Laura Calkins: This is Dr. Laura Calkins of the Vietnam Archive at Texas Tech University initiating an oral history interview with Captain Helen Brooks, U.S. Navy retired. Today is the twelfth of October 2005. I am in the interview room in the Special Collections Building on the campus of Texas Tech in Lubbock, Texas. Captain Brooks is speaking to me by telephone from California. First of all, good afternoon captain.

Helen Brooks: Good afternoon, Laura, how are you?

LC: I’m very good, thank you. I want to thank you and express our appreciation to you for your time and to just confirm with you, Helen, that we have your permission to make this interview available to researchers.

HB: Certainly do.

LC: Thank you ma’am. First of all, if you could, please tell me a little bit about where you were born and when and something about your growing up.

HB: Okay. I was born in Lowell, Massachusetts, which is about twenty miles north of Boston. It was one of the first real, real cities of the industrial age.

LC: Yes, ma’am.

HB: So that was the main activity in the city. My family weren’t involved in that. My mother and dad—my dad came from northern Vermont and my mother’s family came originally from Ireland. But they were in Lowell, Vermont, which seemed strange because then they moved to Lowell, Massachusetts.

LC: Hmm. Now what did your father do?
HB: My father, his dad was a lumberman, but he studied law some. I don’t think he completed it. But he had lived in Vermont and you know Vermont is—that area down under Massachusetts, which used to be called the rheumatic fever belt. Well, he evidently had it in his early teens and it damaged his heart. They were married. They weren’t quite, they weren’t real young when they were married. They were in their early thirties, but both of them I suppose had been delayed because they were getting their education in. It took a long time in those days.

LC: That’s right.

HB: On their honeymoon, he had his first heart attack. They were in Canada and he was taken to McGill. They were away quite awhile while he recuperated and they took care of him. So that sort was sort of, was a large part of stress in the marriage. But they were two wonderful, wonderful people, very well educated, both of them and very understanding, very real human people.

LC: Did your mother go to school and work outside the home then?

HB: No, she never worked outside the home. She had gone to a convent school, a boarding school sort of and because it was distant from home in those days, again, it was horse and buggy so they seldom get home until summertime. They might get home for a weekend or something, but someone had to go get them in a horse and buggy. So they didn’t get home that much. So she and her three sisters were brought up basically in a convent school. So they had a very good education, much better than many of the places today had.

LC: I think you’re probably correct.

HB: Pardon?

LC: I guess you’re probably correct on that.

HB: Yeah. She was very good at imparting her knowledge to us, but Dad died when I was three and a half. I had been sick. I had a brother. I had an older sister and then a brother and then I was the youngest. He was in school when I was a toddler. He brought every contagious disease that he could think of, he brought them home and gave them to me. So I was a sickly young one. I had diphtheria, very severe and in time when there was a big ice storm. The pediatrician I had, his daughter got diphtheria and he still he had to come to me. That’s where I got it, he came to me because I had scarlet fever
and I ended up with the diphtheria. So that took quite a bit of stress out of Dad. Anyway, he died suddenly when I was three and a half. Well, the family had been fairly well, they were fairly well off. I mean they weren’t rolling in wealth by any matter of means, but my mother’s family had a very good established business. Things were fine for them. But then of course things, we’ve always said that our depression began in ’21 when my dad died, not since ’32 when it fit with the rest of the world. But we weathered the storm and it wasn’t that bad. I guess it was pretty good. It didn’t bother me any. But depression years were hard on Mother. She did finally go to work, she had to.

LC: Where did she end up working?
HB: Working in Boston.

LC: What was she doing? Do you remember, do you know?
HB: Was at Register of Motor Vehicles, the state. It was civil service and that was exactly what she needed. She learned to type I guess and do that, but she was the first teletype operator they had, so she had been given a steady job, but it meant quite a commute. Much of that commute she walked, she walked from my home in Lowell to this station, which was about three miles or three and a half. Then she’d get to the north station in Boston and she walked across the city to be on the south station where the office was. So it was a really rough time on her. She had to watch every single penny. But it never bothered us any very much. We certainly ate well.

LC: Tell me about your older brother and sister.
HB: Well, we were all very different. My brother was sort of a silent woodsman. Every chance he got, he’d go out into the woods and wilderly into and watch animals and heaven knows what he did out there. Not much. He always has been that way. In fact, he’s alive today, he’s ninety-one. He lives in my mother’s home. We inherited my mother’s old family homestead. His health is pretty good.

LC: That’s incredible. That’s very good.
HB: But I don’t get to see him very much. My sister died. She married and has two daughters who are very close to me.

LC: Where do they live?
HB: They live in Albuquerque. Now they just recently sold the home we were in, the one I was brought up in and came to Albuquerque. One of them, the older one,
she’s fifty-nine, is a flight attendant for JetBlue. She’s been a flight attendant all her life. She was with Eastern until they folded, with Eastern I think twenty-seven years. They folded. I think she went with JetBlue when they opened up.

LC: Good for her.

HB: Yeah, she did good. Then her sister who was about eighteen months younger than she is, married and has one son. She was a civil, something in finance with the government; the Air Force something to do with their travel vouchers and their fare. I don’t know exactly what she did do, but it was a fairly decent job and she’s retired now and she has one grandson.

LC: Both of these nieces are close to you and stay in contact with you?

HB: Well, they are very close. They grew two girls. My brother had five children, three boys and two girls. I don’t see them that much because they’re back, they’re living at the old family homestead.

LC: Sure.

HB: Bostonians don’t move very much. They believe in staying home.

LC: Well, it’s a beautiful city and so one can see why one would want to stay there, but so is California.

HB: Yeah, well I’m glad that I came from there, that I grew up there, but I’m glad I’m not there anymore. I never liked the cold weather and I still don’t.

LC: Yeah, the winters are quite something to deal with.

HB: Yeah. San Diego has the best climate that I have ever hit and I’ve hit a lot of climates.

LC: Well, I want to ask you a little bit about your own education. Where did you attend your grade and elementary schools?

HB: Grade in elementary and junior and high school were all in Lowell, Massachusetts. Then I went into nursing and that was at a hospital school.

LC: Where was that Helen?

HB: St. Johns Hospital.

LC: Is that right there in Lowell?

HB: Yes.
LC: Okay. Now how did you decide to make this jump to nursing? What influenced you?

HB: I haven’t any idea, not the faintest idea what came to me, but Mother said that I announced I was going to be a nurse. The family was flabbergasted at that, but that’s what I was going to be from the time I put—and I don’t remember anything else ever entering my mind. But not only that, I was going to be a Navy nurse.

LC: Now where did that come from?

HB: I don’t know. At that age, I didn’t even know the Navy had a nurse corps.

LC: By God, you were going to get in if they did it sounds like.

HB: I haven’t the faintest idea where it came from. They didn’t either, although we didn’t live very far. We’re only about thirty-five, forty miles from the ocean. I had no contact with the Navy. In no way and none of my family, my mother’s brothers in World War I, they were Army. My father of course because of his health never got to go any place. So I don’t know. We never had any Navy, but there I was going to do that.

LC: Somehow you had the bug.

HB: Yeah, I don’t know. Somebody must’ve said something, I don’t know.

LC: Well, let me ask about going to St. Johns. Tell me what the curriculum looked like. Were you trained on the job?

HB: Well, no, we had classes. We had regular classes. The year that I went in, we had a small class of course, which always helped because the state had changed its laws for educational requirements before you went in. You had to have more languages. You had to have more in science. A lot of the girls were not. There were no boys. We didn’t have any male nurses at that time. We just didn’t know why we had so few. I think there were only fourteen in the class to begin with. So that was a help I think and not having so many—it meant more work for us of course. We had to do it all.

LC: Right.

HB: In those days, we didn’t have even cleaning people. I think there were one or two people to clean, but we did everything.

LC: Now what year did you graduate from high school?

HB: I graduated from high school in ’36 and from St. Johns in ’39.

LC: Okay.
Not only did they require extra courses, but they required that the instructors be better educated. They didn’t have enough in the nursing—it was the Sisters of Charity down at Conrad, you probably don’t know them, but they’re the ones with the great big hats that float, they look like angel wings floating. It started in Europe, St. Vincent de Paul. Their habits were different and they were different, but all they had to, hurry up and get teachers that could meet the state requirements. So they just, like nuns always do, very resourceful, they just converted some of their teachers in their schools who had degrees and made them into nurses real fast.

LC: Uh-huh. Right.

HB: And it worked.

LC: Very smart.

HB: Yeah, it worked I think. We had one that was the director of the school and I mean she really was something.

LC: Tell me about her Helen if you can.

HB: Pardon?

LC: Tell me about her if you remember anything about her.

HB: Well, she sat in on all our classes to make sure that nobody slipped up on what they’re supposed to do.

LC: Right.

HB: She saw to it that we studied. I didn’t take, I never cared much about mathematics. Nurses are noted for that. They’re not too good at mathematics. I skipped, I didn’t have any algebra and I didn’t have geometry and I didn’t have trigonometry. I took all the courses I wanted. I loved history and I got the history prize from high school because that’s what I took, I had all kinds of history. In my senior year, while I was carrying a little black bag, in those days, they put us out with the public health nurses. We had to go out and we had our own roots and that to do. Even the home deliveries we did. Student nurses don’t get any of that stuff today.

LC: No, that’s right.

HB: So when I was doing that, I was supposed to go down to my lunch hour, if I ever got a lunch hour and go to high school and take my mathematics. So I did. I took
algebra and geometry. I thought that was enough. So for one whole, two semesters I had
to go. That wasn’t easy.

LC: No.

HB: Another, of course, this is back in the old days, to tell you about nursing then
and now is just two—there’s no connection, no similarity.

LC: But that’s why it’s so interesting.

HB: Even if we were on night duty, we had to get up in the daytime for our
classes. It’d be nothing to have a class in the morning and you go back to bed and then
you get up again at four in the afternoon or you might have one in the evening. You had
to better be there too and you better have already done your work on the wards and take
care of your patients. They better be in top shape before you left for class.

LC: So you just had to arrange it and get it together?

HB: Yes, but it wasn’t hard. We liked what we were doing. There’s a
difference, we didn’t do it just, we didn’t see the future. I never thought of graduation. I
thought this would go on forever. We just didn’t—we liked what we were doing.

LC: Helen, tell me about the visits that you went on with the public health nurses,
what—?

HB: Oh, well, you know, it was the Visiting Nurse Association and you carried a
little black bag with all the things in it that you needed. Of course, largely it was in the
slum areas that you’d go. Low because of all the mills, we had a lot of immigrants. We
got to know a lot of the different sections of the city. You’d walk down the street and the
people in the tenements up above would be shouting to you, “You better come in here,
Johnny’s got a bellyache,” or that kind of thing. Someone would be going into labor.
Although doctors were supposed to get there, very often they didn’t get there on time so
that we had deliveries on our own if we weren’t intended. Although before we went onto
the district nursing we called it, you had to have deliveries in the hospital, do them
yourself so that you were ready to take the public health situation. We also had
psychiatry, which was unusual in those days. We went to Baltimore, Maryland, for our
psychiatry, three months of psychiatry.

LC: What did you do there?
HB: Oh, we had a wonderful time because they were nowhere near as strict as our home hospital was, our home school. We had classes. We had that, but you know, we were eighteen, nineteen and we just enjoyed the patients. They were loony of course and do crazy things. I know one time I had a couple of my patients out. We had a grove that we would take them out in the daytime for exercise. One of mine went up the tree and wouldn’t come down and I was told stay here till you get her. So I sat out there until about ten o’clock, she finally decided to come down. I was afraid I’d go to asleep while she would up in the tree. I mean, that’s just one of the little things.

LC: Oh, that’s wonderful, I mean, was this a hospital there in Baltimore? Was it—?

HB: Oh, it was a psychiatric hospital.

LC: Do you remember the name of it?

HB: Well, we called it Mount Hope Retreat, but now it’s called Reisterstown Institute. It’s there. It’s still there.

LC: Really?

HB: I don’t know much about it, but we thoroughly enjoyed it, but we learned a good deal too. But the treatment of mental patients and these were really mental patients. They were just having, they weren’t just depressed.

LC: What kinds of things now that—?

HB: They couldn’t help themselves.

LC: What kinds of problems did they have, what kinds of, now that you know the modern terms and so on, I mean, who—?

HB: Well, some of them were bipolar and their manic stages. Some of them I didn’t think ever left the manic stage. We had a few who were drug addicts and had really affected their problems. Then there were others that were just—we didn’t have genetic things, like we didn’t have children with birth defects and that kind of thing.

LC: Right, these were adults that—

HB: Some mental hospitals had. Of course, we had several nuns and priests, there were quite a few of them there too because it was run by the same sisters.

LC: Sure, right.

HB: The Sisters of Charity.
LC: Now did you with the other student nurses, did you gals have fun too while you were there?

HB: Oh, sure.

LC: What kinds of things? Did you go into Baltimore and have fun or—?

HB: Oh, we would go—one of the things we did was go to Annapolis, we were invited down for dances, when they had a dance or something like that.

LC: How wonderful.

HB: Yeah, so it wasn’t that—but it was more freedom. We could go out and get on a bus and go someplace. It was different from our home thing where we had patients, and fresh operatives and that kind of thing. Remember, in those days, operative, we had a lot of appendectomies and that kind of thing. Now you don’t hardly ever hear of them. If you had a patient that had a hernia, you kept them in bed for two solid weeks. I mean, they didn’t even get up. You had to bathe them and bedpan them and all that kind of—same with postpartum patients, post-delivery. They stayed in bed for two weeks. I mean, it meant a lot of work.

LC: A whole lot of work.

HB: Yeah, we scrubbed them all everyday.

LC: You scrubbed them. You had to lift them I would imagine.

HB: Yeah, it was different. It was really—it was fun too.

LC: Well, it sounds like you were getting quite set on nursing as a career.

HB: Oh, yeah. When I first decided I was going to be a nurse back in, what was it, two, three, four, something like that, I had decided on the career then.

LC: Now this is in the 1930s, certainly a lot of young women your age were looking around trying to get married.

HB: Well, I never thought I’d put it off too long. In those days, if a nurse was married and she came to work, of course, they didn’t hire them. They didn’t have any money. It was the depression years. We looked down our noses at them. We thought that they married a drunkard or something and they had to go to work. That’s exactly what we thought.

LC: Really?
HB: Yeah. The same thing about teachers, that’s what they thought. If they got married, there was something wrong with them.

LC: Something was wrong.

HB: Something wrong with the husband, we always thought it was the husband. We blamed them. Then later in the Navy in those days, nurses were the only females in the Navy.

LC: Yes ma’am, that’s right.

HB: With all those men, I could never make up my mind which one I wanted.

LC: Well, I bet you had plenty of offers would be my guess, but—

HB: Oh, yeah, but you can’t have—they were all wonderful.

LC: Well, sure, that’s the thing.

HB: Enjoy it. I don’t miss having a bunch of grandchildren coming around now. Although, I wouldn’t mind marrying someone that had some grandchildren.

LC: Right, but you don’t—

HB: Didn’t have to take grandpa with them.

LC: But you don’t feel you missed anything in that department.

HB: Pardon?

LC: You didn’t miss anything in that department.

HB: No.

LC: Not so much.

HB: I didn’t miss anything.

LC: Well, it sounds like you were a pretty heads up gal. It makes me wonder in the late 1930s when you were at St. Johns in your training, were you paying attention much to politics or world events?

HB: Pay attention to what?

LC: Politics.

HB: Oh, lord yes.

LC: Yes?

HB: In Massachusetts, you don’t pay attention? Heavenly days, not with the Kennedys around us.
LC: That’s right. What do you remember as being important issues or things that you paid attention to?

HB: Well, of course, Roosevelt was in for my time I was in training, I don’t remember.

LC: Yes, you’re right. What did you—?

HB: I remember Hoover.

LC: You do?

HB: Before I was in school.

LC: Yes. What did you make of him?

HB: I thought he was a very decent man, an intelligent man. He looked kind of cuddly I thought. But with the depression, it didn’t seem like he had any chance.

LC: Yes, he got kicked out.

HB: Yeah. When Roosevelt came in, I was a little leery of him at first, but things got better.

LC: Why were you kind of suspicious of him?

HB: I felt that the one thing I did feel about him and I felt the same way about Kennedy when he ran, that they had enough money behind them that they wouldn’t have to take the money out of the treasury personally. I thought that would keep them honest. I was naïve of course, but that’s what I thought. It was one of the reasons I’d vote for them. All my life, I was an independent. I wasn’t a Republican or Democrat. I voted whichever way I pleased.

LC: Have you always been a voter?

HB: Pardon?

LC: Have you always been a voter?

HB: Oh, yes, I’ve always voted.

LC: Have you? Okay.

HB: When I was at Washington University, a Kennedy was running for the house. Of course he was around the corner all the time. He had an uncle that lived in Lowell that we knew and that kind of thing. So I felt the same thing about him. I thought he was awful young and that he really hadn’t had enough experience in life, but he had enough money and that I didn’t think he’d steal from the government.
LC: Now was that John Kennedy that you mean?
HB: That was John.

LC: Yup. What did you know about the Kennedy’s as you were growing up in the 1930s? What did you know about them?
HB: Well, I knew that Rose Kennedy’s father had been in politics in Boston. Now politics in Boston are quite different from the rest of the country. Nowadays they put them in jail after they get in. In Boston, they put them in jail and elect them. That’s what they did with James Michael Curley. But it’s always been sort of an avocation being involved in politics.

LC: Did you have a favorable impression of the—?
HB: Sometimes good and sometimes bad. None of them have ever been absolutely right. Today it’s right along. Some things good, some things bad. And if I don’t like to thing, it’s bad. If I like it, it’s good.

LC: Well, what about, for example, what about Sen. Ted Kennedy now? What do you think of him now?
HB: Oh, I think he was the youngest in the family. I shouldn’t say that because I was too, but I think he was spoiled. I think he had an awful lot to try to live up to and he just didn’t have it.

