospital. So Helen and I decided to share an apartment and we did. We had a nice time together.

KV: How long did you stay in Philadelphia then?
MK: I stayed in Philadelphia until I went back into the Army in August of ’53.
KV: What made you decide to go back into the Army, then?
MK: Well, I had just gotten my baccalaureate degree. Actually, I don’t know where it was, but I saw Anna May and I had known Anna May many years at that point. I said, “Well, I’m getting my degree.” She said, “Oh, well, if you had stayed in the Army, the Army would have sent you for a degree.” I said, “I don’t know, Anna May. I don’t know whether they would have or not.” But anyway, she said, “Well, why don’t you come back in the Army?” So I said, “Well, I’ll think about it.”

KV: She was convincing.
MK: She was convincing.

KV: So you said you were at Walter Reed for three years?
MK: Yes.

KV: Then you went to Germany for two years.
MK: Yes.

KV: You said you liked Germany, that that was a good assignment.
MK: Very much, yes.

KV: Which hospital in Germany was that?
MK: It was a very small hospital in a small village, the 225th Station Hospital in Munchweiler.

KV: You said you were a training nurse in a field unit, is that right? Did you train nurses or did you train corpsmen or medics?
MK: You trained medics.

KV: Medics, okay.
MK: A unit that was training to be field support for the 7th Army and the enlisted personnel had military duties. They also had duties that were pertaining to taking care of
patients out in the field hospital. So they needed to keep up their medical expertise such as it was, as well as doing the military duties. We had our own equipment, tents for wards, and we had our own operating room supplies. All of this material had to be taken care of. Then of course they had to know how to use it.

KV: Did you like doing that work?

MK: Yes, very much.

KV: Was that what made you like Germany so much or was it just the location?

MK: Well, I think it was a little bit of everything. It was in a beautiful location. The people that were around there were very nice, the German population. Of course when I was assigned to the hospital it was a small hospital and I liked small hospitals. You get to know everybody that you’re working with. We had a small OB/GYN department. We had one ward that was women and children. Then we had one men’s medical ward and one men’s surgical ward. So there were four wards with about—well, OB/GYN didn’t have that many patients in it. They had maybe eight or ten at a time.

But the others might have maybe around twenty.

KV: After Germany then you went to Ft. Sam Houston?

MK: Yes. That was my first trip to Texas.

KV: What did you think of Texas then?

MK: Well, let’s see. I got here in October, I think and it was still hot. But once again, I had a friend here. As a matter of fact she’d been my chief nurse in Germany for a short while. So I’d known her there. She had an apartment that had a small spare bedroom. So when I arrived here I stayed with her for a couple of weeks until I found a place to live and got settled in my assignment.

KV: Did you like your work there?

MK: Very much, yes.

KV: You said you were an instructor again?

MK: I was an instructor again.

KV: So you liked teaching?

MK: Yes, I did.

KV: You were there for four years?

MK: Yes.
KV: Then you got your master’s degree?
MK: Yes.
KV: Did the Army pay for that one?
MK: No.
KV: No?
MK: Well, I’m misleading you. They paid the tuition my last semester. At that time they had a special education program that if you were within one semester of getting a master’s degree, they would pay the tuition. Before that I had asked the assignment branch in—well, while I was at Walter Reed I had taken a few courses. Of course that time, and I guess it still holds, when you’re taking courses on the graduate level, if you don’t get your degree within a certain length of time the courses are no longer valid toward a degree. That’s what had happened to me in Washington. So I asked them if they would leave me in San Antonio. Otherwise I wasn’t going to start working on a degree and they said no, they would leave me. They did.
KV: Yeah, four years sounds like that was a long time to be in one assignment. Is that right? Usually you rotated a little bit quicker?
MK: It was usually around three years.
KV: Okay. So they let you finish your degree there and all of that?
MK: Yes.
KV: Okay. Then they moved you to D.C.
MK: Yes.
KV: That’s when you worked for the Department of the Army.
MK: Department of the Army and I was there four years because while I was there we started to gear up for Vietnam. I was asked by my boss if I would stay an additional—I was to be there for three years and he asked me would I stay an additional year and I said yes, I would.
KV: What year did you arrive there?
MK: I got there in May or June of 1963. I stayed in Department of the Army for four years. Then I went up to Department of Defense and I was up there for very close to a year.
KV: What was the difference between the two assignments? With Department of the Army you were still recruiting for the Army, but with Department of Defense it was more concerned with all military. Is that right?
MK: Yes, all three military nursing branches.
KV: When you worked at the Department of the Army you worked at the Pentagon, is that right?
MK: That’s right.
KV: What were your assignments or jobs and what did you do on a daily basis there?
MK: Well, number one, I handled the recruiting publicity so if the publicity agency had worked up a new folder and they wanted it okayed, they’d bring it in to me. I would staff it to the various departments that were concerned and get their comments. Then I would contact the publicity agency about any corrections that needed to be made or whether we didn’t think it was useful or whether we thought it was very, very good. In other words, I worked with the publicity people in that regard. On a daily basis I checked with the office of the surgeon general about how the Army Student Nurse Program and other programs where coming along. I think it was about the last year I was there that they started to plan and build for rain.
KV: You said you worked with the advertising agencies?
MK: Yes.
KV: Do you remember any of those agencies or anyone you worked with there?
MK: When I went there, I’m trying to think of the name of the advertising agency we used. It was a long name. But while I was there we changed the contract to an agency that at that time was in Philadelphia, N.W. Ayers, A-Y-E-R-S. Ayers later moved to New York City, but when I first started to work with them they were in Philadelphia. I don’t know if they’re still in existence or not.
KV: I think they are. I think so. The first company, I’ve seen a reference to it, a company called something like, “Macleod, Ketchum, and Grove.”
MK: No, it’s not that.
KV: That’s not it? Okay. I just thought I’d check that one out. So do you remember when they switched to N.W. Ayer or at what point they switched?
MK: Not exactly. I went there in ’63. Probably 1966 or ’67.

KV: What was the relationship with N.W. Ayers or how did things go with them? Who did you work with or what do you remember about that?

MK: I don’t remember the names of any of them. Now, between ’63 and ’67, we established the Recruiting Command at CONARC (Continental Army Command, U.S. Army). They had two or three civilian employees at CONARC who were contacts to the advertising agency. They were very knowledgeable. Listen, Kara, we’re going to have to resume this.

KV: Okay.

MK: How about tomorrow morning? Would that be all right?

KV: Yeah, would the same time work for you?

MK: Yes, it would.

KV: Okay. All right, that will be great.

MK: I’m sorry to interrupt.

KV: No, no, that’s fine.

MK: I’m trying to think. Look up some other names. Ketchum, Macleod and Grove. No, that doesn’t sound right. I remember the man I worked with at whatever advertising agency it was was a man by the name of Paul Neilson. He was a graduate of West Point. He was still a fairly young man. How much time he served in the Army, I don’t know, but I was told that he was very Army oriented because he was a graduate of West Point and that’s all I can tell you.

KV: It was called Paul Neilson?

MK: Then the person I worked with from CONARC—there was a man and there was a woman—I’m sorry. Now, Doris may remember some of the names that she worked with and maybe if I knew what they were it might jog my memory.

KV: Okay.

MK: Okay?

KV: Okay, so tomorrow.

MK: I’m running up your telephone bill.

KV: Oh no, that’s fine, don’t worry about it. Don’t worry about it. Okay, so I will call you tomorrow at the same time, ten o’clock your time.
MK: Very good.
KV: Okay, all right. Thanks.
MK: Bye-bye.
KV: Bye.
Kara Vuic: Okay. So today is Thursday, April 21st. We’re going to keep talking with Colonel Kennedy. Yesterday we got—you were talking a little bit about when you worked for the Department of the Army in DESPER. We were trying to figure out—you said you worked a lot with the ad agencies and we were trying to figure out which ones were which or which companies the Army worked with at different times and things. I got in the files that I got from the Army Nurse Corps archives. The N.W. Ayers that you mentioned, the Army switched to them in 1967. The only thing that I could find before that is this group called Ketchum, Macleod and Grove. It says that they were working with them at least in November of ’65 and that they coordinated a publicity tour of two nurses that went around the country who had been in Vietnam. I think one was Julie Kleebaum and I forget, Schilling, I think maybe Captain Schilling. They went around the country and toured and things. Then it also said that you got to go to the White House with these two nurses and Major Clark, Chief Clark, I think at the time.

Marion Kennedy: No, it was Colonel Mildred Irene Clark.

KV: Okay. She wasn’t chief at that point?

MK: She was the chief of the Army Nurse Corps at that point.