LC: Yeah.
HB: I think he’s doing better now than he did.
LC: Mm-hmm. Well, as we go on, I’ll ask you for your opinions if you care to give them on some of the other folks.
HB: Yeah, he’s a good Democrat.
LC: He sure is.
HB: Yeah, that’s what he is.
LC: He’s got that part down.
HB: Yeah.
LC: Let me ask you how after graduation in 1939 from St. Johns—
HB: Well, in 1939, not knowing that the Navy had a Nurse Corps, but anyway, I wrote to Washington. I wish I had a copy of the letter because I didn’t know whether
they had or not. I told them I just graduated and I was ready to come. It must’ve shocked them.

LC: It probably did. Did you get a reply?

HB: Yes, I got a reply and they said well that was fine and they’d be glad to have me, but I did learn outright that they had a Nurse Corps in 1908, the sacred twenty. About the same time, the Army began their Nurse Corps a little bit before us. The main reason they had them in the Navy, at least this is my opinion, was because the doctors were tired of trying to train the corpsmen. That’s what they’d had before. The corpsmen took the place of nurses. But the doctors, they didn’t want to spend their time teaching them, so they brought the nurses in to teach them. The doctors are very good at that, even today. They discover something or they use it for a while and then they pass it off to the nurses to do. They still do.

LC: Yeah, I think you’re right. So they said we’d be glad to have you?

HB: Pardon? Well, they said yes, they would be glad to have me, but you had to be twenty-one years old and have two years of experience in nursing.

LC: Okay.

HB: Well, I wasn’t twenty-one. I was just twenty and I had to go a few months before I’d be twenty-one, but how was I going to get the two years experience? You can’t do that. I thought they were a little bit silly. What they were looking for were older nurses I think. They didn’t want any teenagers.

LC: That’s right.

HB: So a friend of mine was going to take a civil service exam and she had to go to Boston. We have to get on the train to go down, none of us drove in those days. So she asked me to go with her. So I went down with her and I sat out in the corridor or someplace, waiting room maybe while she went in to take the exam. This woman came out and said to me, “Don’t you want to take the exam?” I said, “Oh, I didn’t apply to take the exam.” I had no intentions of going to—the exam was for Federal Civil Service. She said, “Well why don’t you take it?” I said, “Okay, I will.” So I went and I took the exam, didn’t think anything more of it because by this time, I had graduated in September. By this time, it’s October and I was night supervisor for the hospital.

LC: Oh, so you had other things going on.
HB: Yeah. So, I’ve got a job, would take $42, I think it was a month. Night duty
and we weren’t living there, I was living at home. That was a big salary. But I had to
wait to get in the Navy. I had to get those two years. So I took the exam and never
thought anything more of it. Then one day they called and asked me if I wanted to go to
work. I said, “I can’t. I got a job.” They said, well they had a place, a new hospital, they
had built in Boston, it was under the Public Health Service. Now the Public Health
Service was under the treasury department if I remember this. I’m not sure I’m exactly
right. The Coast Guard and maritime service were under that. They weren’t under any
other service. At the time of war, the Coast Guard goes under the Navy. Well, I thought
that was a good idea since I was going to go to the Navy anyways.

LC: Yeah, right.

HB: So I went down there and it was a new hospital in Brighton just outside of
Boston. Because I’d had some OR (operating room) experience, I was made the OR
supervisor.

LC: That was fast.

HB: Yeah. So then at that time, we were having a lot of the—the merchant
seamen were, the German submarines wouldn’t waste a torpedo on an oiler, but they
would surface and use machineguns. They would fire it at the hull until the oil began to
burn. The tankers were coming from the Gulf up the coast and to go to Europe, at least
they were helping Britain on the other countries.

LC: Yes, ma’am.

HB: So these poor sailors would have to be dumped into the sea and they would
have to swim with this oil on the waters, it’s all lit up. We had these horrible burns.
They were some really sad ones and very often they had fractures and that kind of thing
too. So, I saw them all in the operating room and that kind of thing, so that I didn’t leave,
even when it came time for me to go, my two years were up to go into the Navy, I didn’t
leave. I didn’t feel like I could because by that time, all the nurses were graduates and
everything else, were going into the service, the Army. They didn’t have an Air Force
then. The Air Force was under the Army.

LC: Yes.
HB: They were either going into the Navy or they were going to go to the Army. So the poor Public Health Service was stripped. We couldn’t get a nurse around anyplace, well, not many. So I stayed with it, but then I could see, as it got down into ‘43, I could see that things were clearing up a little bit. We didn’t have as many, we didn’t have the Coast Guard anymore and we didn’t have much merchant seamen because the Germans weren’t firing on the tankers. So anyway, I stayed there and I was there for the time of the Coconut Grove fire, you probably don’t remember it, but it was a nightclub that burned. Oh lord, it was awful.

LC: Helen, tell me a little bit about that Coconut Grove fire because it is actually a famous incident.

HB: It was on a weekend of course. There had been a football game.

LC: Yes.

HB: It would’ve been worse if our side hadn’t won, but they didn’t, they lost.

LC: Who’s our side? Who were you rooting for?

HB: I can’t remember the sides anymore.

LC: That’s okay.

HB: Anyway, we didn’t get many—we got the Coast Guard after because it was a little farther out to bring them out, but we were ready for the emergency type of thing.

LC: Yes, yeah.

HB: So we did have some of the casualties.

LC: And these were burn—?

HB: Not a whole lot, but then after that I could see that the war was winding down, the Navy was getting farther and farther away. So when things quieted down at the hospital, I went ahead and put in for the Navy.

LC: Now was that in 1944?

HB: That was ‘4—

LC: ‘43?

HB: Hold on. I was sworn in June.

LC: Well, Helen, let me ask you before I pursue that, let me ask you about, if you don’t mind—

HB: Sure.
LC: About the merchant marine guys that you did see at the PHS (Public Health Services) hospital. Can you tell me how, what was standard treatment for burn victims at that time? What could you do for them?

HB: Oh, that was a bad thing. We didn’t have the sulfur drugs like we do now. We began getting sulfur, we had sulfur, not the way it’s treated now with it. We used Gentian Violet on some of them. It was a mess, it always was. The biggest thing was trying to prevent infection. I would bring them to the operating room, most of it was done in the operating room because you wanted to keep them from getting infected and cleaned and put under anesthesia, would have to clean them off.

LC: Yes.

HB: Of course, they had other things wrong too throughout that time.

LC: But this was hard—

HB: Burns are the thing I remember.

LC: Other veterans will want to know I’m sure and this would be very helpful if you can speak about it, how did you cope with this? How did you personally cope with it because this had to be very, very difficult?

HB: Yeah it was, but it didn’t—they needed it. In fact, they had to have something done for them. That’s the way I coped. I mean, it gave me a lot of satisfaction the fact that I could do something. I was doing important work I thought.

LC: To help these guys.

HB: Yeah. I can’t say I enjoyed it.

LC: No.

HB: But it didn’t, that’s what it was. I mean, it didn’t bother me to that extent.

LC: Did some of those men during the time you were there recover well enough to leave the hospital?

HB: Oh, yes, of course. A lot of them were a long way from their home.

LC: Oh, sure, yeah. They’d be from all over.

HB: Yes, they would leave and go out because they didn’t have to have—many of them had a long recuperation, many of them.

LC: Yeah.
HB: They have to come back and back to the outpatient. But I was surgery, I
didn’t see them. I never saw the outpatient.
LC: Did you go up on the wards after surgeries?
HB: Oh, yeah, I would frequently go up on the wards to see what came. I always
like bedside nursing best.
LC: Why?
HB: I just liked it. I liked the patient contact. Most of the patients in the OR
weren’t even awake.
LC: That’s right.
HB: So I really liked to see them and talk to them and do things that made them
comfortable. If I could, I’d go and do that. I liked nursing, I really did.
LC: Well, it sounds like you kept in mind your interest in the Navy.
HB: Yeah. Well, anyway, they sent me my papers and away I went.
LC: Now where were you sworn in? Where were you commissioned?
HB: I was commissioned by mail I think it was, yeah. We went in and all the
signing of papers and all that, your insurance and next of kin and all that value of legal
papers and that. We’re done. We went to Portsmouth, Virginia, which was a large
hospital. There were two biggest, San Diego, Oakland, and Portsmouth, Virginia.
Portsmouth is across the river from Norfolk. So that’s a very active and it still is Navy.
LC: Now what did you make of it? They must’ve issued you a uniform and
gotten all your paperwork in order. Was everything going like you expected?
HB: Yeah, it went along. It didn’t faze me. I just expected it to be that. I had no
way of knowing. A lot of the charts and that kind of thing for the Navy to patients’
charts, medical records were exactly the same as what we had in the Public Health
Service.
LC: Oh, okay.
HB: So I didn’t have to learn anything new there. Nursing is nursing wherever
you are.
LC: Now what post did they give you at Portsmouth?
HB: What?
LC: What job did they give you at Portsmouth? Was it in the OR?
HB: Oh, I went to the OR soon after, but I had some ward work before I went there.

LC: Oh, okay.

HB: We were only there for two weeks.

LC: Then what happened?

HB: Then I got orders to, I knew I was going to go to Charleston, South Carolina, from there. We didn’t consider that a duty station. We just went there for training. You know, the Marines taught us how to use the right foot when you marched and that kind of thing. We didn’t learn very much. We learned how to, you know, wear our uniform.

LC: Right.

HB: I still have two books. Naval Officers Guide and I can’t think of the name of the other one, but they’re old as the hills and they’re real funny to read.

LC: Oh, I'll bet they’re great. I’ll bet they’re great. So there you go, you’re off to Charleston.

HB: Well, then I went to Charleston and the chief nurse was a dear, Marian Olds. She had been a prisoner of the Japanese taken from I think Guam to Japan and then they were repatriated on the Grissom, on the Swedish ships, repatriated them before the war ended.

LC: Helen, how do you spell her last name?

HB: Mine?

LC: No hers, Marian’s.

HB: Oh, I think it’s O-L-D, you know, I can’t remember right now and I now it began O-L-D-O, I would think you put the—

LC: Probably just an S.

HB: Yes, I know, the next one’s an S. I think it’s O-L-D-S, O-L-D-D-S.

LC: What did she—did she talk about her experience as a POW (prisoner of war)?

HB: Not very much. She was sort of a matronly gal. She wasn’t very—to me again, by this time, I’m twenty-three I think.

LC: Yeah, you’re—
HB: And you know—maybe I was twenty-four, I don’t know. Anyway, at that age, I thought she was ancient.

LC: Right, right, but you knew that she had been held as a POW?

HB: Oh, well, we all knew that. Think we didn’t know, any nurse who had been a POW we knew real well. I got to know some better than that later, but we all knew them. The word spread fast.

LC: I’ll bet. Now you said that she was a good chief nurse.

HB: Very good.

LC: What made her good?

HB: She was understanding. She was down to earth. She looked after us. She sort of mothered us. She sort of had to because although I think I was more mature than the others that came in, but she really listened to them. Listening is a big thing.

LC: Yeah. She sounds like she was a good influence.

HB: Yeah, she was very good.

LC: Tell me about your work there in Charleston.

HB: Went to the operating room.

LC: What kind of casualties were you seeing?

HB: Well, we had the routine thing. It was a big Navy port and shipbuilding and that kind of work, you get a lot of accidents. So we had those and then there were a lot of Navy people around and young men, Naval schools and that kind of thing they had to go to in order to outfit the ships when they’re ready to sail. We used to go to the launching of ships quite often if we had time.

LC: What fun.

HB: Pardon?

LC: That must’ve been fun.

HB: Yeah, it was. It was. They always, today you go to a launching of a ship and I mean, it is a big deal. But in those days, they had it quicker. They were churning out ships as fast as they could and it wasn’t quite as ostentatious as it is now, but that was good duty too.

LC: Sure. Now how long were you there? How long were you at Charleston?

HB: Nine months I think it was and then another story.
LC: Yes.

HB: Well, some of that time, each district, Navy was divided into districts. It still is, but it’s a little bit different from what it used to be and as an admiral in charge. He had been the one that was in Charleston. I’m not going to mention his name.

LC: That’s okay.

HB: He’s long since dead. He was married and he had two young girls for a man his age. He had graduated from the academy of course. The Great White Fleet just before the war, I don’t remember correctly the date, but the Navy had sent a whole task force of ships around the world as a goodwill thing. He had been one of the admirals in charge of that Great White Fleet they called it.

LC: Yes ma’am.

HB: Yeah. He came from one of the top crust families in Virginia. So a lot of people passed through there. But anyway, one admiral came through and you would know him. He had a nurse on his staff. Now this is again, this is my personal opinion, don’t take it all of God’s truth because I may have seen it wrong.

LC: Yes ma’am.

HB: He had a nurse on his staff, although it wasn’t very long before our admiral had to have a nurse on his staff, but he had some kind of an allergy around his eyes. Well, he came up one day and just had the doctor see him. They decided, the surgeons or whoever was looking after him, should’ve been a dermatologist. They decided he needed a nurse to put cold compresses on his eyes. I guess because I had done some private duty while I was waiting to get in the Navy, I resigned from the Public Health Service in January and I didn’t go until June. So I had gone down with—I had some family in Florida in Palm Beach and just to have a little vacation. I had done some private because their family doctor was looking for nurses to take care of patients that he had. I knew him too and he called up with a sad story that he had someone that needed a nurse and they didn’t have anybody, would I go and take care of her for a couple of nights. So I said, “Sure, I’ll do it.” I could always use the money.

LC: Sure.

HB: So I went and did that. Grace Moore, she was a singer. You’re probably too young to know. Anyway, she did some overseas work. But anyway, this time she had
something wrong with her. She was staying at The Breakers, which is the top hotel on
Palm Beach.

LC: Yes ma’am, The Breakers.

HB: I worked there and I had a wonderful time.

LC: The Breakers. How could you not have a good time?

HB: Yeah.

LC: Yeah.

HB: She just needed me anymore than nothing needed. Then I did one other
patient of his. But anyway, that was my private duty experience. So when they needed
somebody for this admiral, they wanted to have—and let’s forget about the fact that I was
the OR supervisor, the only nurse in the operating room and long schedule. I went over
to take care of him. I put hot compressors on his eyes in the morning and he’d go off to
the office. He’d come back at noon and I’d put some more on him. Anyway, it was just
a cushiony job.

LC: Yeah.

HB: I had to keep running back to the Nurses Corps to get clean uniforms. There
was no way I could get them. I was changing uniforms all the time to go. Sometimes I’d
go with him when he had to do an inspection tour and I’d sit up on the desk with all the
big Whigs. I had a good time.

LC: It sounds like it.

HB: Yeah.

LC: Now do you remember any of those bigwigs? Were they—?

HB: Yes, I remember them.

LC: Would there be any names there that we might remember?

HB: Well, there would be, but I can’t say them.

LC: Okay.

HB: My memory’s fairly good at that time. Both of these people are all dead.

LC: Sure, sure. But there you were right in the middle of—

HB: I don’t say.

LC: You were there in the middle of all the hoy-paloy.
HB: Yeah. The admiral would get films that had been taken on the battlefields and out at night, we’d sit there and watch these films. That was an interesting time. Not many people have got that kind of opportunity.

LC: You’re so right. What did you think about the progress of the war? Were you—?

HB: Oh, we were winning at that stage.

LC: Yes.

HB: We knew we were going to win, not like now. I don’t think we’re going to win anything.

LC: It doesn’t look too good.

HB: We knew right well we were going to win.

LC: Yeah. Where were you actually when the war ended?

HB: I had come home on leave, but I had gone someplace else.

LC: Oh, where did you go in between?

HB: Well, I was in Charleston for nine months.

LC: Yes ma’am.

HB: The higher ups in Europe tried to get their sons out of Europe when the war began, back they were fighting up from ‘38 on. The big Whigs, the royalty in that they wanted to get their young men out. So most of them got across the channel some way or other and they were there in England. Then when they were getting ready for the invasion and the poor islands were sinking with all the troops they had. They had to make room for them. So they took this battalion of Royal Netherlands Marine Corps who were sons that had gotten out of Europe before the Germans took over. They brought them to the United States and they were down at Camp Lejeune, which is the big Marine base on the east coast.

LC: Yes.

HB: Well, the closest habitation to Camp Lejeune is Jacksonville, North Carolina, at that time. It’s much bigger now, very nice, that consisted of about four filling stations and twelve bars. There weren’t many women, not with that number of men on Camp Lejeune. There were American Marines and the Netherlands Marines. So there weren’t many Netherlands Marines, but because they were different and they’re
very polished girls, what few there were, these royal Netherland Marines took care of that. Then the fights began between the American Marines and the Netherland Marines. So they figured the best thing to do was to move the Netherlands Marines and they went down the road a bit south of Camp Lejeune to an area that had been an Army airfield. But it had been abandoned, they used it for something else and there was some German prisoners of war in one section of it and a lovely beach. So they moved Marines down there. Well, they didn’t have nurses with them. I think if I remember right, they had a couple of doctors. But anyway, five of us got orders to go there and take care of the hospital, to open it up and do that stuff. I think there were five of us.

LC: What was the camp, the airfield? Did it have a name?

HB: Pardon?

LC: What was the name of the airfield?

HB: Oh, wait a minute. Was it Holly Hill? Anyway, that’s the name of it.

LC: Okay.

HB: It was no town really. Now it’s a big resort I think.

LC: Probably.

HB: Camp Davis I think it was, Camp Davis. It wasn’t the Army had it. There never was any name to it that I knew while we were there.

LC: How did they pick you to be one of the—?

HB: Pardon?

LC: How did they pick you to be one of the five who went there?

HB: That’s been a suspicion. I don’t know. By this time I’m a lieutenant JG (junior grade).

LC: With a lot of experience.

HB: I went there as the OR supervisor.

LC: Right.

HB: Me that liked bedside nursing all the time. That was a joy if ever there was anything because we didn’t have that—although the Marines managed, I mean, the Dutchmen managed to, they took unholy glee in turning over jeeps. They were the most wild bunch of people I’ve ever seen, more fun than a barrel of monkeys. So we didn’t have a hell of a lot of work to do.
LC: It sounds like you guys had fun.

HB: Yeah, oh, we had a lot of it. Now they decided the war was winding down and this is my interpretation of what happened.

LC: Sure.