KV: What happened when you went to the White House?

MK: Well, I’m trying to remember. Let’s see. We went into the White House and we went to the Oval Room, which is on the first floor or the ground floor because I remember that I think it was Lucy Johnson came home from school with her boyfriend Pat. I’ve forgotten what his last name was. They later married. We just had a very brief, general conversation with Mrs. Johnson and she of course introduced Lucy to us. Pat was sort of in the background and he was not introduced. Nugent was his last name. He was a tall, redheaded boy. Lucy, I think, was maybe seventeen, eighteen at the time. The idea was that number one, to emphasize the role that nurses played in Vietnam. Lucy at that time was toying with the idea of becoming a nurse herself. This was a little publicity gimmick. It was no big deal. I don’t even know how much publicity, if any, we got out of it. It was just that whoever was our advertising agency would try to find ideas that
they thought would promote things. You might ask Colonel Cobb when you talk with
her. To the best of my recollection, these two gals that went around the country did not
make that many stops. Neither did they create, as far as I could see, much of a splash.
But it was one of the ideas that Colonel Clark, when the advertising agency proposed it,
Colonel Clark was very much for it. You know we were at the point where we were
trying to interest nurses in whatever way we could that was tasteful.

KV: How did you decide what kinds of things might work? Did people sit
together in a room where you have meetings and kind of throw out ideas?

MK: Yes, we had some discussions. Colonel Clark had a weekly staff meeting.
Different people would propose different things.

KV: Who would go to those meetings?

MK: People on her staff.

KV: So people in the office of the surgeon general, then?

MK: Yes, and Army Nurse Corps officers. Then the advertising agency would
come up with a lot of different ideas, things that hadn’t been used before and seemed to
be very effective, we tried to get.

KV: What kinds of things were effective?

MK: I think probably the educational benefits for people already in nurse’s
training or nursing education. We had a subsidy program for students in the diploma
program after they reached a certain point in the program, and the same way with the
baccalaureate program. Colonel Cobb could tell you more about this, but we had a group
of Army nurses who were on recruiting duty. They usually went to various schools of
nursing in the area where they were located. Usually it was a panel discussion, a
representative from the Army, the Navy, and the Air Force because our programs were
very similar. So a lot depended on the circumstances. Some young ladies went in the
Army because their fathers had been in World War II, things like that. Others liked the
uniform of the Navy better. It was navy blue. Others, it was the glamour of flying. They
might join the Air Force Nurse Corps and never fly but that was not the point. You
know, that type of thing. Some of them were really—particularly after we started to get
severe casualties from Vietnam. There were some young nurses who were really very
highly motivated. They thought of these young men who were being wounded as
brothers or cousins or friends, maybe neighbors. They wanted to do whatever they could
to help them.

KV: Were there ever any surveys of nurses or anything that they would maybe
get a bunch of nurses together and ask them what kinds of things might appeal to them in
advertisements?

MK: I’m sure they did that. I can’t quote any to you because I was not involved
in those.

KV: Would that have been done—?

MK: Colonel Cobb was doing that.

KV: Colonel Cobb, okay.

MK: I’m sure there were many surveys.

KV: Let’s see. When I found the information of this group, did that sound
familiar, Ketchum, Macleod and Grove?

MK: I’m sorry, it doesn’t.

KV: It doesn’t? Okay.

MK: I remember that my contact was a young man who worked for an agency
and it seems to me that his name was Paul Neilson.

KV: Was he with the first company or the N.W. Ayer?

MK: He was with the company before N.W. Ayer. Actually, I had been up in the
Department of the Army for a year or two before I got involved with the publicity
agency. There was someone else in my office who was handling it when I first went up
there. So that was not my primary responsibility at the time. That’s why I can’t be of
more assistance to you.

KV: No, that’s fine. What kinds of things did you do in terms of publicity once
you got involved?

MK: Well, let’s see. What did I do? Number one, we got a new deputy chief of
staff for personnel. I wrote, directed and—this is funny. Always, the chief of staff for
personnel made a very short speech that was shown by movie to new recruits of the
Army. So while I was up there we got a new deputy chief of staff for personnel and there
was much flurry. We’ve got to get that old film out of distribution and put a new one in.

KV: What was the new guy’s name?
MK: Woolknow was the guy. Anyway, so we made up another twelve or thirteen minute film. We got that in distribution. Also, any little brochure, whether it was for Army Nurse Corps or whatever part of the Army it was for, I saw it before it was reproduced for distribution.