HB: It may not be the strict thing according to the politicians of the United States or Holland. The queen and her family had escaped too from the Netherlands and were in Canada. They were going to graduate this bunch of roughnecks. They came down and we had a big graduation. It was all set up on the—the general that was head of the United States Marine Corps was down, lord help us, isn’t that awful, I can’t remember his name. Every Marine knows him, and I know it too, but I can’t remember.

LC: That’s okay. People can—

HB: Anyway, we sat out there on the dais with the queen and her daughter, Juliana, who later became queen and her two kids that had come from Canada and we had a wonderful time with them marching by. Oh, they were so good. Every morning when they were going out to do their drills, I’m regressing. This is all before the queen got there. Every morning they’d go out, they’d be singing at the top of their voices, and oh could they sing. It was wonderful, the best alarm clock I’ve ever known. But anyway, then we had a big party afterward.

LC: I’ll bet.

HB: Yeah, well, these were old wooden buildings. In the operating room, there was a knothole in the wall, well, knotholes all over, but there was a snake wiggling through one day. I went the other way. I’m not afraid of much, but I don’t like snakes. If they’d just sit still it’d be all right, but they don’t. So anyway, I was there and when we had a big sendoff party, sending them off to Indonesia, this whole group, because they wanted to, when the war ended, they wanted to be sure that they recovered. Well, the island had been freed. I mean, the Japanese had been pushed out. They wanted them to take back their colony, there’d been colonies of Holland. So they wanted to make sure that they didn’t get them back, that they lost them anyway. But they sent them over to take care of things. I can see why they lost them, they didn’t get them back. We had such a good time. We really did.

LC: That sounds like a very good duty.
HB: Yeah, it was, very good. I had always—the Navy had such a thing as they called the dream sheet. I don’t think they have them anymore, but if they want to go to a certain duty station, they call Washington and tell them. We always had a dream sheet. You had three choices. You put down where you’d like to go next when you were transferred. That didn’t mean you were going to get it. Usually you’d get someplace else, but I had always put down on my dream sheet that I wanted a hospital ship and I wanted to go, but I didn’t want to go north of the Mason-Dixon Line because I always was cold. I liked the south better. So anyway, I was waiting for the hospital ship duty, but the war was ending and I had to finish my education. I got some college after—I went to evening classes and weekend classes and that while I was at the Marine hospital in Boston. But I needed to finish my degree, that’s what I needed to do. So I was torn between it. So well, I put in to get out so that I could go to school. I planned on coming back to the Navy as soon as I got my degree.

LC: But why was it so important that—?

HB: But then just about the day before I was about to leave, I got orders for the ship, the *Consolation*. I was torn between it. But anyway, the best thing to do is to go get your degree and then come back. So that’s what I did. I went back to Boston.

LC: Did anyone advise you? Did you ask for help making a decision?

HB: Pardon?

LC: Did you ask for help in making that decision?

HB: Oh, no. Whatever decision they made was okay by me.

LC: So you kind of decided on your own.

HB: Oh, I always made my own decisions. I was brought up that way. Mother would say, “Now, if I were going to do it, this is the way I’d do it, but now what do you think?” and you’d have to tell her what you’d been thinking. Make a decision. she never would come help us to make it. You had to make your own.

LC: That sounds like very good training.

HB: Yeah. So you made your own. Sometimes she didn’t like them after you got them made. She won’t say anything. She would never say anything. I never heard that woman raise her voice, never.

LC: Your mother must’ve been very proud of you during this time period.
HB: Yeah, I think she was, but she wasn’t—it was nothing more than what I think she expected. She didn’t expound very much on her feelings about that, but you knew, I mean, she was a very warm person.

LC: She’d let you know.

HB: Yeah. She was a hard worker.

LC: Oh, yes ma’am.

HB: When she grew up, she didn’t have any hardships. She didn’t do anything. I mean, she didn’t have to work in the house let alone go out to work or anything.

LC: But as you’ve said, she had quite a bit of stuffing it sounds like.

HB: Yeah. She painted and she had had piano lessons and all that kind of stuff. She played the piano beautifully.

LC: Now was she glad that you were coming up to finish your degree?

HB: Oh, yes, of course.

LC: Did you live at home?

HB: Well, I commuted from Lowell to Boston University for one semester. Then I decided that wasn’t the thing, I was missing out on some things. So then I went with five others, we took on Commonwealth Avenue in one of these big brown stone places, no elevator. We took a couple of rooms up on the fifth floor. We had to wash our clothes, tear up food and everything else in this bathtub. There were no sinks. Oh, it was funny. On the floor below us, there were some foreign students that were going to Lincoln something. It was sort of a prep school for one of the universities. They didn’t know how to cook anything. So they bought the food and we cooked it on a gas plate. None of us drank in those days. Well, I had learned a little bit especially with the Marines, they drank rum, but we had a crock. My mother gave us a big crock that she used in canning at some time or other. Of course, we were on VA (Veteran’s Affairs), we were on a veterans thing. So at the end of the month or the beginning of the month when we got our checks, we’d all buy a big jug of wine and pour that into this crock. We’d throw in some apples and some oranges and some raisins and stuff and we’d have mold wine. The whole time I was in college I could smell this and hear it bubble, bubble, bubble. Oh, it was a fun time.

LC: Now Helen, is that where you were when the war ended?
HB: Pardon?
LC: Is that where you were when the war ended?
HB: No, the war ended, I had came home from North Carolina on leave.
LC: I see.
HB: But I was making up my mind of what I was going to do.
LC: Yeah. What was that day like?
HB: I had been home and then I went back again for discharge. I got discharged and then I went home.
LC: Did you have—was there a celebration on VE (Victory in Europe) Day?
HB: Well, I was just coming home permanently. The North Station was wild.
LC: I’ll bet.
HB: It really was wild. My mother had come to meet me. She had, I guess it must’ve been in the afternoon when she finished work because she worked in Boston. I met her there and then we went home and celebrated. We never celebrated very much, ginger ale.
LC: But that had to be a happy day.
HB: Oh, it was very happy, it was. I was happy, but all the ones that were coming home, a lot of them, it took a while. They had to come home on points and I had points, so I could’ve got out anytime. But they had to wait till they got down to their points. I’ve kind of forgotten how the system works, but some of them were very anxious to get home and couldn’t leave exactly when they wanted to.
LC: Can you remember what was going on at North Station that day?
HB: Oh, it was just loud. I mean everybody’s hoopla and a lot of people had more to drink than they needed and jumping around and all kinds of stuff. I’m sure it got rough.
LC: But you guys went home. Well, were you in school then later on when VJ (Victory over Japan) Day came?
HB: When what?
LC: When VJ Day happened?
HB: VJ?
LC: Mm-hmm.
HB: Oh, no, that was VJ Day when I went home on that leave.
LC: Oh, okay.
HB: Then I had to go back to get discharged and then I came home.
LC: I see. Now—
HB: I was already enrolled in school fulltime.
LC: How long did the rest of your schooling take?
HB: That was '46 and I started—or was that '47? I don’t know. I don’t have exact dates.
LC: That’s okay.
HB: I thought I took out this thing. Anyway I finished a year. I think it was about a year and a half maybe. Maybe it took—full semesters, I think probably was three semesters that I had to go because I’d had quite a bit.
LC: Yes, and—
HB: I didn’t want to go right back in. My degree was BS (Bachelor of Science) in Nursing Education. I wanted to get some teaching experience under my belt. I’d had some practice teaching in school, but not before I was responsible for it. So I wanted to teach in a university school. So I went to Yale down in New Haven and I stayed there for a year. Guess what I taught?
LC: Nursing?
HB: OR.
LC: OR, okay.
HB: Then for second year med students, I taught them sterile technique and technique, scrubbing, getting ready for surgery and that. That was another happy time. I had a wild time down there.
LC: What happened down there?
HB: Well, just I would have the students. I was teaching them what they would do in a med sterile technique and that kind of stuff. Some of them the first time, they had to scrub in with some of the surgeons. All they ever did was retractors at that stage of the game. I’d scrub in with them to give them a little confidence in that. Then I taught a couple other classes.
LC: But you had fun there?
HB: I’d teach you anything.

LC: You were very confident it sounds like.


LC: You know, that’s—

HB: So that’s confidence.

LC: It is confidence. A lot of young people, young women especially don’t have that.

HB: It didn’t bother me because I knew what I knew and if I didn’t know it, then I didn’t know it. So, there’s no reason for me to be anything but do it.

LC: Now you said you had fun in New Haven.

HB: Oh yeah, sure, with all those college kids around in that. Oh, that was really great. In fact, I had some great—some of the women—oh, and then I was, I don’t know what you call a house mother or whatever it was, but anyway, I lived in a place where they—it was an old, old house, Nathan Smith Hall. We had students there.

LC: Did you get paid for that or—?

HB: No, I got room.

LC: You got room, okay.

HB: So I’m a saver. I mean, I went through all the corners in that I came through the depression. Our family didn’t have much money.

LC: Yes ma’am.

HB: So I know how to go after the penny.

LC: So, but you had—

HB: I had coupons even though I don’t use them.

LC: But you had fun doing this?

HB: Yeah.

LC: Okay.

HB: Oh, God, yeah, I wasn’t even old. What was I twenty-two, twenty-four maybe. I don’t think I was that old. Maybe I was, I don’t remember. After that, I put back in to go back in the Navy, sent them a letter. In the meantime, we got to war with Korea.
LC: Well, what did you make of that when you heard of that?

HB: I was going to go.

LC: Really?

HB: I had orders, they sent me orders. I was to go to Oakland, California, and proceed to the USS *Consolation*, the same hospital ship that I had got orders to when I was making up my mind whether I was going to stay or go before. So that’s what I did.

Oh, and that was funny because I went out to Oakland. They had called back. There was something different about it. In Congress, they needed help of course because they had disarmed everything practically and they had let people go and that kind of stuff because they couldn’t afford them anymore. Now with a war on their hands, they needed everybody back again. So they were calling in the Reserves. Now the Army and the Navy had two different ways. By this time, the Air Force had separated from the Army and they were having a separate, they had a separate, the Air Force Corps. So they pulled back and they called in the Reserves and I was Reserve. Towards the end of World War II, they didn’t give people a regular commission. You got a Reserve commission. Then you could convert later. But see, I left to go to school, so I was still in the Reserve. They didn’t call me back. I had volunteered before they ever had a war to go to.

LC: So you were already in—?

HB: So I was still a Reserve and I remained a Reserve the rest of my Navy career because by this time I had a heart problem. It didn’t bother me any and I didn’t meet the Navy standards. I had a murmur. It didn’t bother me any. I was doing the same kind of thing and getting the same money. So it didn’t bother me any. In the mean time, I had also had a fibroid, uterine fibroid removed while I was at Yale. So that was a thing I guess and I didn’t bother, I could’ve rebutted it I’m sure, but I didn’t bother with that.

LC: Well, they wanted you back. That’s for sure.

HB: Yeah, that’s right, at that time. So I came in under, I wasn’t one of these Reserves. But in the mean time, they had changed the uniform. We all show up out there at Oakland and you never saw such a motley crew in your life. We all had different uniforms. Some of them didn’t have much of a uniform. Some of them had none and some of them were married. Some of them were pregnant. You don’t get pregnant during the service, that’s not good.
LC: No.

HB: Nowadays, they have them and they have pregnancy uniforms, maternity uniforms, but not in my day. You got out on your ear right away.

LC: Right.

HB: But anyway, it was a motley crew.

LC: About how many were there?

HB: There must’ve been two hundred.

LC: No kidding?

HB: Of course, they were reporting at other places too, but this was—they really didn’t need us for anything. We just flubbed the dub. To save time, we’d go shopping and do that. But that didn’t last very long because then the Benevolence sank, the hospital ship and the commander, the harbor, they rode on trial runs.

LC: Yes, ma’am.

HB: It went down. It hit by a freighter. Oh, that was something. So word got to the hospital over at Oakland. You know San Francisco, Oakland area?

LC: Yes I do.

HB: Yeah, well, it’s a little travel and more so then than now getting from the docks over in San Francisco to get to the Naval hospital. But anyway—

LC: Now do you remember, Helen, do you—?

HB: They had closed up. They had reduced everything. So they had closed some of these wards. Some of us were called and told to go over and open up these wards and get them ready because we’d be getting the group from the Benevolence that they had rescued. Only one nurse was killed in that one. She drowned. So they came in and oh, what a wet dragger group you never saw in your life. I’ll tell you this, but it’s not the general population. Every place they had gone when they got them off the ship and got them onto a smaller ship, they gave them brandy or something. Most of these people didn’t know that much about drinking, I don’t think so.

LC: Sure.

HB: Then the next place they got, they gave them some more to warm them up because they were frozen and they were still in these clothes just wrapped up in blankets. By the time they got to us and the newspaper people with all their cameras and that got
over to this ward that I had opened up with a few other people, we couldn’t get them to quiet down. They were hopping from one bed to the other and jumping around. Not everybody, but most of them. Once the heat got to them and they absorbed all this rescue liquor they had been given, it was hard. We couldn’t dare let the newspaper people in because they’d lose—I had a hard time capturing them myself, but that was a night. That really was a big night.

LC: Well, did you, were there people who were actually injured in that that you had to take care of?

HB: There weren’t many injuries.

LC: Okay.

HB: Weren’t many injuries.

LC: Yeah.

HB: But the shipped rolled over on its side and they had to go down, the side of this sloping ship into the water. The surgeon, the chief surgeon had got a rope and had tied all the nurses together, thought that’d be better to stay together, but right, they couldn’t get down the side of the ship roped together. So the ship, that had come or whatever it was that was trying to pick them up was throwing knives up to them and they were cold and they couldn’t catch them. This one gal, she was pretty young. She just panicked with it evidently. The ship was—the rescuers were throwing knives up to them to cut the ropes so they could get them. They couldn’t take them all at once on this string all tied together.

LC: No.

HB: If they got into the water and went down, they’d pull the others down in with them.

LC: Yes.

HB: So anyway, that’s how she got lost. But they all said that was the worst part of the whole thing.

LC: It sounds horrible.

HB: Yeah, but we don’t say that out—

LC: Yes, I understand. But you helped, you were able to help some of those survivors though.
HB: Oh, yeah, but they were all right by the next day.

LC: Sure, sure.

HB: The newspapers were wild. We had more trouble getting rid of them than—
not getting rid of them, but we didn’t want them—they were tired. They were cold. We
wanted to take care of them and not have to have them, a microphone shoved in their face
right off.

LC: Yes ma’am. That was the right thing to do.

HB: Yeah, we did that, tried.

LC: Now you already had your orders for the Consolation.

HB: Well, then right after that, they needed the space. There were six of us that
were going to the ship.

LC: Okay.

HB: So 53rd Street is the District Headquarters in San Francisco. We were over
in Oakland. So we were waiting for transportation. Well, before that, in World War II, I
have to keep going back if I’m going to tell you this story.

LC: Yes ma’am, go ahead. That’s fine.

HB: When they were going to send people overseas and if they needed them right
away, they’d give them priority orders. That meant you go, when you hit a transportation
point, they take you right away and make sure you go. You don’t have to wait. Well,
they forgot to do that with us. The ship was out screaming because the Consolation had
been at, it was the only hospital ship in commission when the Korean War started. It had
been launched in the end of World War II. It had been at dockside resting on the coffee
grounds probably in Norfolk, Virginia. Once a year or two, it would go out on
maneuvers with the fleet, just training maneuvers. They’d get back and then they acted
as a local clinic for people coming in and out. Well, they had to hurry up, get going and
they had to pick up supplies and that on the west coast. They had to go down through the
canal, come up. They were going to get a staff. So they gave orders. I got my orders,
the thing started, I think it was the twenty-third of June and I got my orders on the third
of July to get out there to get going. Well, the ship got there before we did and it had
gone. So we had to go over by plane (accidentally pushes button) and waiting like I just
told you about the business, the priority thing, (accidentally pushes button). Well, there
was no priority, (accidentally pushes button). So we were staying at the Marine Memorial Club. It’s a hotel. It’s military and having a fine time. We were having a good time staying in San Francisco. But we waited and waited and finally they got the thing straightened out. We went on Caroline Mars, which were Sea planes, great big Sea planes that take off on the water and land on the water. We had to go to Barbers Point. So I don’t know, but we had to get across the ocean (pushes button) and this was a prop plane (pushes button). It went from island to island and that’s what happened.

LC: How long did it take to get out to the theatre?

HB: Well, we went from (pushes button) San Francisco. Something’s clicking in my ear.

LC: Yes, I can hear it too.

HB: I don’t know what it is. This guy put a fresh battery in. Oh, I think it’s all right.

LC: Okay

HB: Anyway, so we went. It took us all night to get there and we landed at Barbers Point. Then we had to stay overnight there to get another plane. The housemother of the quarters that we stayed in, she was funny. We came in and she said, “Oh, you poor girls.” The plane with nurses going to Yokosuka was in Japan, which was also strapped for nurses because they had to bring their patients from, there were no hospital ships. We didn’t have a hospital in Korea. So they were bringing them to Japan. That hospital had to be expanded on the double. Those nurses would come after us and they had got priority ratings. A plane went down and they lost nine of them.

LC: Oh, dear.

HB: So we were right behind it. The housemother was crying all over the place because they had gone through the night before. She kept saying, “Oh, they had such lovely luggage.” That’s all she ever told us was what wonderful luggage these people had and it got to be a song and dance. Oh, what lovely luggage. We felt that ours wasn’t so hot. You know what a footlocker is?

LC: Yes, ma’am.

HB: Yeah, well, there was six of us and we had six foot lockers. I don’t know how many other bags and stuff like that, but we had them.
LC: But in fact, just—
HB: So we had to have a plane take us and our luggage.
LC: Well, just to clarify, nine nurses were killed in this plane crash?
HB: Yes.
LC: Do you know where the crash happened?
HB: Uh, just give me a second.
LC: Sure.
HB: It wasn’t Guam. It was—where all the birds are at, the gooney birds, was
one small island. We landed on that too.
LC: Wake Island or—
HB: Not Wake. Give me a few minutes.
LC: That’s okay. I just wondered where that crash happened.
HB: It was off that when they were coming in for landing.
LC: That’s terrible.
HB: But anyway, all we were doing—we felt very bad because we didn’t have
lovely luggage.
LC: Well, right.
HB: Well, we took off the next day to see the—we weren’t going to fly till that
night, so we took off to see Hawaii. Most of us hadn’t been to Hawaii. So we did that.
Then a friend who I—it was in Oakland while we were waiting or in San Francisco when
we were waiting for this, but I met this friend Marian Hare. She’s up in—she always
lived in Oakland. After she left the plains that the farmlands in Minnesota and we had
been staunch friends ever since. She’s up there now. But she was with me and she
would leave things behind all over the place. So by the time we got to Guam, oh, wait a
minute, I’m getting ahead of my story. She had lost all her shoes. I had two pairs of
shoes and she’d wear one pair and I’d wear the other. Then we’d switch. It was quite a
trip.
LC: It sounds like it.
HB: Now where was I? So then we went up and this plane was a real passenger
type plane. It wasn’t the one with bucket seats, the one we were going to go the rest of
the way. It was a real plane with seats. We thought we were lucky. Well, we no sooner
got up in the air than this stuff began to fly across the windows and oil all over the place.

We had almost gone to the point of no return, when you get to a point where you couldn’t possibly get ahead to where you’re going or you go back, that’s part of no return. You know what happens when that happens.

LC: Yes, ma’am.

HB: Well, anyway, we got turned around and got back to Barbers Point and we made it. So then we had to clean the plane.

LC: You did?

HB: Well, what had happened when they had refueled the tank, the chain that held the screw top thing had got caught between the stopper and the place it was supposed to cover.

LC: Oh, jeez.

HB: That’s what happened. There was no damage to anything.

LC: But oil was everywhere.

HB: Yeah, it was everywhere. So we had to wait till the next day to go. So we went and then we went from there, the next stop was Johnson Island. Nobody ever heard of that. I’d never heard of it before, haven’t seen it since. It was hotter than anything.

We had to come down—coming down on it looks smaller than a deck of a battleship, of a carrier. It looked smaller than that, the airfield did. There was a flousy, floozy blonde in a shack sort of and they had Wimpy’s Hamburgers with a sign on the thing. There were no other buildings. I mean just, well, sort of hangers and that kind of thing, nothing else, no natives, no nothing. We came down and got refueled and got a Wimpy’s hamburger, took off again for—was it Guam—isn’t that awful? I thought I had looked over this stuff, but anyway—

LC: That’s okay. Don’t worry.

HB: Then we came into Guam.

LC: Yeah, probably.

HB: As we came in, of course, everything was active. Planes were going everywhere and this stuff in Korea had started. It was a mess. As we came in, a truck backed into the side of the plane. So we had to delay there for about—it took quite a while to get it repaired.
LC: Did they have a billet for you to stay in?
HB: Kwajalein is the name of that island.
LC: Oh, Kwajalein.
HB: Yeah.
LC: Yeah.
HB: So we, I forget what Marian left there, but she forgot something. We had one towel between us. She lost that at Kwajalein. Then we went onto Kwajalein and then we were told to go to the ship. We weren’t told to go to anyplace else. So we went from Kwajalein to Okinawa and then to Japan. We landed in Tokyo about two o’clock in the morning. By this time, we were pretty tired. They had a bus, a native bus for the Japanese who spoke absolutely no English. We were the six on this plane, but there were about thirty other Naval officers on the plane with us. We played canasta. Canasta was popular then. We played that all the way across the Pacific. But we got into this bus run by I don’t know what, I think it was charcoal. We putt-putted down the road to Yokosuka, which is about oh, I’d say it’s about thirty, thirty-five miles. God knows I’ve driven it enough, but I can’t remember.
LC: It’s not too far though.
HB: We got there. There was no place for us. They didn’t have any place at all. The bus would go around and we’d stop. The officers with us said, “We’re not leaving you until you get a place to sleep.” We went to every building waking people up with this chug-chug bus. Finally, we got to the hospital again and told them that we had to have someplace. So one Medical Service Corps officer said they had dependents over there, that he and his family went to visit with friends I don’t know what, but we got in there and got to bed. The next morning was Sunday of that morning. We got there about—we got to bed about three or four. That next morning was Sunday, so we wanted to go to Mass. So we got up and we went to Mass. While we were in church, the chief nurse at the hospital sent somebody over. We had to leave right now. We had to get to Tachikawa to go get a plane to go take the ship because the ship wasn’t going to come in through Yokosuka. It was in Sasebo, which is down on Kyushu, the south island. Well, so we hot footed over, grabbed our stuff, got in a bus. We had sort of a jeep with a weapons carrier behind us loaded with six foot lockers and I don’t know how many bags
and off we go to Tachikawa. Now we didn’t know where Tachikawa was. We didn’t know what we were doing and we had a driver who spoke absolutely no English. We go up and up into the hills and we’re passing all these little Japanese huts and all that kind of stuff. People were still living in the cliffs in dugouts and the cliffs and that. Although it’s about four years after the war was over, Japan was still in ruins. Well, we get to Tachikawa. As we get off, this bus drops us. We didn’t know where we were going. They dropped us at the airfield. As we got out, a guy walks up and says, “The last person I expected to see is you.” It was an old boyfriend of mine, a flyer. He was doing something, he was just out looking for something that day. So he took us in charge and found us a place to stay. We had to wait for another couple days. They weren’t anxious to have us leave and we weren’t anxious to leave either. So we get going. He takes us to the next stop when we went to—I don’t remember what one we went to. Then we flew to—no, we took the train to the next station, (inaudible), I think. I had somebody else there that I knew, a full colonel from Massachusetts. So he got us some rooms and then we got on the train and went to Sasebo, which was a Naval base.

LC: That’s where the ship was?

HB: No, it wasn’t there yet.

LC: It wasn’t there yet.

HB: No. This is still in—we’re still in Japan. The ship is still in Korea. So we had to wait because there’s no way to get us there because they didn’t have an airfield that was big enough to take a plane that would take us there, but that’s where we went. We were there for four or five days. There was an Army hospital there, not much of a hospital. But anyway, they had an empty third floor. So we were up there. Every time we turned around, there would be somebody else, these Japanese workmen who seemed to be working in the head. Every time we wanted to take a shower, there’d be somebody there working. We would just drape a towel over his head and we’d go take our shower. Oh, that was funny. A lot of things happened at Sasebo. It’s a beautiful, beautiful, one of the prettiest harbors I’ve ever seen anywhere.

LC: Was it very busy at this time with—?

HB: Pardon?

LC: Was it very busy at this time with lots of ships moving in and out?
HB: A lot of stuff going on.
LC: I’ll bet, yeah.
HB: Well, there were a lot of things that happened at Sasebo in the few days we were there. I don’t know. Somebody else we met took us to an admiral’s—first, the Japanese do not—this is again past then. They don’t very often entertain in their home. They entertain in geisha houses or something similar. But this guy took us to an admiral’s house who had been in charge, had a big job in the thing. He had a wife and three kids. He invited us to his home.
LC: Now this is a Japanese admiral?
HB: A Japanese admiral.
LC: Yes.
HB: They had something to do with the—the Naval officer we met had something to do with recruiting their spaces that they were going to use, the buildings that they used and the docks and things that the Navy needed. So he took us there and they entertained us. That’s unusual because you’re not usually entertained in a home. The kids were fascinated with us. They had been schooled when all the war and that and they had seen what the Navy, our Navy, U.S. Navy people in the city, but they’d never seen a Caucasian woman. Oh, they were cute, they really were. That night, then they put on music for us and we played with them and then we got one of them to dance with us. Then they wanted their father to dance with their mother. Now that was an unheard of thing because the Japanese don’t do that kind of thing. But anyway, he did. The admiral danced with his wife. His wife was just, oh, she was just mortified. She had never done it before. The kids rolled on the floor laughing. They had such a good time, such a good time.
LC: What a wonderful experience.
HB: Yeah. Another night, we went to a geisha house. I had very black hair and I was scrawny. Not now, but I was scrawny then. The geisha, after we had—they used separate rooms and they took me out. We did the coal minors dance and all that and we learned all the tricks of the geisha, not all the tricks of the geisha, but we learned some of them. They dressed me up in their kimonos and did my hair the way they do theirs. They had me go back. The way they do, you have to get down on your knees and slide
the door open and you go in and then you slide the door back. You have to get down on
your knees to do all this.

LC: Sure.

HB: Here’s this awkward American doing it. So we had such a good time.

LC: It sounds like it.

HB: But we weren’t going. We knew the ship needed nurses and wanted us, but we had no way of getting out of there. The Missouri came in. The admiral on that said he was going back to Korea as soon as he got his supplies and that he’d take us. Oh, we were all for that. We wanted to go on the Missouri.

LC: Yes, ma’am.

HB: Just as we were going down, we were on the dock waiting to go aboard and word came the ship had left Korea, our ship, the Consolation had left Korea and was headed for Yokosuka with a load of patients and for us to go back to Yokosuka. So we retraced our steps across Japan. We hadn’t seen Tokyo yet. So we got to Tachikawa and I said, “Well, lets go. With all this waiting around we’ve done and that, that ship’s not going to be there, lets go stay in Tokyo for a couple of days.” We went to Tokyo. Every time we stopped some place, we’d go to the pay office and get more money because we were running out. We stayed at the hotel, the Imperial Hotel, which is, it’s the hotel that Frank Lloyd Wright had built.

LC: Oh, yes.

HB: I forget now exactly what the name is. They pulled it down. It’s not there anymore. So we had a wonderful time. Then we got on the train. By this time we’re doing it all by ourselves and it’s killing us.

LC: Yes.

HB: We got back and as we pulled into the station in Yokosuka, there’s the ship out in the harbor and it had anchor.

LC: You thought, “Well, now we’ve got to get down to work.”

HB: Yeah.

LC: Did you ever come across any Japanese who disliked you?

HB: No, no. I never saw one. They are the politest people in the world. I never saw one, even the armed forces, any of them, never a word either way.
LC: I know you spent a lot of time at Yokosuka later.

HB: We didn’t that much.

LC: Later on though.

HB: Well, when I went back for tour duty for three years.

LC: Right, right, right. But that’s very interesting. Well, tell me—

HB: We only went back to Yokosuka a couple times. If you had head patients, you had to go back because in that time they didn’t fly very well.

LC: Why?

HB: We had quite a few head cases.

LC: Why was it difficult to move them by air?

HB: Well, because of the pressurized, it just didn’t work very good. They don’t have—the cabins weren’t—I don’t know why, but they just didn’t. We had a lot of head patients. So when we got enough of them, we had to—you can’t keep, on ships, you could only take, you only have so much space. We could take a thousand patients, but not all the time. Without being pressed, you could take six, seven hundred, but if you took three hundred onboard on one side of the ship, you had to put three hundred on the other. At this time, we were all doing with it boats, we didn’t have any other way to—we didn’t have helicopters.

LC: That’s right.

HB: There were few helicopters in Japan. I don’t mean in Japan, in Korea, but they were two-seaters. When they were bringing patient evacuation from Hungnam and that was later when we were there, they had to strap stoke stretchers on the side of the plane. Of course in that cold weather, they froze as well as anything else. They just didn’t do well.

LC: Helen, when you first joined the Consolation, did it indeed have a full load of patients?

HB: No, because they had come in and dropped off what patients they could in Japan. By the time we got to the ship, they had unloaded their patients and were almost ready to go back. So we went back. At that point, we went—let’s see. They had come back from Inchon landings, which were very bloody. Then we came back and our first stop was in Pusan. They had trained. They brought the patients to us and we had to stay
there. There were no other ships around. I mean, we were the only hospital ship there.

Later, the *Repose* came. Even later than that, the *Haven* came, but that wasn’t until pretty far along.

LC: Can you tell me about your cruise over to the Pusan area and those patients that came on?

HB: Well, we went through the Japanese Sea, the pathways and the ocean. The islands separated—Honshu is the main island. Kyushu is south of that and that’s a smaller island. Then Hokkaido is the north island. It’s bigger. There’s a lot of little islands all around.

LC: Sure.

HB: But we went through the Shimonoseki Strait and into Pusan. Then the trains would bring them down, the patients down to us. They would load a break from the battlefield, some of them. Pretty soon they did get some MASH (Mobile Army Surgical Hospital) units over there. I don’t think the Army had a hospital, not for the first year it seems to me. They didn’t have a hospital or such. They had MASH units.

LC: But you guys were kind of the only full service operating facility?

HB: Yeah. A neurosurgeon to begin with because I told you how they pulled in the Reserves, the regulations are the laws governing the Navy Reserve and the Army Reserve were different. They could not call in the Army Reserves. You couldn’t call in just one faction of them. See the Navy had called in doctors and nurses. They could do that. I don’t know what the agreement is. I knew at the time, but I don’t remember. But in Congress, up into September even, there would be things, you cannot draft a certain segment population. That was the thing that congress was screaming about, that they could not do it. An awful lot of the people didn’t want to go because they had finished up World War II. They just got back in their careers, just getting going. They didn’t want to go. I wanted to go willingly when they had.

LC: Well, what kind of injuries did you see? I assume you were in the OR.

HB: What did we have? Oh, God. Well, we didn’t—later on because we were taking them directly when we got a helicopter. We came back, you know, after the first year, had a helicopter deck put on. We were the first ones with helicopters. So that made a difference. We got them straight from the field. We didn’t have to wait, (inaudible).
The head cases we had and we had the only neurosurgeon for quite a while. He’d operate and then go out and lay down on a gurney outside. I’d get the patient up on the table, get them—you have to position them just so for head surgery.

LC: Yes.

HB: And get them positioned and get them prepped ready to get their head shaved. Half the time I was shaving some of the brains along with it and then wake him up, get ready to do the surgery. He’d just go back and sleep again. We’d get the next patient ready. It was that way twenty-four hours a day.

LC: Was that right when you first got there or later on?

HB: Pardon?

LC: Was that later on?

HB: No.

LC: Right away?

HB: Right away.

LC: Oh, boy.

HB: I continued. Of course, the first year, we didn’t have as much because they didn’t survive till they got choppers and could get them out to the ship.

LC: What kind of injuries would the guys who did survive, would they have mostly gunshot wounds?

HB: Well, grenades. They’d have the land mines. They had some land mines, yes. But shrapnel wounds, that can be worse than anything, fractures, legs torn. We had amputations, belly wounds, gunshot wounds, shrapnel wounds, oh, God.

LC: How many nurses were there to take care of all these cases Helen?

HB: We had eighteen.

LC: How many corpsmen?

HB: Oh, I can’t remember. I think I had about ten in the operating room.

LC: Oh, really?

HB: Yeah.

LC: You had to train—

HB: I think it got up to thirty nurses. I can’t find my roster. I have it someplace and I looked today, but my file cabinet doesn’t tell much.
LC: Well, did you have to train the corpsmen?
HB: Oh, I always. As I said, the doctors were the ones that wanted nurses. They wanted them to train the corpsmen.
LC: Right, right.
HB: That was a standard, until recently. It’s not emphasized anymore, but the main reason they brought nurses into their Navy was because to train the corpsmen. The doctors didn’t want to do it.
LC: How did the corpsmen perform for you?
HB: Excellent. You can take seventeen, eighteen, nineteen-year-old boys and make them into something. You really can’t believe it. They can come from slum areas, they can come from the top of the heap and many do. Although I always was glory if I could find a corpsman that their father was a doctor. I always liked them best.
LC: Right, right.
HB: But I liked them all.
LC: Right.
HB: But you trained them and they brought the nurses into do it. We ran the corps schools.
LC: Sure, that’s right.
HB: Instructors.
LC: That’s right. Well—
HB: They still do.
LC: That’s right, yes. I guess that’s still true.
HB: Yeah.
LC: How did they treat you? How did they address you? Did they call you ma’am?
HB: Yeah, ma’am.
LC: Ma’am.
HB: A lot of them called you by your title, but up until you’re commander, they call you ma’am mostly. Then they’ll use your title, which is typical Navy.
LC: Yes. Now would you have to keep the OR going twenty-four hours a day sometimes?
HB: Yeah.
LC: How did you do—?
HB: Thirty-six hours.
LC: Thirty-six hours?
HB: Yeah.
LC: How did you do it, Helen? How did you…?
HB: I have always been a—I never had much trouble sleeping.
LC: Okay.
HB: I don’t need much sleep. My whole family’s that way. We don’t sleep much. Mother would never go to bed before one or two o’clock in the morning. She got up at five. I’m much the same way. I read. We read a lot and I’ll go to bed after Ted Coppell. I don’t know what I’m going to do if he’s retiring.
LC: I know.
HB: I don’t what I’m going to do that time. But after he goes off, I usually go in and go to bed and read for a couple of hours, an hour, two hours. I go to sleep and then I wake up about five.
LC: So back on the Consolation, you could keep going if need be.
HB: Yeah. You can go a long time, really.
LC: Wow.
HB: But we’d try to relieve them if you could, you know. We’d try to get things quieted down around two or three o’clock in the morning. You let them get out.
LC: Let me ask you, did you go up on the wards after to see patients who had been in your operating room?
HB: No, I couldn’t very much. When patients would come aboard, the worst ones, the ones that needed to be seen right away would be brought down to the operating room.
LC: Yes.
HB: We didn’t have intensive care or recovery room. They’d be lining them up in the halls because not only did I have to watch the operating room, but I had to watch the patients out on the gurneys and help get them ready for surgery.
LC: Who made the decision as to who went first?
HB: Well, sometimes I wonder now how we did it.
LC: Yeah, yeah. I think that’s what everyone will wonder.
HB: Yeah. At that time we did it because the corridor’s outside the operating room and we had three operating rooms. That’s not much and we had two tables in each one. So we had six surgeries going on at once. Then we had all the P-1s outside that had to be seen and then sometimes you’d have one and say he should be next, but then another one comes who’s worst, so he’ll be next. You just learn to play it by ear.
LC: Helen, did you make some of those decisions who would go next?
HB: I had to.
LC: The doctors weren’t there. They were busy.
HB: Well, you would tell them.
LC: Sure.
HB: You would give them the choice. You’d say this patient, his blood pressure’s this and that and happened and that whereas the one who’s coming next is just that bad. You tell them.
LC: Yes. Then they would say, okay—
HB: You let them make the decision.
LC: I see.
HB: All nurses know better than that.
LC: Yes, ma’am.
HB: If you can do it in such a way.
LC: Well, let’s take a break.
Laura Calkins: This is Laura Calkins of the Vietnam Archive at Texas Tech University continuing the oral history interview with Cpt. Helen Brooks of the U.S. Navy. Today is the thirteenth of October 2005. I am on the campus of Texas Tech in the Special Collections building. Captain Brooks is speaking to me by telephone from California. First of all, good afternoon, Helen.