KV: Were you the final authority? Were you sort of the one that had to check that off?

MK: No, I was the lowest rung on the ladder. If there was something that I took exception to—well, number one, you staff it first, depending on what part of the Army it pertains to. Then, when you’ve got all the comments back you wrote a little synopsis and it ended up with whether we thought corrections should be made or whether it could be printed as proposed.

KV: Did you see those just for the Army Nurse Corps or did you see those for like enlisted recruiting as well?

MK: Yes, I did.

KV: Oh, so you saw all of them? Wow.

MK: Yes, in the Department of the Army, your branch’s material.

KV: Wow. So you saw a lot of advertising.

MK: Yes, I did.

KV: Not just for the Nurse Corps. Wow. That’s interesting because I bet if recruiting nurses was difficult during Vietnam, I would imagine that recruiting enlisted men was even more difficult. You’re trying to get people to sign up with all of the controversy about the war. Was it difficult, you think?

MK: Oh, I think it was very difficult because some very—what should I say? Some very distasteful things happened to people who were in uniform, particularly on the West Coast.

KV: So it was probably difficult, not just to recruit but to get recruiters, to recruit recruiters, I guess.

MK: They were generally men who made a very good appearance, who were very well spoken and who were very much sold. They were career soldiers and they usually spoke very well.

KV: Then some of them also helped in Army Nurse Corps recruitment?
MK: Yes.
KV: What did they think of that?
MK: Oh, I think they liked it. After all, they got to talk to a lot of cute young things in skirts.
KV: So what was your title at DESPER or how would you characterize or say what you were?
MK: I’m trying to think what the official title was. Staff Officer—I think our division—what was our division called? I think it was Procurement under Manpower for the deputy chief of staff for personnel.
KV: Okay. Were you sort of a representative of USAREC (United States Army Recruiting Command) at that level?
MK: No.
KV: No? Okay.
MK: USAREC was the United State’s Army Recruiting Command. It was a headquarters in its own right. They were down at Ft. Monroe, Virginia.
KV: General Hayes tried to explain this to me but it just—
MK: One of the other men in the same office that I was in more or less oversaw USAREC.
KV: Okay. So you were a staff officer in Procurement and you were responsible for—
MK: In Manpower, in the Manpower Division of the deputy chiefs of staff for personnel. This is so long ago so please don’t quote me for exact titles.
KV: Right.
MK: I’d just say I was a staff officer.
KV: So your job there wasn’t just related to the Army Nurse Corps, but you just happened to be a member of the Army Nurse Corps assigned to this job.
MK: That’s right. Let me backtrack a little bit. When we were desperately short of nurses at one point, back about ’61, ’62, somewhere around in there we were desperately short. The office of the surgeon general realized that they had to do something about recruiting for nurses. Then there was an Army nurse who worked in the same office before I did—I was a replacement for her—and all she did was the Army
Student Nurse programs and Army nurse recruiting. But then after I came along, she was
not assigned as a—well, she was a staff officer, but this was her little niche. But then
when I came along and we started to get some really good results from our student nurse
program, then they decided that I needed to do something more. The officer, who had
been in charge of publicity, got tired of it and wanted to do something else. So she
persuaded the boss to give me recruiting publicity in addition to my other assignments.
You see, everyone assigned in that office in there—in my little office there were eight
staff officers. We were all what called ranch-hand material because you did whatever
you were assigned to do. Different actions came in. Sometimes a letter to a
Congressman would come across the desk and the DESPER had a policy that the letter
had to be answered within five days. You wrote a letter and sent it up to his front office
for his signature. We had lots of little things like that that we were doing.

KV: It just so happened that one of the positions in his office was for an Army
Nurse Corps member and one was for a WAC (Women’s Army Corps) or one was for
whatever else.

MK: Yes, we had different branches working. We had artillery. We had
infantry, signal Corps, and different things like that.

KV: Yeah, I’m not in the military. My family—just various members have been
but I don’t know enough about it to really understand the organization.

MK: I understand. Not only that, Department of the Army is a little area off,
peculiar to itself.

KV: Yeah. When I talked to General Hayes, she was drawing on a piece of paper
and trying to show me where everything went and how everything was organized. So I
kind of understand that DESPER is in the Department of the Army, which is pretty high
up. That’s the Army. Then CONARC would come underneath that?