Helen Brooks: Good afternoon, Laura.

LC: Thank you so much for your time. Yesterday when we concluded, we were talking about the Consolation and your time served on that ship. I wonder, Helen, what did you do for fun?

HB: Well, in the Navy, we always speak of the Navy family. Aboard ship, that is the ultimate family experience because you’re living closely. You’re eating together, although aboard ship we had a separate ward room. Ward room is where you eat or you have activities, radios or TVs and that kind of stuff if you have one. Fun and games, we played cards. Every night there were bridge games going on, but only those who weren’t on duty. When we were taking on patients, which was most of the time, but often when we had to, we were going between—we didn’t go back to Japan very often, but if there was a lull, in that time, war was a little bit different from what it is now. There’d be a push. It’d take oh maybe about two weeks until they got a piece of territory. Then there’d be a lull and we’d catch up. We would do the surgery on the patients that weren’t as demanding as the ones that came straight from the battlefield. Then we had some time to do things. We would go ashore sometimes where there was a lovely beach. Well, when we were at Pusan, there was a lovely beach not very far away and we named it the Consolation Beach. The stewards would put up lunch bars. We’d go out there. We didn’t go in the water because things are pretty well contaminated at that time, but we would have a picnic on the beach. Other times, some unit would be out, like especially the Marine Corps Birthday, you know, Marine Corps Birthday on November tenth is almost a sacred day.
LC: Yes, ma’am.

HB: Someone of the units, we were always getting invitations from another ship or shore station, I mean Navy, whatever. We would go if we had, if we could. A few might be off duty and they would go. There was plenty of relaxation and we danced and have a good time.

LC: Did you have radios and so on?

HB: Oh, yeah, we had radios. We had patrollers in those days.

LC: Yeah, that’s right.

HB: Yeah. The ship had good communication systems. Aboard ship, we had, on the upper deck, we had a basketball court and that kind of thing so that if we were off duty and there’d be times when we’d be off, I don’t remember many times being off when we were taking on patients, but we came back to the States to have a helicopter deck put on after the first year. All the way across the ocean and going back again and of course, we didn’t have patients aboard. We were loaded with patients, but they were casualties that were getting, they were recuperating. They were convalescent, so that we weren’t as demanded, things weren’t as demanded. We did surgery on those that had to have repeat surgeries, but usually by the afternoon, things are quieted down. So we would play cards. We’d get out on deck and sun and just have a good time.

LC: Where did the ship go to have that helicopter deck put on it?

HB: Came back and unloaded a load of patients in San Diego. Quicker than that very next day, the very next morning, we’d got in about four o’clock, it was about two o’clock I guess it was and unloaded the patients. Then we hit town and had a good time, a whole group of us together. But we traveled as a group. I mean, there was very little singling out, dating separately or anything. There was some of course who were attracted. You’re bound at that age group, you’re bound to have some that have boyfriends and girlfriends. We’d all go together. Usually the captain would come with us.

LC: Really?

HB: On the ship, there’s a captain. We were an SS ship. We were the USS AH-15, that was the designation of the ship. Now there was some of the other hospital ships had a merchant crew on for running the ship. We had Naval people running the ship. So
we had two captains, one to run the ship or in charge. He was in charge of all. Then it was the Naval hospital in the USS *Consolation*. We had a medical captain as the head of the hospital part.

LC: Who was the medical captain? Do you remember?

HB: Oh, we had two of them. But the first time out, Dr. Virtue, it was a good name for him.

LC: I guess. Wonderful.

HB: He was a very nice man.

LC: What was his specialty? Do you remember?

HB: I think he was x-ray if I remember right. The second year, oh, I can’t remember his name.

LC: That’s okay. That’s okay.

HB: Jack something. He didn’t come aboard. Captain Virtue got off when we got into, we went from San Diego to Long Beach. We had a good time. That night that we got into San Diego, of course, the last patient hadn’t gone down the gang and carried down the gangway, then we were right behind him going to shore. We went up to, at that time, the El Cortez. Now you can hardly see it, it was the tallest building in town, had a beautiful restaurant up on top and had a glass elevator on the outside, the first one that had been in the States, then a small dance floor. Well, we headed for the El Cortez and we went up in that and stayed. Then we came back. Usually when we were in port, there’s always a curfew time, a time, liberty is up at a certain time. Well, we just hit the States. We were going to stay. Then after the El Cortez closed, we went to the USS Grant, which was a hotel in town. We didn’t get back until after, oh I don’t know, but anyway, it wasn’t midnight. we were well after midnight. The captain was out on the deck and he saw us all coming back ashore, try coming back aboard. What the Navy calls for officers is called in hack. You have to stay in your room. You can come out in time for your meals and that kind of thing. We thought that was not very good because this was the first night back in town. I guess there was about six nurses, nine doctors, and I don’t know how many ships officers. There was just about the same number. I think about eighteen of us all went in hack.

LC: How long did it last?
HB: Oh, it lasted, it was supposed to last two weeks, but head of chaplain went to the CO (commanding officer), captain of the ship and begged to let us out. He let us out.

LC: He got you out, huh?

HB: Yeah.

LC: Well, what were the most important—?

HB: Didn’t happen very often, but it happened that time. We did bend of course and we kept the phones going back and forth and go to breakfast, as soon as the wardroom, when it was served. We’d stay there most of the morning and talking and finishing up our breakfast. We’d go back to our quarters in time for lunch. Then we’d come back again. So it wasn’t exactly very strict.

LC: It wasn’t too painful.

HB: No, it wasn’t.

LC: Helen, did the women, the nurses, did they eat separately? Did they have a separate wardroom?

HB: We ate separate. We had two wardrooms. We had a wardroom in our quarters and there’s a wardroom in the other quarters, but it was nothing that—I went back and forth all the time. Because of our timing and that that was different. We had shifts to go and of course, the doctors didn’t. They went on in the morning or the surgeries would go on and they’d stay until they finished.

LC: Yes.

HB: We didn’t have set hours. I mean, we just stayed until the work was done. Part of it until we couldn’t stay any longer. So the hours were long of course.

LC: Now you mentioned that on occasion, there would be a push on because of, you know, on the ground—

HB: Until they took a certain, for instance, old Baldy, they would take the Marines were going in to take their territory and they would go in and the casualties, very severe casualties would be heavy the first week or two. Then after they had a conference of what they were going to do or try to do or whatever, it would slack off a little bit.

Then we would finish up what patients we had to and then we would do revisions very often, there had to be revisions on wounds.
LC: Now by revisions, what do you mean for someone who doesn’t understand that?

HB: Oh, if they had small wounds beside the big one and their anesthesia wouldn’t tolerate them being underneath any longer, we might not—we may be able to just clean them and cover them up until it’s time to get going or there might be something wrong with the hand and they already had to take an amputate a leg or something like that. You wouldn’t do definitive work. You might just cast the arm or something and then go in later and go ahead and do the full repair.

LC: So let them recover from the main injury first.

HB: Pardon?

LC: Let them recover from for example, an amputation before—?

HB: Whether could stand, well, you didn’t want to push them beyond what their body could take it. Of course sometimes you didn’t know. They would have things to finish up or some that were minor at the time, not as severe as some others.

LC: Yes.

HB: We took them according to severity. We’d have to finish up. Then of course, there were sometimes the crew people would needed things done too and that was the time like coming across the ocean, that’s when a crew would get all their (inaudible) and that kind of stuff done.

LC: Helen, did you have a dentist onboard?

HB: Pardon?

LC: Was there a dentist?

HB: Oh, yeah, we had a dental office. Yeah, sure.

LC: Did he have a separate operating room or did he have to use one of the others?

HB: He had a separate clinic. It was just like a doctor’s office.

LC: Okay.

HB: But if they hadn’t, of course, they were always in the operating room. If they had bad facial wounds, the face had to be reconstructing jaw and that and just you know, on that.

LC: Absolutely, yeah. Did you have just one or were there a couple of dentists?
HB: Pardon?

LC: How many dentists were there on the ship?

HB: I think we had three if I remember rightly. I had a list of the staff, but I don’t know where it is. It’s in that fancy file cabinet I’ve got. Everything is in there, but find it if you can.

LC: I’ll have to come and help you with that. I’ll come and help you sometime.

HB: That’s a job.

LC: Let me ask about the big actions where you remember getting the most casualties. Do you have in your mind what those operations were, where they took place, up north or Pusan perimeter or—?

HB: We had a lot of amputations, both legs and sometimes arms. More legs of course than arms. Belly wounds, oh, the belly wounds were terrible because they were the hardest to take care of, especially if the bowel was perforated. Oh, if the bowel was perforated—well, you know, of course, we had Korean patients of course as well as Americans. The ship was a real strange place. It was a United Nations effort. We had, oh, I don’t know how many nations were out there, but we had patients from all of them, British, French, let me see, Cambodians. No, we didn’t have any Cambodians, but we had Japanese some. We had some South America. We had some Panamanians. We had some Brazilians, some from Chili, Spanish, Greek and Turks. We had Turks. If I ever go to war, I want the Turks on my side. They were the toughest patients we had. They could stand anything and they wouldn’t admit that they had pain if it had been their last breath, they wouldn’t admit they had any pain.

LC: Wow. Was it difficult communicating ever?

HB: Oh, sure. We had interpreters if we could, but we couldn’t—I remember one time we had, I forget what the operation was now, but trying to tell a patient what was going to happen before he went under. I had to use a Frenchman who spoke Italian and the Italian who spoke Greek and then I think the Greek spoke, I don’t know what the patient’s language was, but it went through four interpreters. So you know the kind of stress the patient’s under by the time he finds out what’s going to happen to him.

LC: Oh, sure, absolutely.
HB: That was difficult. Then of course feeding them was a problem. That wasn’t a problem for me because I wasn’t involved in that part. They all had different diets.

LC: How did the ship accommodate that?

HB: Oh, they did it.

LC: They just did the best they could?

HB: Did as much as we could.

LC: When was the worst time in terms of most patients? Do you remember?

HB: Pardon?

LC: When did you get the most patients? Was it Hungnam or where were you when you had the biggest push?

HB: We took as many as we could. Then we would have to—it was bad in the first year when we didn’t have the helicopters because our patients had to be brought out from shore in boats and crafts. All kinds of crafts brought them out.

LC: How would they get up—?

HB: The stretcher had to be tied to a hoist and then they were hoisted aboard. I never wanted to make that trip ever.

LC: Yeah, that’s rough.

HB: That stretcher being hoisted aboard, but now of course it took longer, it was very difficult. But then we came and got the helicopters and they landed on the deck of the ship. That was a lot better.

LC: Now were there ever any problems with the helicopter landing?

HB: No, but wasn’t big enough. We could only take one helicopter at a time. At that time, they only could take two. They couldn’t take patients inside the helicopter. They didn’t get the big choppers until later. They would use this—do you know what a stoke stretcher is?

LC: No, what is it?

HB: Frame you know, that you put the patient in. You strap them in.

LC: Yes, okay.

HB: It was strapped to the side of the chopper outside and then they would be flown to the ship. But many of them had frostbite, especially when they were coming
down from the Yalu, the retreat from the Yalu for the Marines, oh my those—that was
oh terrible because their feet, not just their feet, they were frozen, frostbite. Of course,
the pain of a frostbite when they begin to thaw out is very difficult. Not only would they
be wounded and had been put on the chopper and then when they got to the ship, some of
them were frozen before they got on the chopper, but then going up in the air and that
cold mountain, Korea was not warm.

LC: No.
HB: It was cold.
LC: Helen, what could you do for them for frostbite?
HB: Well, you tried to help them to not warm up too soon, but we had blankets
and things that we would use. But mostly they had to go to surgery as fast as we could
get them.
LC: When they had a severe case of frostbite, would you have to do some
amputation?
HB: We waited to see what was going on, how much circulation would come
back.
LC: So you might wait a couple of days or—?
HB: To operate just the frostbite, but sometimes the leg was already so damaged
or an arm was so damaged that you had to take them off.
LC: You mentioned that the Turks were very tough.
HB: The what?
LC: The Turks.
HB: The Turks, they were, oh.
LC: What about the Marines, those young kids? How tough were they?
HB: The Marines, they were stoic, very stoic, but they’re not as stoic as the
Turks. Remember, I’m telling you, these are my opinions.
LC: Oh, sure, absolutely. Well, that’s why we want to talk to you.
HB: Yeah, there’s no scientific proof to anything I say.
LC: No, but it’s all very interesting.
HB: I don’t lie, but if there’s anytime I’ve tried to tell even a white lie, I get
catched. I learned my lesson.
LC: That’s right.
HB: I embroider a little bit sometimes.
LC: Well, okay, well, you can tell me when you’re doing that.
HB: Sometimes I don’t know myself.
LC: Well, the Marines who were up north in that cold weather, in that very cold weather—
HB: Yeah. Another thing, abdominal wounds were difficult of course. They are, anytime the bowel is perforated, you’re in trouble.
LC: Yeah.
HB: But we had a lot of POWs too you know. We had a lot of Chinese and North Koreans.
LC: Tell me about that.
HB: Well, they would be caught and they needed attention. They were damaged just as much as our sailors and Marines did because most of our patients were Marines after they got going. Initially we had Army as well as everything else, but we did have Army too of course. But the Orientals are quite stoic too, but they hated us with a passion. They didn’t want to do anything we asked them to do, even if they could understand. Belly wounds, it always turns people stomachs, but there were a lot of intestinal worms in the Orientals, especially tapeworms. But they go barefoot. They walk barefoot. They get it through the soil. When you have a belly wound, well, the worm’s not going to stay where they’re going to die, they leave and they go outside the intestine. You have to clean that all out before you can do anything. We’d have buckets of tapeworms when we moved sometimes. It’s amazing the amount that people could carry around in them.
LC: What did you do with them?
HB: Put them in a big basin and you get rid of them in the incinerator.
LC: Yeah. Oh, God. Were there ill feelings on the ship towards those POWs or did you do the best you could?
HB: Oh no, no, no. Patients are patients. We didn’t—we much preferred taking care of our own. Our own would go first I can tell you if they had to. A patient, a POW or a North Korean, if they had severe wounds, we graded them according to the way they
were. It didn’t matter if somebody else had to wait a little bit. But on the whole, our
patients would get preference if there had to be a preference.

LC: Yes. Did the—?

HB: It didn’t feel any different taking care of patients. Your work is the same. Bodies heal the same. They had the same—they’re not the same color always, but
they’re the same. Inside you’re very much the same.

LC: When they went up to the ward to recover, was there a POW ward?

HB: Oh, yeah, we kept them separate.

LC: Yeah.

HB: Which sides they’re on.

LC: How would they get off the ship? Where would they be taken? Do you
know?

HB: Taken to a prisoner of war camp. We couldn’t take any of them back to
Japan because we would go back—we didn’t go back very often because once we got the
helicopter deck and we got planes that could come pick them up, they would get over to
an airfield and then they would be taken to Japan to usually around—our patients went to
Atsugi and that’s near Yokosuka where the Navy base is.

LC: About how many POWs do you think you had in the course of those two
years?

HB: Oh, I haven’t the faintest idea.

LC: Really?

HB: We had a lot. In Pusan, we had an orphanage. Now that’s a long story, but
it’s been told many times in a lot of places. There were two Irish nuns that had been
running an orphanage in Pusan, I guess Pusan. Yeah, it was Pusan where they were. No
it wasn’t, or was it Incheon? I think it was Incheon where they were. They were at
Incheon for a while. Of course, they needed anything, for the kids, the children or we did
a lot of surgeries when we had time on children, hair lips, and things like that.

LC: Oh, really?

HB: But the nuns were very good to us, but they needed things too. We would
offer them too. If we had any time off, we’d go over to the orphanage and play with the
kids.
LC: Can you describe the orphanage? Did you go?

HB: Oh, it was very well run. I mean, it was different from most orphanages that I’ve seen here, haven’t seen too many. There aren’t many. They adopt them fast enough, but that wasn’t true there. They were usually fairly—there were a lot of toddlers, that size. We did surgery on as many that needed. Sister would tell us the story of them. That story of those nuns, fascinating what the Saint Paul, the cruiser coming into port, well, that’s a long story that really doesn’t affect you guys out here.

LC: Well, where did you hear that story or did you read it somewhere?

HB: Oh, I’ve heard because the nuns told us and I’ve read it too.

LC: Oh, okay.

HB: During the war, the Wives Club from the officers and I guess the enlisted men too, their wives sort of adopted the orphanage and sent clothing and all that kind of thing over. They felt that their—nuns felt that Saint Paul belonged to them. It was easy because—well, I might as well tell you some of the story.

LC: Sure.

HB: It was told to me and this is third hand about—

LC: That’s okay.

HB: Although Sister told me herself some of it.

LC: That’s okay.

HB: She doesn’t embellish it like other people. When the invasion of Incheon—

LC: Yes.

HB: The Marines went in and the harbor at Incheon is forty miles before you get to any land. It’s a very high tide. I forget how high it is, one of the highest in the world.

LC: Yes, yes. That’s right.

HB: Okay, if you go into the dock in Incheon, when the tide goes out, you’re high and dry and you don’t go anyplace until the next high tide shows up. Well, the Saint Paul is coming in and get into position to shell Incheon, which is the—I guess it was a city. It’s not too far from Seoul.

LC: Right.