MK: Yes.

KV: Then USAREC comes under CONARC, I think.

MK: Well, in a way. It just happened to be situated at Ft. Monroe.

KV: So USAREC wasn’t like a branch of CONARC or didn’t report to

CONARC?
MK: Well, I’m sure they had some reporting responsibility to them, but their main report came up to our office. It came up to a man. I sort of think he was infantry or else he was artillery. As I remember, his name was Colonel Corkrin.

KV: So what was the difference I guess between CONARC and USAREC?

MK: Well, the Continental Army Command is a command along the East Coast. The United States is divided up into different Army areas. Along the East Coast, CONARC was a very historic spot. It’s an old, old place and it has a moat around it. After the Civil War, Jefferson Davis, who had been president of the Confederacy, was a prisoner there. I think he died of tuberculosis there. I’m not sure about that. But anyway, there’s a lot of history behind CONARC. So actually its responsibilities to the Continental Army Command are not very large because of all the history. It’s in a beautiful spot, in case you’ve never been there. The United States Army Recruiting Command was a command structure just for recruiting. It was set up—it was not in existence when I first went to Department of the Army. It was while I was there that it was realized that recruiting was not getting the emphasis it should be getting so they decided to set up this command whose prime responsibility would be recruiting and reenlistment.

KV: That was for all of the United States, not just the East Coast?

MK: Exactly. Also, reenlistment overseas as well.

KV: Okay. So CONARC really had nothing to do with recruitment.

MK: No, it just provided housing and other things. But it just happened to be where the recruiting command was set.

KV: Okay, I misunderstood that. I was thinking CONARC stood for Continental Army Recruiting Command, but it’s just Continental Army Command.

MK: No. CONARC is Continental Army Command. It was a command. USAREC is the United States Army Recruiting Command.

KV: Okay, okay. Yeah, I had it confused and thought CONARC had something to do with recruiting at some point. Okay. So USAREC would report to DESPER directly?

MK: Yes.

KV: Great. That makes much more sense now.
MK: You’re getting into some pretty heavy stuff.

KV: Pretty confusing stuff.

MK: Yes, it can be. I agree.

KV: Once I think I’ve got it figured out from the letters and trying to piece together who was who, then someone will get moved and somebody new will be in that position and I’ll get completely confused again.

MK: I understand. Are you writing a book or is this a thesis?

KV: Right now it’s for my dissertation. So I want to make sure I get it right.

MK: How many years do you have to write this?

KV: You’re given seven by your department and then they either kick you out or you have to take your exams over again. Some people take seven years, but I’m hoping to be done about a year from now, hopefully.

MK: Well, I hope, too, you are. You’re certainly putting a lot of effort into it.

KV: Well, it’s interesting, too. It’s not boring, I don’t think in any way, so that helps. That really helps.

MK: I know that over the years, since I was there, there have been a lot of changes. So it’s difficult when you try to trace—you can really get yourself entangled in a lot of things.

KV: I’m sure. I don’t know how the people keep it straight and know what’s what. Well, let’s see. Do you remember what magazines that they placed ads in for the Army Nurse Corps?

MK: No, I’m sorry.

KV: Okay ‘cause I’ve found some.

MK: It’s very likely that I would say the American Journal of Nursing.

KV: I found some there. I found some in Nursing Outlook, and then Tomorrow’s Nurse, but that journal only ran for a couple years. It was for student nurses. I found one ad in Life Magazine for nurses.

MK: Oh, you did?

KV: Uh-huh. It ran September 22nd of ’67 and it says, “The Genuine Article,” and it’s got a nurse kind of looking down at a patient. You don’t see the patient but you can tell she’s sort of leaning over the bed. It says she’s the genuine article. But that’s the
only one I found in *Life*. Then I found several in *Mademoiselle*—a couple in that and several more in *Glamour*.

MK: Very good.

KV: I have no idea if that’s it. I think probably, but I don’t know for sure because again, those records are gone.

MK: No, I think that is very close. I don’t think there’d be very many more. Then of course you know right about that time—when did *M*A*S*H* come along?

KV: Oh, geez.

MK: That was after the Korean War.

KV: Yes, it came out during Vietnam and they always kind of said it was about Vietnam, but about Korea and nobody really knew.