HB: They were coming in and they saw this white flag waving on an island that was in the harbor. They didn’t know what it was and they wondered if it might be a
rouse or something and that they didn’t know what was going. So the captain sent a small boat over to see what it was. It was these nuns, the Irish nuns. There were some Korean nuns with them and all the kids. Sister had taken them, Sister Philomena had seen the war was coming, what was happening. She had got someone’s boat or something to take them out to this island. She thought they’d be safer. So that’s where they were. Everything was passing by and they didn’t have enough food and stuff. So the Saint Paul went into battle to shell the shore with a load of orphan children aboard.

LC: So they had taken them onboard?

HB: They took them all aboard, went in, they didn’t know what else they were going to do.

LC: Yeah, no other way to keep them safe.

HB: Yeah. It’s quite a story and I don’t know how much it’s been embroidered, but it really is something.

LC: Yeah, well, I’m glad that you chipped that in.

HB: We would go over and do things for them.

LC: Now what kind of buildings were they in?

HB: They were in red brick, well, sort of red brick. They had a big statue out in front of the church. One of the shells had taken her head off.

LC: Oh, dear.

HB: Somehow our boys tried to repair it. I don’t know whether they ever got it done because the last time I saw her, she still was headless. But that’s beside the point.

LC: Well, it’s an interesting—

HB: That was one of the things we did through our time, what time we had.

LC: You played with the kids.

HB: Oh, sure.

LC: Yeah.

HB: They were fascinated by our stockings or they called us, they didn’t call us by our names. We were their gifts, they called us giftees because we would always bring presents. They would ask, “When are our giftees coming? When are our giftees coming?” We didn’t get to go very often. Now nylon stockings, they would get down
because they were down kind of low. They’d take their fingers and run them down. You
know how nylon stockings had the seam in the back?

LC: Yes.

HB: They would run their fingers on our stocking. Of course, that would make
us dance and they thought that was hilarious. We had a fine time.

LC: I bet. I bet you did. Well, that was probably good relief too for you.

HB: Oh, yeah, of course it was.

LC: To get off the ship and work with kids is always good.

HB: But Saint Paul took care of the orphanages, they really did. They made
cradles and they made bassinets and they made bunk beds and all that kind of stuff for
them.

LC: Now you must’ve been aware of the U.S. troops moving all the way up to
the Yalu River.

HB: Oh, lord yes. That was Hungnam.

LC: Hungnam, yes, that’s right.

HB: Yeah.

LC: Yeah.

HB: Incheon is on the other coast.

LC: That’s right.

HB: We were going up for the invasion of Hungnam, they were going to go
above it, you may remember the history. We were going above this 38th Parallel.

LC: That’s right.

HB: Hungnam is almost on the 38th Parallel, but on the other coast. I think it’s
the east coast, I’m not sure. I’ve forgotten. But anyway, we were going up and Yangsan
was before that. We were headed for Yangsan when they came and said that that had
already been taken, that it was cleared and that we were to go onto Hungnam because that
was where the retreat—at Thanksgiving time, General McArthur had said we’d all be
home for Christmas. Well, that was before the Chinese decided to join the fray.

LC: Yes.

HB: Then our Marines got slaughtered. They were trying to get them out. They
were frozen. They didn’t have food. They were having an awful time. We were all
heartbroken. We didn’t know what was going. Well, we moved up. We were in
Hungnam Harbor for it and taking the patients, they had been in an Army hospital, I think
it was a field hospital, not just a MASH unit there, but they had to take them out and they
went out on one of the general ships. General ships were big, sort of like, almost like the
same size ship we had, but they were transports. They transported patients and troops.
They had transported them out. We stayed because there was some more troops coming.
The very last day, when was it, I can’t tell you, it was right around Christmas because we
got back to Pusan on Christmas Eve I think it was. But anyway, we waited and because
the Seabees (construction battalion, CBs) were sure blowing up all the facilities and that
kind of thing because the Chinese and North Koreans are very, very close. Well, while
they were blowing it up, they really blew up some of themselves. We had to wait till we
could get them aboard before we could leave. The other ships were all ready to go. We
finally got the ones aboard. Gee, this was before they had helicopters. They had to come
out on small boats. As we came out, we—I always get weepy.

LC: It’s okay.

HB: As we turned to come out, we were the last ship in line. All the other ships
ahead of us turned with the bow towards us that created a path for us to sail through.

LC: You got those guys taken care of I’m sure.

HB: It always is emotional, but we were loaded with patients. I, of course, we
were very busy in the operating room and I didn’t know what was happening. The chief
surgeon came up, he said, “You’ve got to go up and see this.” So I went up on deck and I
did get to see it. I’ve never seen that. Nobody ever took any pictures I don’t think, but
I’ve never seen one.

LC: That’s a wonderful story.

HB: Yeah.

LC: That’s a very—

HB: Not many people know it because we were so busy. A lot of people aboard
the ship didn’t know it.

LC: I’m glad you got to see that.

HB: Yeah.
LC: I’m glad you saw that. I’m glad you told me about that. That’s quite something. I’m interviewing someone who might’ve been one of the guys you were taking care of.

HB: Yeah, it might because most of the patients didn’t see it. Our patients weren’t out on deck very often. Once in a while going across the ocean or something, but most of ours—and then like in Vietnam, we didn’t have anything like that because they were all flown out.

LC: Yeah. How were the ships, the little boats that were moving back and forth between you and the shore? I mean, did they come—did you just abandon those and move out as quickly as you could?

HB: Well, they weren’t ours. I don’t know what ever happened to them.

LC: Yeah, yeah.

HB: I can’t remember the name of them. My memory does flip. If it was something that happened yesterday, I’d have a hard time telling you, but I remember most of those kind of things, but I don’t remember that. I know what they are. The minute I see one I know what it is, but I can’t tell you which name.

LC: Oh, that’s okay. Well, I think—

HB: They’re just big old things. We used to use them when we were going ashore, we would be—they’d take us ashore if we were out in the—many times you were out at anchor and if you wanted to go ashore or something like that, that would be the boat they take. They hold a lot of everything, their cargo things and that.

LC: Right. Of course, you would all be going ashore as a group.

HB: Yeah, would always be a gang going.

LC: Yeah, yeah.

HB: We never went alone.

LC: Yeah, for sure.

HB: You might go alone if you were in a city. We were in Japan and we were on dockside, but dockside takes up space. If you’re not busy and functional and need to be at dock, you go out in the harbor and drop your anchor. That’s what you do, you swing an anchor until—but you come up alongside the dock so they can unload.

LC: But if you don’t have any particular business on the dock—?
HB: It’s very busy, that’s what happens.
LC: Yeah, sure. Well, Helen, when did you get orders that would take you off
the ship?
HB: Well, I knew that I would—I was aboard about twenty-eight months. I came
back in, when the ship came in the second time, I got off. See, we came back the first
year, were in for about two months while the helicopter deck was put on. Then we went
out again and then we came back July I think it was.
LC: In 1952 you told me.
HB: Yeah, 1952.
LC: Yeah. Wow. Did you already have orders in hand?
HB: I had orders. I went to Pensacola. Then I think—did I tell you about dream
sheets?
LC: Yes.
HB: Well, on my dream sheet, I always said I didn’t want to be north of the
Mason-Dixon Line. I never was. It was always south of the Mason-Dixon Line, on the
south side of the 38th Parallel a couple of times, but not the Mason-Dixon Line.
LC: Well, the Pensacola assignment, you were at the Naval Air Station.
HB: Yes, that’s right. There were, let me see, one, two, three, four of us from the
ship went that as nurses. We had several doctors and several MSCs (Medical Service
Corps) that went to Pensacola. Pensacola thought the Consolation had landed when we
all reported for duty.
LC: What were the facilities like there?
HB: Oh, it was kind of a fun—again, I was the operating room supervisor.
LC: That’s right, where you usually are.
HB: Yeah.
LC: In charge of the OR.
HB: It was quiet and nice. We had some young group of people because at the
training base, it’s the air-training base, that’s where they make the aviators, where they
start them out. That’s their kindergarten for aviators. So we had a young group of men
that got into all kinds of scrapes. Sometimes their planes came down. Not often, but
sometimes. So we had regular routine and dependents and kids and all that kind of stuff.
LC: Did you have a lot of work to do?

HB: Pardon?

LC: Was there a lot of work for you in the OR?

HB: A lot of what?

LC: Work. Did you have a lot of operations?

HB: Oh, yes. We had—I tend to forgotten how, but it’s not a big hospital.

Jacksonville was the biggest one nearest us, which is also another Naval Air Base and a
general hospital.

LC: So you would do general surgeries—

HB: Just routine surgery, eye, ear, nose, throat, belly, orthopedics, general
surgery, all kinds of stuff.

LC: Were there any training accidents or anything like that that you remember
that were more—?

HB: There was one accident when I was there. They all survived. They were
damaged a little bit, but they survived.

LC: What happened in that accident? Do you remember?

HB: I don’t know exactly what it was that caused it, almost fell on the nurses
quarters.

LC: Uh-oh.

HB: But I don’t remember exactly what happened. We had a good time there
though.

LC: What was the town like? What was Pensacola like then?

HB: It was kind of quiet. Or after coming from the ship, I’m not probably much
of a judge, because it certainly was not very busy. But it was a fun time. New Orleans,
poor old New Orleans, was the closest city to us. Well, I guess it’s about 100, 150,
maybe 200 miles from Pensacola. That was our weekend liberty town. I know they had
a very good golf course, that’s the one time I took up golf.

LC: Oh, yeah?

HB: Yeah. We’d play till the sun went down when we had time. But it was a
regular workday routine really.

LC: Did you have shifts?
HB: Shifts?
LC: Yeah.
HB: No, but they did in the wards, at patient care. In the operating room, we
didn’t have shifts.
LC: Now were you continuing to try to teach corpsmen and so on?
HB: Oh, yeah, I had corpsmen. I had classes, not big ones, but maybe five, six
students at a time.
LC: Well, that sounds good.
HB: But students, the operating room, it’s a lot of teach and learn hand stuff. It’s
not just book learning. So it does—six students can keep you hopping.
LC: Yeah. You have to get them onboard with how you want it run.
HB: That’s right.
LC: And how the doctors want it run.
HB: That’s right.
LC: Yeah, yeah. Did you work with good doctors during this time?
HB: Oh, sure. You’re working very closely with them.
LC: How did they treat the nurses?
HB: Like you know, pals. I mean, you’re part of the group. They couldn’t get
along without you and there’d be no reason for you if they weren’t there.
LC: Got it.
HB: It never felt there was any distinction between the two. I respected them for
what they had and their abilities. Several times you didn’t respect them for their abilities,
but you didn’t let them know.
LC: On the whole, did the doctors respect the nurses?
HB: I think so. I think so. I never had any problems.
LC: Did you know of anybody who did?
HB: Yeah, I know a few.
LC: Were they kind of, I mean, were these just personality conflicts or—?
HB: More personality conflicts. Usually on both sides, it’s their own fault.
LC: Yeah.
HB: It was something they could’ve handled differently. They’re humans.
LC: Exactly.
HB: That’s the way humans are.
LC: Right.
HB: Yeah.
LC: Yeah. How big was the nursing group there?
HB: Oh, I can’t remember, maybe thirty-five, forty, something like that.
LC: Some of them were from the Consolation you said.
HB: Pardon?
LC: Some of those nurses came from the Consolation.
HB: There were three nurses I think it was that came, several doctors. I have a
picture someplace of a lot of us. But they really thought that the Consolation landed
because we all loved our ship.
LC: Oh yeah, oh yeah.
HB: It was pretty obvious that we preferred the ship to Pensacola, but I think they
all did a good job. We had a good time.
LC: Did you keep track of or write to friends who were still on the Consolation?
HB: Oh, yes, sure. We have a reunion every two years.
LC: When’s the next one?
HB: The next one, it just finished, it was in October.
LC: Oh, okay. So okay, so it’ll be a couple of years.
HB: Yeah, every couple—I didn’t go to this years. They’re not many of my
group left. All have died off.
LC: But it’s a ship’s reunion, so from any period—
HB: That’s right. But you see, it was in commission not too long. It was in
commission after we left it, it went back out again, but it didn’t do much in Korea. Then
it came back to the States. I don’t think they were out more than six months.
LC: Then of course the war was winding down.
HB: Yeah, it was winding down. Now they had been at the table. Then they
were at the, whatever the peace thing was in France, they were there. So it was just about
signed by the time—I don’t remember the details of that. But Panmunjom, we had been
up there too. We visited—
LC: You actually went there?

HB: Well, we went close to it. We didn’t go into the situation because it was still unstable.

LC: No, but you were nearby where the talks were?

HB: Anytime something was going someplace and if we had time, we went.

LC: I’ll bet.

HB: Yeah.

LC: I mean, what did you make of Korea and the Korean people?

HB: Oh, the Koreans, they are a different people.

LC: Yeah.

HB: The Japanese are very gentle and polite to the full extent. The Chinese are a little different. They’re more active. But the Koreans, they are zingers. They’re doers. They look different and they have different approach to things. Their recreations and that is different. They are very active people. They have a game. I don’t know whether you’d’ call it a game or not, but lets say on a Sunday afternoon type of thing, they have these big rocks they throw at each other. I saw it once and I couldn’t believe it. But that is why—I don’t think they do that now. Then there’s another thing that they have, they have these swings, very long ropes. I mean they can swing as high—you think they’re going to go up in the sky and never come down. They have a lot of things that were different from the other Orientals.

LC: Would you say that—?

HB: But they hated the Japanese because the Japanese had occupied them for forty-five years until after World War II. They didn’t think much. Now one of the things for instance about the Koreans, the day that it was announced that Japan had been defeated, they went and they burned, in Seoul, they burned all the streetcars. Nobody could go to work the next day.

LC: Is that right?

HB: Yeah, well, they hadn’t had any of that before and the Japanese got in there and they did all these things.

LC: Oh, right.
HB: But they were going to get even with the Japanese. So they burnt the streetcars. Now again that’s the story told to me. I don’t know whether—I didn’t see it.

LC: No.

HB: So I shouldn’t probably be talking about it.

LC: Well, but that’s interesting because it’s part of the problems in the Far East.

HB: They were doers. Of course, a lot of them, the units, the Marine units and Army units, they would have the young men that would, even kids, boys that would latch onto them because a lot of them were orphans on the street. They would do things around the camp for them. Of course, the boys loved to have them. They would shine shoes for them and they would give them candy bars and all that stuff. We had some that worked aboard ship.

LC: Oh, really?

HB: I had some in the operating room that washed instruments and things. Sometimes they took the instruments home with them, sorry to say. But the provost marshal every once in a while would come and we’d go downtown in what we called thieves alley and they called marketplace. We’d pick up the instruments we saw that were mine, that belonged to our ship. They had walked off. It was a game. They had no use for them.

LC: Right, exactly.

HB: One thing, of course, a lot of them with the boys and troops in the field and they learned the language. Their English was something you wouldn’t want to repeat. That’s the way they talked. That’s what they thought English was. One of them, when we were in Vietnam, some of them were contract workers. They would do things and there was one that came to fix the air conditioning where we lived in Vietnam. He called me, always had called me God damn chiefy. That was my name as far as he was concerned and no matter what I did with him, I could not get him to stop it. I told him I was going to wash his mouth out with soap and water. Go get the rag. Anyway, all over Korea, I mean Vietnam, he’d yell, you know, “Hi God damn chiefy.” Some of the others picked it up, but I chewed them.

LC: I bet you let them have it though.

HB: Yeah. I think I’m into the story of Vietnam too.
LC: Well, that’s right. Let me take you back to Florida for a minute.
HB: Pardon?
LC: Let me go back to Florida, to Pensacola for just a second. You said that you
used to go into New Orleans for fun.
HB: Yeah.
LC: For weekends.
HB: I had a boyfriend that was doing an orthopedic residency in—and he was a
real nice guy too. His family lived in New Orleans. He’d get off and we went during
Mardi Gras time, we went over.
LC: Oh, yeah.
HB: Went to all the crew parties and that kind of thing they had, wonderful time.
LC: This hurricane must’ve made you very sad probably.
HB: Oh, it made me very sad. But most of the places they mentioned weren’t
ones that I ever was in. We were down in the old part of the city, which was saved, I
mean, it didn’t—Bourbon Street was perfectly all right and the restaurants and that, from
all accounts, I don’t know exactly.
LC: Right.
HB: But evidentially the tourist areas were safe.
LC: But still pretty—
HB: Suffering because, you know—
LC: Terrible.
HB: Tourist city and just the basic part was, and that seems to go, but they’re not
making any money now.
LC: Well, no. It’s very upsetting and the images that was—
HB: Fascinating city, it really was.
LC: Well, and I guess there’s a Navy hospital ship that’s in port in New Orleans.
HB: Yes.
LC: That’s helping out.
HB: That’s the post one.
LC: Which one is it? Do you know?
HB: That’s the Mercy.
LC: Is it?
HB: Now wait a minute.
LC: I think you might be right.
HB: It’s the Comfort.
LC: The Comfort?
HB: The Mercy’s here.
LC: Oh, okay. Well, that must’ve made you feel pretty good though.
HB: Yeah.
LC: To see the Navy, I mean, a Navy ship, a Navy hospital ship right there, made me feel pretty good.
HB: They’re very different from our ship.
LC: Oh, yeah.
HB: Bigger, much bigger.
LC: Much bigger?
HB: Yeah.
LC: Well, your capacity, you could take a thousand patients you said.
HB: Well, a thousand, but then you’re really stuffed.
LC: Yeah, if you had to.
HB: We had some places with triple bunks. It’s hard taking care of patients in two bunks. The upper bunk is very difficult. But when you’ve got three bunks, that’s for the birds.
LC: Yeah, yeah.
HB: We didn’t have acute patients in those.
LC: No, no. Rehab, you’d have guys who were convalescing or—
HB: Yeah. We had them in double bunks. That’s not easy, especially if you’re short and your arms aren’t long.
LC: Are you short?
HB: I used to be 5’4”. I’m about 5’2” now.
LC: But you had, I mean, you had your hands full it sounds like the whole time you were—
HB: I didn’t think much of that.
LC: Yeah.
HB: It would be fairly quiet whenever—if the operating room quieted down, I would ask to have some more duty. I always liked patient care, bedside nursing, and the teaching of the corpsmen on the wards.
LC: How did the corpsmen respond to you? Do you think you were liked?
HB: Sometimes and sometimes not, you know how it is.
LC: Yeah I do.
HB: Yeah. There are other things that they would do, ah.
LC: Were they jokers?
HB: They would do some crazy things.
LC: Well, can you—?
HB: They’re just young men.
LC: Oh, sure. Well, can—?
HB: See if they can get into trouble as fast and then they don’t even have to think about it. It’s code by nature.
LC: Well, can you remember one or two things that they might have done?
HB: Oh, I remember one time, the linen locker in the operating room had shelves and way above up high, remember we were in the third basement down in the bottom.
LC: Yes.
HB: In the third basement, it was down in the bilge practically because that’s the stable part of the ship. You can operate without too much trouble or sometimes even that was bad. But anyway, there was a big sort of an empty space above the shelves. They used to go up there and sleep and hide things up there. I was too short to climb up there to find out what was going on. They came back from liberty one night. They had of course been ashore and they had been drinking. They somehow got down to the operating room. They came back and staggered down, the OD, who was the officer of the deck, all the officers have to take their turn as officers of the deck, the junior officers. They have to stand at the gangway when they’re in port so that they can see everybody that comes aboard. They usually, if you get too drunk, they don’t let them come aboard. They do something with them. But anyway, this group of nuts got aboard and got down to the operating room. Somehow they had smuggled a small pig. They had him up in...
that space above the linen locker shelves. I got down there the next day and I heard this,  
“oink, oink, oink,” or whatever the sound the pig makes. Oh, George, was there fur  
 flying when I got a hold of them. So we had to do something with the pig. I told them  
 that was their job, they had to do it and they had to do it now. I don’t know what they did  
 with it, I never asked. They probably—I don’t know what they did. I haven’t the faintest  
 idea. But that’s the kind of thing they’d do.