MK: No, it was definitely Korea because—yeah, I can remember. Oh, who was it that had—? It wasn’t Loretta Swit. It was somebody else who kind of got a lot of publicity and was a movie star.

KV: Somebody on the TV show?

MK: Ask Colonel Cobb if she can remember. I don’t think it was Loretta Swit. It was somebody else who made a lot of trips to Vietnam. Well, anyway, she has a better memory than I. She’s younger than I am.

KV: Were there ever any problems in recruiting nurses, any brick walls that you ran into? What were you up against in recruiting?

MK: Not getting enough people and not getting enough recruits. I shouldn’t use the term recruits. Right about the time of Vietnam and slightly before that, even, the cost of going into nursing, particularly into a baccalaureate degree program started to rise. So a lot of nurses and a lot of students were having a hard time financially. I think that’s one of the reasons all three nurse corps, Army, Navy, Air Force, had student nurse programs. They were among our more successful efforts.

KV: That really brought more people in?

MK: What?

KV: That brought more people into the Corps, the student programs?

MK: Yes, for all three.
KV: What do you think kept more people from not coming into the Nurse Corps? Do you think there was something that kept more people out?

MK: Well, I wouldn’t say more. I would say what kept some people out were families. A mother and father didn’t want them to come in or some young lady would think about coming in and then she’d get married.

KV: Why do you think their parents wouldn’t let them come in or wouldn’t want them to?

MK: Well, I know when I first came in the Army my mother didn’t want me to come in. She didn’t want me to join. So it’s just a parent’s reluctance to let their daughters go. Well, and then later on in the middle 1950s of course, we began commissioning men nurses. There were more men going into nursing then than what there were before World War II.

KV: Was there ever much thought about specifically recruiting men nurses?

MK: I feel fairly confident that we probably sent literature and also made a presentation to some of the schools of nursing. At that time most of the men who went into nursing went into a program specifically for men. I know there was one at Pennsylvania hospital in Philadelphia. So they were just beginning to enter the profession in more numbers than what they had before.

KV: What about minority nurses?

MK: What do you want to know about them?

KV: Well, was there ever an effort to try to bring more African-American or minority nurses into the Army Nurse Corps, maybe recruiting at those schools?

MK: Yes, we did recruit at those schools. We had to be a little bit careful because of language, particularly with Puerto Rican nurses or Filipino nurses.

KV: What kind of language problems did you mean?

MK: Well, in some of the countries they had textbooks that were printed in English, but the students would be taught in their native language. So sometimes it was easier for them to make the transition and sometimes they had a little difficulty interpreting doctor’s orders or something like that. Now, I think this was something we noticed, I believe, more I would say after Korea. I think Korea was one of the countries
where after the Korean War, some members of the Army Nurse Corps were very good
about assisting civilian schools of nursing.

KV: Did they keep track of what percentage of the Army Nurse Corps was white, Latino, African-American, or anything like that? Were there ever statistics on that or would that have been done by someone else?

MK: I honestly don’t know. I know I didn’t keep any statistics with my student nurse program. I didn’t know who was black, white, orange, yellow, or brown. I could sometimes tell by the school. Like if they went to Tuskegee, I could just surmise, but it was just that we didn’t make any distinction on paper as far as it was what their school record was, whether or not they were passing their courses academically because if they didn’t pass their state boards, they couldn’t stay on active duty. We did have a special program later on for nurses who did not pass state boards. We would assign them to a particular hospital and they would try to give them a well-rounded experience so that when they would re-take state boards they could pass them.

KV: Just so they had a second chance?

MK: So they had a second chance. But of course if they didn’t pass—and most, I don’t know, I’m guessing, but a good percentage of them that failed the first time passed the second time. Some of them just didn’t have much experience in taking that kind of a test. Of course over the years, state boards have changed. I think they now use a national pool exam, whereas previously each state did their own.

KV: What about Operation Nightingale? That started like in early ’63, I think, ’62 or ’63? Was that something that just continued throughout the war and was sort of a term for all recruitment in general?

MK: Well, it continued for a while, but after our recruiting got a little bit easier the term more or less phased out. It just sort of died a natural death. We just started to talk about—this is, I think, particularly after the recruiting command came into being, we started to speak of in general in recruiting rather than prior to that we wanted to make a really big splash, so to speak. We wanted to really get a lot of attention. At that time we instituted a very heavy publicity program and that was Operation Nightingale.
KV: What about the women’s movements? Toward the late ‘60s or the early ‘70s, did that have any effect on how you had to recruit or was there any thought that maybe women wanted different kinds of things than they had before?