LC: They got up to a lot probably.
HB: Yeah. They would do kinds of things. They’d draw you pictures and things  
like that.

LC: What kind of pictures?
HB: Oh, caricatures and things like that.
LC: Oh, sure.
HB: I’ve got some—I’ve got a bunch of stuff. I looked at it the other day trying  
to find my roster of how many were aboard and that kind of thing. I couldn’t find it, but I  
came across some of this junk. I sat and laughed.

LC: You still have those?
HB: Pardon?
LC: You still have those little characters?
HB: Oh, yeah, I have them.
LC: Oh, boy. Well, I bet you did have a laugh.
HB: It’s too bad you’re not here. The Navy’s putting on an air show here.
LC: Oh, really?
HB: It goes right across my window. I’m sitting looking at them as they go.
LC: You got a front row seat.
HB: A front row seat is right. I’m surprised you can’t hear them.
LC: No, I can’t hear them. How close to the harbor are you?
HB: Well, these are—this is Marine Air Force Base and it’s about a mile. But  
these are the stunt people and they tend to go a long way fast.
LC: Oh, yeah. Oh, yeah.
HB: They fly wing to wing. Six of them just went by and looked like their noses  
were touching.
LC: Wow, they’re brave guys to do that, I can’t imagine. Could be gals too anymore.
HB: Yeah.
LC: Well, let me ask about you came in fact to San Diego, did you not?
HB: Pardon?
LC: After you were in Pensacola, you moved out to San Diego.
HB: No, no, no.
LC: No?
HB: Not right then. It was time for me to finish—I had already done some work, but I couldn’t get much college work done at Pensacola.
LC: Okay. So what happened then?
HB: Oh, I went to Columbia. I went on inactive duty. See I was still Reserve and I went on inactive duty. I went to Columbia for my masters.
LC: Why did you go to Columbia?
HB: Well, I don’t believe and it’s not a firm belief, but I don’t think you should get your graduate degree from the same school you got your undergraduate. I think you need to get a little wider experience because each school has its own taste and flavor I think.
LC: Yes.
HB: And philosophy. I thought it was better to go to a different one.
LC: How did you happen to decide on Columbia as opposed to—?
HB: Well, I’m from the northeast.
LC: Right.
HB: I like New York.
LC: You like New York. There you go.
HB: I had lived there. So that’s what I did.
LC: Yeah. You were familiar already with—?
HB: Yeah, I knew the city a little bit because I had gone on vacation there growing up.
LC: Sure, sure. Of course it’s a very, very good school. So that helps too.
HB: Yeah, I don’t think they have a nursing program. My graduate degree was in the administration of nursing services because I was already administrating, operating room and that kind of thing. I knew my next move in the Navy was to go up as assistant or something.

LC: Did you have anyone mentoring you?

HB: Pardon?

LC: Did anyone mentor you, you know, help you along, give you a clue, kind of advise you as you went along?

HB: No, no.

LC: No one kind of took you under wing?

HB: I do that myself.

LC: You do it yourself.

HB: Yeah, I knew what I wanted and I knew what I needed. I had a wonderful time because I’d had so much on my undergraduate that I didn’t need—and then my experience that I would go to these classes in management and personnel and all that stuff. I already had learned it on the job. Of course, it had taken a good number of years to learn it that way, but I knew it by heart. So I had other courses that I could fill in with.

LC: In like what else?

HB: Margaret Mead I took her course, anthropology, which was one of them I didn’t need. I just needed the credits.

LC: You took Margaret Mead’s class?

HB: Yes.

LC: Tell me about that.

HB: Well, it was just fun for me.

LC: Yeah. What was she like?

HB: She was, oh, I thought she was charming.

LC: Really?

HB: She knew her stuff I can tell you and she had her opinions. You didn’t challenge them outright, at least I didn’t. But she was a very warm hearted person.

LC: Was she a good teacher?
HB: Yes. She was so enthused in letting everybody know what she knew. That’s what you need in a teacher that really wants to let people know what she knows. That’s what she did.

LC: You could feel that from her?

HB: Yes. Then I had a couple of other courses that were different.

LC: It’s amazing that you took a class from her.

HB: Yeah. I had Norman Cousins for—what did I have him for? That was an evening class. I’ve kind of forgotten, but they all fitted in pretty good.

LC: You could kind of select the things you wanted to take?

HB: Well, because I wanted to challenge a course. If you passed it, but I’d learned it on the job, much of the stuff that they were asking. I had been doing administrative work. You run an operating room, especially in a big hospital, you have a lot of purchasing to do. There’s a lot of staffing to do. You’ve got a lot of teaching to do. So you learn.

LC: You said, Helen, that you had an interest in history.

HB: Yes.

LC: So you could kind of satisfy your own intellectual interests as well, it sounds like.

HB: Yeah. We had never—in history, I had had a tremendous amount of history. Well, I had good history in high school, which start way back in ancient history, but we never got much of Africa. We never got much of South America. It took me quite a while to get those under my belt.

LC: How did you do it?

HB: Reading mostly, but I did take a couple of courses. Then I didn’t get caught up on South America till I was in Panama.

LC: That was, when was that?

HB: That was after I retired.

LC: Oh, how did you happen to go to Panama?

HB: They asked me to come. They needed a director of nursing for the health bureau. So I went.

LC: I’ll have to ask you about that.
HB: Well, that’s after I retire.

LC: Okay, well, we’ll get there. We’ll get there eventually.

HB: At the rate we’re going, we’ll never get there.

LC: Well, this degree then that you earned, when was it awarded?

HB: June of ’56.

LC: Wow.

HB: Yeah, ’56.

LC: Now did you already have a plan for getting back on active duty?

HB: Sure.

LC: I figured.

HB: I had told the Navy I was coming back.

LC: I figured you had a plan.

HB: To go back to active duty before graduation or whatever it was.

LC: Was your mother at your graduation?

HB: No.

LC: Had she died?

HB: No. She hadn’t died, but there were so many graduates, they invited us not to come. They said those who don’t want to come, but of course my mother was working.

LC: Well, that’s, yeah, I thought about that too.

HB: She was seventy-five years old.

LC: She was still—?

HB: I guess it was seventy-four.

LC: She was still working?

HB: Oh, sure.

LC: Yeah, and in good health?

HB: Yes, very good. She was pretty strong.

LC: Sounds like it. She sounds like it. Well, tell me about going back to active duty.

HB: Well, so then, well, one of the things that happened at—there was a nurse, a Navy nurse who was well known in the Navy. She was one of the ten Navy nurses who
were imprisoned by the Japanese at Santo Tomas and then later to another place and through the war, all through the war. She was well known. She was a chief nurse by this time. I had never met her, but in the corpsmen’s room one Saturday, I came from a class and there she was. I didn’t know her, but I’d seen enough pictures, so I knew her. So I went up to her and introduced myself. She was all by herself and she was the chief nurse out at St. Auburms in New York. She was taking Saturday courses. She was working towards her masters too. She had taken a morning class. She was sort of all by herself. We didn’t have any other Navy nurses. There were Army and there were some Air Force nurses at Columbia at the time, but not Navy. I don’t know why, but there was some difficulty between the director and them. Anyway, she was there. So we got going and talking and that kind of thing. Each Saturday when she’d come in for class, she wasn’t in my class, but I’d meet and we’d have lunch or something together.

LC: Sure.

HB: So I got to know her and it was a different relationship for her because most of the others that all knew her and put her on a pedestal because of her history, of the time she spent in the Japanese POW camp. So when I came back in the Navy, I went to San Diego. It wasn’t long after that that she came there as the chief nurse. So I was there in the operating room of course from ’56 to I guess it was ’60, yeah.

LC: Helen, was this Edwina Todd?

HB: What?

LC: Was this Edwina Todd that we’re talking about?

HB: Yes, yeah.

LC: What kind of a woman was she?

HB: Unusual, very hard to describe. She had a brain that was like a steel trap, but otherwise she was different. She was wonderful to the younger nurses. She let them walk on her to tell you the truth. It was hard being, it wasn’t long before I went there as the OR supervisor, but I resumed down in the front office as her assistant. It wasn’t the easiest job in the world, but I learned a tremendous amount.

LC: What kinds of things did you learn from her?
HB: The way that she handled things and if you wanted things, you had to just plow your way through evidently and that wasn’t my way normally, but I learned a lot from her.

LC: Did she make that work?
HB: Pardon?
LC: Could she make that work, plowing through?
HB: In some instances and some not. She had problems, physical problems, but she wouldn’t let her—and she had likes and dislikes and lord help us if she had a dislike, but I respected her very much.
LC: You had as you say a different relationship with her.
HB: Yes it was because it was more like classmates.
LC: Yeah.
HB: She could talk to me, others were—she didn’t ever treated anybody as a subordinate. No she didn’t, but the ones, the subordinates felt that, that she was something more than they were. She was, but you’d never know it from her.
LC: Was she intimidating?
HB: To some she was. She wasn’t intimidating to me because I knew her as a college classmate.
LC: Right.
HB: I didn’t know her in her heyday.
LC: What was it about her that people or younger subordinates felt?
HB: They knew her as a friend if they were ensigns and JGs if they knew then. They would come into the office, when I was her assistant, I was ready to knock her head off sometimes because they’d come into her office. She would just be real sweet to them and they’ll want some special time off or something like that. You would’ve just gotten the roster of detail duty, which was always a mess, trying to staff a place twenty-four hours a day is not easy. She said, “Oh, of course, go ahead. Why don’t you take two weeks?”
LC: After you—
HB: I debated to murder her.
LC: Right. (Both laugh)
HB: It worked.

LC: But you two got along somehow.

HB: As long as I realized that—she was an ensign when she was captured. She came out a lieutenant commander. She skipped grades in-between. She didn’t know what they were. She went from ensign, which is the lowest one to where in those days, we didn’t have many commanders and captains. We had one captain in the corps. That was it. Well, by this time, we’re beginning to get a few more by the time I got to San Diego.

LC: Just a handful though.

HB: Yeah. It made a difference in her way of doing things, especially for them because she missed those years that let you get up there to be a lieutenant commander. She would lower the boom.

LC: Well, but you found a way to work along with her?

HB: I didn’t find it hard.

LC: Did she—?

HB: We remained friends until she died.

LC: When was that? When did she die?

HB: Well, I was already back here in the States. Let me see. She was in a nursing home up in Glendale. Oh, I would say it was about ’89 or ’90, in there somewhere. I have it written down someplace, but—

LC: Sure, sure. We can look it up too.

HB: Yeah.

LC: Helen, I don’t know whether you feel like you could share this, did she ever tell you much about her experience during the war?

HB: Some things she did. Some things she didn’t talk about. Now while they were at Santo Tomas when the nurses from Corregidor came, they were put into this—also some of the ones from Corregidor got all of them and some of the other Army nurses were taken and put into the same place at Santo Tomas where she was, where the Navy nurses were. I think there were about ten Navy nurses there, may have been more. But anyway, then the Japanese asked for—there were more them, they had been working awfully hard in Santo Tomas because they were the only nurses there. Although some
The Japanese came and asked for volunteers to go to Los Baños, which was another place that they were taking over. I think it had been a plantation or something, I forgot. I’ve got the story of it, but I’ve forgotten exact details. They volunteered to go. That is their nurse that was the senior nurse, the Navy nurse in this group of ten. She volunteered their services. They went, they were taken. The story of the trip getting there was something. They opened up this place, hospital, and took on patients and that kind of thing. Then towards the end of the war, after McArthur had freed the Philippines, got close to freeing them, well, things had got rough. They didn’t have enough food or anything. She had very, very—and I think most of the others did too, had very, very intestinal problems. They were very malnourished and having a rough time of it. A group, I think it was Army people, I can’t tell you the—I’d have to have the story right in front of me and I have it, a short story that she wrote out.

LC: That’s okay.

HB: They came in, stormed in one day, one morning, early, because they had just got word that the Japanese were going to kill their prisoners before they were taken.

LC: Yes.

HB: That’s why they did, they were afraid that those Japanese would kill them before they got there or if they saw them coming, they would, so it was one of these hurry up, hurry up, hurry up type thing. They dashed in, in quite large numbers to get them out before the Japanese could do them in. That’s a story in itself. They got out.

LC: Did she tell you about that part of it too?

HB: Oh, yes, all of it.

LC: Can you remember some of that?

HB: Well, I’d have to go to—again, my memory’s not the best in the world.

LC: Well, that’s okay. She did write some of these experiences down as I recall?

HB: I have the story that she wrote.

LC: You have a copy of it?

HB: Oh, yeah.

LC: Wow. Okay.
HB: I’d have to review it before I—it’s been published I know.
LC: Yeah.
HB: I can’t remember how I got it or what, but I have a copy. She’s dead. She has some family living and nothing is derogatory in it. I’m sure there were some that there may have been derogatory things, but—
LC: Well, but on the other hand, like all Americans who’ve been held as POWs, in some ways, she’s a hero. She’s seen as a hero.
HB: Yeah.
LC: Although, did she, I mean, she didn’t carry herself that way I assume?
HB: No, she didn’t. I think it would’ve been better if they had gone directly to duty. Have you seen any of the books that were written?
LC: Yes I have.
HB: Have you seen Donna’s book? When she was a prisoner with them?
LC: No, not that I remember.
HB: Hers is a very light version, but she just changed the names in the book.
LC: Sure.
HB: So you don’t know who’s who.
LC: Right, right.
HB: Well, I read it and I knew exactly which one was Edwina.
LC: Really?
HB: So I told her, I said, I know. So she gave me a list of the names of the ones, but that I can’t let out.
LC: I’m with you. I understand.
HB: But I promised her I would never let the names out.
LC: No, I understand. That’s the right thing. That’s the right thing.
HB: Yeah.
LC: How long did you spend as her assistant?
HB: Pardon?
LC: How long were you Edwina’s assistant?
HB: Too long. It wasn’t the easiest position, but she did have nervous breakdowns. So then I was acting chief nurse.
LC: So you kind of, I mean, that’s a huge responsibility.
HB: Yeah, it was a different relationship. I don’t know of any other that has been like that.
LC: How long were you then in the position of being acting?
HB: Yeah.
LC: How long were you there?
HB: I was there until I got out.
LC: Until you could—
HB: I asked for orders when the time came to go to Japan, I went to Japan.
LC: Now, Helen, correct me if I’m wrong, but acting chief nurse at San Diego is a big deal in the Corps, isn’t it?
HB: No.
LC: No?
HB: No, I was only acting. I was just doing what I was told to do.
LC: Well, I know that, that you were following orders, but this—
HB: Well, this was before she left.
LC: Yes.
HB: Wait a minute. I’m kind of confused at this stage of the game.
LC: Okay.
HB: Let me see, San Diego. I was sent there as the OR supervisor and it wasn’t very long—I knew what was going to happen. It wasn’t very long before she said I was going—I had told the chief of surgery that, but it all came and go and I wanted to stay in the operating room. It was a nice, big, very active. It’s the biggest Naval hospital there is.
LC: Yes, ma’am.
HB: I wanted to stay there, but I couldn’t do it. Let me see. Have we done—?
LC: Well, I have in my notes from you that you then went to Yokosuka and were there—
HB: I went to Yokosuka from San Diego.
LC: Yeah, from 19—
HB: Let me see. No, that wasn’t when—I’m getting mixed up.
LC: That’s okay. You take your time.
HB: I also was at—I went.
LC: Oh, okay.
HB: Yeah.
LC: Okay. This was at Portsmouth that you were her assistant.
HB: No.
LC: Assistant. Okay, I’ve got it clear.
HB: I didn’t go down to be her assistant till I got to Portsmouth.
LC: I’ve got it.
HB: Yeah.
LC: Just to clarify for people—
HB: I went from San Diego to Yokosuka.
LC: Then after that, you went to—
HB: After that, I went, that’s it. I’ve got it straightened out now.
LC: I’m with you. Just to clarify, you—
HB: Yeah, I stayed operating room. I wasn’t the supervisor. I had a friend of mine who was the supervisor. I was sent there as the instructor because we had big classes there.
LC: Well, because that’s a huge—
HB: I had the corpsmen’s classes.
LC: That’s a huge hospital, San Diego.
HB: Yeah.
LC: Yeah, huge.
HB: Trained a lot of corpsmen. We had a big corps school there.
LC: Okay.
HB: That’s what I did there. I was acting supervisor some of the time too.
LC: Oh, I believe it.
HB: But the gal that was the OR supervisor was a very good friend of mine. We partied together all the time.
LC: Who was that?
HB: Edna Doddery. She’s dead now too.
LC: She was one of your good friends?
HB: Yeah.
LC: Had she been, had you met her earlier in your career or did you met her in San Diego?
HB: I’d met her, but maybe at meetings and things like that.
LC: Yeah. But then you guys, you became closer friends in San Diego.
HB: Yeah because we worked much closer together.
LC: You were training the corpsmen.
HB: Yeah.
LC: How did the—?
HB: We had, initially, the course was six months at that time. The beginning of course was all classroom, but then you have to gradually get them in and get them scrubbed in, learn how to—school them and teaching the— instruments I could teach them in a classroom, but some things you can’t teach in a classroom. They got to do it. Then I would have to take them into the operating room themselves.
LC: Did you have young guys who just couldn’t, they just couldn’t do it in the operating room?
HB: There would be some, but not often because by the time they get to come to a V school, they’ve already been through corps school, the basic training and have had some ward duty and that kind of thing so that they know how to handle themselves pretty much. It’s fantastic what those kids at that age can do.
LC: Yeah.
HB: They’re just like a bunch of puppies, but they learn fast.
LC: It sounds like you enjoyed the teaching.
HB: Oh, lord yes. It was fun.
LC: Was it more fun than, and maybe fun isn’t the right word, but was it more satisfying than working in the OR?
HB: Well, it’s all part of it. You still work in the OR.
LC: Sure, sure.
HB: But same thing, assigning them to classes and that, but I wouldn’t want to have one without the other really.
LC: Okay.