MK: You know, I wasn’t involved in recruiting after ’69. I came down here to San Antonio in the middle of ’68. So I can’t really say what effect the women’s movement had. But I think that the recruiting command did a good job. As long as an adequate number went into the field of nursing that we had an adequate group of potential people, then it was all right and I don’t know. I don’t know any of the statistics of the numbers who went into nursing after ’68.

KV: In ’67 then you moved to Department of Defense?

MK: Yes.

KV: What was your job there?

MK: There I represented the three nurses (audio cuts off)—in each of the three corps and asked them what problems they had that perhaps I could assist them with. I think one of the things that my office did was to help them get a school nurse program on firmer ground than what it had been. You know, having a school nurse in Department of the Defense schools overseas.

KV: Okay. Like, you might have a nurse in public schools?

MK: Yes.

KV: Okay, okay. Was recruitment an issue there? Did they talk about it?

MK: No, it was not. Well, all of the chiefs wanted to have school nurses. They just wanted to have the provision more or less delineated policy-wise, because sometimes overseas, if the number of nurses assigned to a hospital was low for some reason, the commander of the hospital always liked to say, “Well, we’ll have the school nurse work this weekend and cover that spot,” or something like that. Some of the commanders saw school nurses as a very good thing and some of them saw it as an extra person the chief could assign somewhere.

KV: Did you like that job?

MK: Yes, I did. I answered a lot of mail. I had a very nice boss and answered some of the mail that came to Department of Defense regarding medical and nursing personnel.
KV: Then you were assigned to San Antonio after that?
MK: Yes. That was a temporary assignment. There had been a Navy nurse in it beforehand for four years and I was in it for a year. Then after that I was followed by an Air Force nurse. Then they made the term—I think they were tired of having someone come and go—they made her term for three years.
KV: What did you do in San Antonio then, after that?
MK: Well, I came down to what was then the Medical Field Service School and I was the director of Department of Nursing Science. That particular department was responsible for conducting the basic orientation course for Army Nurse Corps officers. We had an advanced course for Army Nurse Corps officers. We gave several short courses during the year. We also had some in-hospital administration. We taught the hours pertaining to nursing service. Also in some of the other programs in the Medical Field Service School. If there was anything pertaining to nursing, it would be taught by an Army nurse.
KV: So you were sort of back towards education again?
MK: Yes, I was.
KV: That’s what your master’s degree had been in, right, nursing education?
MK: No, that’s my baccalaureate degree. It’s nursing education. My master’s degree is in education with a major in counseling and guidance.
KV: So the recruiting then kind of fit with that as well.
MK: Yes, it did.
KV: How long were you in San Antonio, then?
MK: I was here three and a half years and then I retired.
KV: That was in January of ’72?
MK: Yes.
KV: Had you been in the Army for—well, I guess, why did you retire at that moment? Was it your time was up or were you just tired of it?
MK: No, I was due to be transferred and my husband liked to live here. He just thought it was time that I should retire so we could do some traveling together and things like that.
KV: Was he in the Army as well?
MK: No, he was retired from the Air Force.

KV: Oh. Now, was that a big no-no?

MK: No, not at all. Not when I did it. I can remember during World War II, when World War II first started, if any of the Army nurses got married, they were automatically out. Well, then when they really needed a lot of nurses, they stayed on active duty until the end of the war.

KV: I know, I meant that you married an Air Force man, not an Army man.

MK: No one cared.

KV: So you’ve lived in San Antonio since then?

MK: Yes, I have.

KV: Well, it was certainly pretty. It was hot when I was there, but it was pretty.

MK: Yes, it does get hot, but nowadays everything’s air-conditioned.

KV: Yeah. When I got to the ANCA (Army Nurse Corps Association) convention, I thought I’d go for a little walk on the Riverwalk and I thought, well, it’s not too hot, and then I walked up to the street level and it was at least ten degrees hotter up there. So I stayed on the Riverwalk. Well, I certainly appreciate it. I think we’ve kind of filled in some of the gaps and finally got me straight on the whole CONARC business. I really appreciate your time again. If I have any more questions, I’ll certainly give you a call or if you think of something you can give me a call.

MK: Well, please do.

KV: Okay. Well, let me stop the tape now.