HB: It was good having responsibility and handling any actual work situation. There’s a lot of satisfaction to it. Many of my students went on into medicine.

LC: To become medical doctors?

HB: Yeah. Four of them came last year and visited me.

LC: Really?

HB: Yeah, at a golf tournament. They had been my corpsmen.

LC: Really?

HB: They came to see me.

LC: Oh, that must’ve been wonderful.

HB: Yeah, and I’ve run into them back and forth. I had them in Vietnam, was one of my corpsmen.

LC: Who became a doctor?

HB: As doctors, yeah.

LC: Wow, that’s incredible. What do they call you?

HB: Well, they had a lot of different things. One of them was Miss Byongbong. I don’t know exactly how they said it, but that’s what they called me.

LC: Where did they get that?

HB: Wasn’t that their automobile or something that was named Byongbong, I don’t know. You can’t tell where they get—

LC: Well, this is true. This is true.

HB: Sailors have a language all their own.

LC: Well, did you put in on your dream sheet for Japan?

HB: Mm-hmm.

LC: I figured you might have.

HB: I wanted out and I love Japan.

LC: Yes. Where were you posted?

HB: I never really asked for anything. I mean, I would make a suggestion sort of, but I never was adamant about anything.

LC: But you were happy when you got this posting?

HB: Yeah. Every station I went to was always the best one.
LC: Is that how you felt about it?
HB: Yeah, sure.
LC: Did almost everybody feel that way?
HB: Not everybody. Some of them, oh, there will be one place that they love and they want to go back and back and back, don’t ever want to leave.
LC: But you were happy and kind of moving around and—
HB: Yeah, see something new.
LC: Yeah, see something new, yeah.
HB: You figure by the time you got to move, you’ve done what you could in the spot you were in. You needed to go someplace.
LC: Well, when you went to Yokosuka in 1960, had it changed much from when you first went there?
HB: Oh, heavens yes, it had changed. It changed tremendously. We didn’t come in too often in Japan. We’d only be in a few days, the ship would have to get supplies and that kind of thing. We would head out and have a good time. But working there and being there on the ground floor and I’ve had some Japanese student nurses, we took them from one of the schools of them to help to teach them. We had Japanese interns that were coming for practice. Not just practice, but they were getting experience.
LC: Yep.
HB: I say practice, but that’s what medicine is, is practice.
LC: That’s right.
HB: The patient is another clog in the practice. So you had a lot of it. I had a car. Then I could go anyplace I wanted to when I had time and I had more time there, although, not a whole lot because I didn’t have many ORs—there weren’t many OR nurses. I had a couple, but at night and that kind of thing, I usually had to take the calls. I always am able to be up at night because—
LC: Well, that’s what you—
HB: Because the operations could happen to happen if needed at night.
LC: That’s right. You said before that you don’t need a lot of sleep.
HB: I don’t need much sleep.
LC: Yeah, don’t need much sleep. Well, how did you happen to buy a car?
HB: I didn’t buy it. I had it.
LC: How did you have a car?
HB: I went to Pensacola, the first time I owned a car. I never heard of time payments, not in my household. I didn’t know you could buy a car on time, so I had to wait until I had the money. So when I got the money, I bought an automobile.
LC: And you took it to Japan?
HB: Yes, I did, big old Pontiac. Her name was Julia.
LC: Her name was Julia. How did you decide her name?
HB: I don’t know.
LC: Just came to you?
HB: That was Julia. That’s what her name was.
LC: Well, tell me about Julia. What color was she?
HB: They only had one that was green and beige. I didn’t want two tones. I wanted all one color because it would make it look bigger. So I made them paint it before we take it off the floor. So they painted it all green.
LC: So it was all green?
HB: Not one of my favorite colors either.
LC: But you could live with it?
HB: Oh, sure.
LC: So you had your big Pontiac over in Japan?
HB: Yes. Sometimes I’d go down—you don’t call them streets, what do you call them—I’ve forgotten. My Japanese wasn’t very good there. Same with Spanish, I can’t remember the words, vocabulary. You know how in English, sometimes I can’t find the right word? Well, I can remember how you put the sentences together, but I don’t have nothing to put together because I can’t remember the words. My vocabulary is gone. So I don’t have very good—
LC: Was your Japanese language pretty good though when you were there?
HB: Nobody in three years speaks Japanese very good.
LC: Yes, ma’am. That’s true.
HB: The Jesuit Missionaries spend twelve years learning the language. The written language and the spoken language, there’s no relationship between them.
LC: Yes, ma’am, I’ve studied it. So I know what you mean.

HB: When you have a romance language, Spanish and Italian and that kind of thing, French, it has a basis of the Latin underneath it.

LC: Yes.

HB: Well, I’d had four years of Latin in high school and that makes them easier. At least I can remember the words and the meaning, but when you can’t read it, it’s awfully hard. At least it was for me, I don’t have facility with languages.

LC: Did you try to learn some Japanese?

HB: Well, yes, I always took lessons.

LC: Oh, really, from who?

HB: It didn’t take, I just don’t have the ability. I mean, I could get along, everyday with yes, no, and do this, do that and a happy day and nice to see you, that kind of thing.

LC: But you tried by taking lessons?

HB: Pardon?

LC: You tried to take lessons?

HB: Oh, yeah, I did. Of course, again, you’re working all the time.

LC: Yeah, that’s right, yeah. Were there lessons offered by the Navy that you took or did you do it privately?

HB: You know, the Navy supplied lessons if you wanted it. I had a couple of private lessons too.

LC: But it just didn’t take?

HB: No, it didn’t take. Well, you don’t have long enough to do it.

LC: Yes, it’s very difficult.

HB: It takes a long time. You’ve got to be able to be right with it. They also have—the Japanese have three syllabi’s and one is a very polite one. Spanish is something the same way too. They have some that are polite that they use. Then there’s another one that’s used in the third, another one, but you don’t ever hear. So it makes it difficult.

LC: Yes, very complicated.

HB: It’s very complicated.
LC: Well, now you had your car and—
HB: Yeah, I went everywhere.
LC: Yeah, did you? Did you go all over the place?
HB: Yeah. A lot of people didn’t want to drive in Japan. But to me, it was a challenge. Very often when the CO was going to Tokyo or something and his driver wouldn’t be there, he let me drove. I’d take him. I enjoyed it. I thought that Tokyo was loads of fun.
LC: You drove around in Tokyo?
HB: They didn’t have any cars. There were bicycles. You had to watch our for the bicycles and pedi-cabs and that.
LC: Yes.
HB: But they didn’t have any automobiles, not when I first was there.
LC: So there you were driving around in Tokyo.
HB: Yeah.
LC: Would people ask you—?
HB: I went up to Hokkaido. I went down to South Island. I went a lot of places. I went to Fuji up in the mountains.
LC: You’d take your buddies with you I presume.
HB: I’d always take somebody with me.
LC: Yeah. Would you go just for fun or because you wanted to know more about Japan?
HB: It was just sort of someplace to go. Usually there was a reason. One of the gals who was chief nurse over there liked to go to antique shops. I was driving around finding these antique shops and take her shopping.
LC: Did you ever—I guess I asked you this before, but I wonder, you never encountered any anti-American feeling?
HB: No, I never did, never. I’ve had discussions with Japanese upon occasion where they showed that there had been resentment and that, but on the whole, they appreciated how MacArthur managed the thing originally. They all admired, well, not all of them, but most of them admired General MacArthur. The fact that they wanted to
keep the emperor, that was one of their big fears, that they would not be able to—the
emperor would be charged as a war criminal.

LC: Yes. Did you on your own, Helen, think that was a good idea to retain the
emperor?

HB: I think it helped the Japanese. I think it helped them. They considered us
more human. Remember that, I don’t know whether you’re old enough to remember how
we pictured the Japanese during World War II, with great big old bucked teeth and
hideous things and the hideous things they said and newspaper cartoons and things.

LC: Yes, like rats.

HB: Yeah. Well, Japan did the same thing.

LC: Yes.

HB: They turned and they realized that we weren’t that bad. They thought we
weren’t because the way they were treated.

LC: Did anyone—did any Japanese ever talk to you about the atomic bomb?

HB: Yes, they would say, but they never. Much of Japan, they knew it from
newspapers.

LC: Yeah, just like—

HB: They didn’t have extensive—oh no, that was back in—Japan was very
different when I went the second time though when I was aboard ship.

LC: Oh, sure, yeah.

HB: Of course, when I was aboard ship, we only came in and out. We just didn’t
stay. So it was quite different and by the time that we got there, they were mixed in, they
were accepted and they were working in the base and all that kind of stuff.

LC: Well, right, and their economy had recovered and their industry had
recovered.

HB: Their industry was going. They were very industrious.

LC: Yes, absolutely, yeah.

HB: They were always wanting to practice English, oh. That was another trouble
with trying to learn the language. They didn’t want to speak Japanese because they
wanted to speak English. Some of us went up to the self-defense school, which would be
equal to our Annapolis, like the school for self defense. They weren’t going to have any
Armed Forces, you know.

LC: Yes.
HB: Big joke. We were trying to get them to speak English, so they could talk to
us and be able to speak. So we’d go up there and practice, like us people do here in the
States. If foreign students coming, you can sign up to take some of them and talk with
them and make them learn English.

LC: Sure, sure.
HB: We did that at the self-defense school.
LC: Did you make any—?
HB: They always were accepting, at least that’s what I saw.
LC: That’s very interesting. Did you make any Japanese friends, people you
would consider your friends?
HB: Well, some, but not enough. I met some of them socially.
LC: Yes.
HB: We didn’t see them. On the base, it was for people that worked, like the
housemaids and the people, the waitresses and that in the dining room and that kind of
thing, but they don’t speak the same upper crust Japanese that the others do. Same thing
happened when I was in Panama. They didn’t want me to talk to the maids because their
Spanish is different, from the classic. I didn’t like the idea, but that’s the way it was.
LC: Yes, yeah, that’s right. There’s not much you could do about it.
HB: Yeah. That’s where you can learn because you can use all the
colloquialisms and slang, but they warned us not to speak with the housemaids and that.
I could learn any of the Spanish from them.
LC: Because you would sound kind of like a—
HB: That’s right.
LC: Low class kind of thing. In Japan, you said that you had student nurses
there.
HB: Yeah.
LC: Every so often.
HB: I had some in Vietnam too.
LC: Oh, did you really?
HB: Yeah.
LC: I’ll have to ask you about that. Did they come to you with good training already?
HB: They had some, but not a whole lot.
LC: So you needed—
HB: I’d speak at their classes sometimes. Like I said, you don’t have that much time to, but you make time for them because they’re eager. If you can add anything to it, I don’t think I never added much to them, but we gave them an opportunity to know how you think.
LC: Did you have those nurses stay with you for a long enough time to make an impact?
HB: I don’t think so. No, I don’t think it made that much impact. But answering their questions, sometimes the things that they would see while they were there, answering their questions and explaining what they were for and how you would do it, I think that was probably—
LC: Helen, did you get into any Japanese hospitals yourself?
HB: Oh, yes.
LC: What was the standard?
HB: The standards are high.
LC: Yes.
HB: They are much more so than the Vietnamese were. The Vietnamese had good training, a background to know the French had been in there forty-five years.
LC: Absolutely.
HB: If that, I don’t remember exactly.
LC: Yeah, yeah.
HB: Their hospital system is quite different from ours, very different.
LC: In what way?
HB: Well, the family comes in with them.
LC: With the patient?
HB: Yeah. They sleep under the beds and on the floor and that kind of stuff. They usually feed them. Medications, they may be given the medication to give to the patient. The nurses don’t all do that. A lot of the nurses in Vietnam at that time were male. I’ve never seen—one whole hospital was all male nurses. So it was different.

LC: Yeah. You’ve got the—

HB: You did things, yes.

LC: In Vietnam, would the family have to go out and get the drugs, like if they had—?

HB: They would have them in the hospital, but if the patient had to have something during the night and that, they would give it.

LC: But the family might be administering the prescriptions or—?

HB: They did a lot of the care of the patient.

LC: Yeah.

HB: Technical things that really had to be done or done by the nurses. But on the whole—of course, and then again, when you see a place, a country in wartime, you’re not seeing the way they actually do things. They have to take shortcuts. They’re short of supplies. They’re short of everything.

LC: Right.

HB: And time mostly.

LC: Yes.

HB: So you’re not seeing them. You can’t judge them by what you’re seeing during wartime, very different.

LC: Let’s take a break there.
Interview with Helen Brooks
Date: October 17, 2005

Laura Calkins: This is Dr. Laura Calkins of the Vietnam Archive at Texas Tech University continuing the oral history interview with Cpt. Helen Brooks of the U.S. Navy. Today is the seventeenth of October 2005. I am on the campus of Texas Tech in Lubbock and Helen is speaking to me by telephone from California. First of all, good morning, Helen.

Helen Brooks: Good morning, Laura.

LC: I appreciate your time so much. Actually, it's afternoon out there isn't it now?

HB: Oh, sure. It's just a little after one o'clock.

LC: That's right. See, and I lose track when we're talking about the west coast.

HB: I'm used to it, to the Navy.

LC: That's right. We should do this in, it's what, 1300 hours out there.

HB: It makes sense.

LC: You're right. It does make sense. Well, Helen, just as we were talking before we began recording, you were talking about how the Army brought nurses out to Vietnam and how they were rotated around. Can you go over that again just for our listeners?

HB: I can't give you—again, it was hearsay, but then I did know the gal that was the chief nurse there at the time. We discussed this very thing sometimes. I didn't think that it was a good idea and she thought it was. The young nurses would come out to re-staff, needed a replace, sort of staff a new area. They would either be sent to a limited area, a clinic type thing, not heavy with casualties or anything or they would go to an area where they were taking casualties directly from the field, that kind of thing.

LC: Like a MASH unit or a field—?

HB: I don't know whether they actually went to MASH units. That was pretty severe. But I don't know, they may have. I did talk to some of the Army nurses there
and most of them, well, at least the ones I talked to and maybe I only talked to ones that
thought that way.

LC: Sure.

HB: That it was difficult because when you first go over, you get to be very close
with the people you work with. You live and breath and all that kind of thing with them.
Then in six months to have that shattered and you go to another place and have to get
adjusted to them. If they were in the area where there was a lot of combat casualties, they
felt they were really doing something big and they were. But in the background, if they
were at a POW camp or something like that, they didn’t think that was the real casualty
area. But most of them wanted, especially the young ones, wanted to be involved with
casualties, at least to my experience that was it. I don’t think it was—now we didn’t do
that. We sent them and they stayed.

LC: They stayed in one location.

HB: Stayed in one location. Well, we only had one shore thing. We had ships
and of course they could’ve rotated with that. In fact, one of the doctors thought that
would be a good idea if we rotated from the ship to the hospital. Well, he and I ended up
not very close. I didn’t believe in it at all.

LC: You didn’t think it was a good idea.

HB: Yeah. He thought that was a good idea, but I didn’t.

LC: Why did you think not such a good idea?

HB: Because they were working so well together. They were a team. They got
into that and to take and put them to another whole new situation and most had asked for
the place they were in and hadn’t asked for ships, some of them had asked for ships. Of
course, they didn’t care where they went as long as they got to Vietnam. Ours were
older. We did not have young ensigns or would be second lieutenants in the Army. I just
didn’t think it was good. My nurses didn’t think it was very good, but of course, there
again, my ideas might’ve influenced them. It worked out very good because mine, many
of them are still very close friends. It was a family. That’s what it was. I have a year of
it and have continued their relationship since then. I see them very frequently, as many
are around. We have a reunion every year or so or something like that.

LC: They are, now you consider your friends?
HB: Yeah, I consider part of my family.

LC: Sure, yeah. Helen, you mentioned that there was really for the Navy, only one shore, onshore hospital in Vietnam and that’s where you were, isn’t it?

HB: That’s right. There were some nurses, particularly male ones that were down in Saigon. They were helping out there with the State Department. Isn’t that awful? I can’t remember the name of it, it was very, its motto was to win friends and influence people. They worked inside the hospitals and taught and did all that kind of stuff in the Vietnamese hospitals. The Vietnamese hospitals had a very different structure. They had a lot of male nurses, but not too many female nurses, but they had male nurses. They began to have more females by the time we left Vietnam.

LC: Just for the information of listeners, you have kind of put your hand in the air to help us locate some of those folks who served down in the Delta and the Saigon area.

HB: Yes.

LC: We’ll see what we come up with.

HB: The ones I spoke about before are not the ones that were in Saigon.

LC: No, they were in Rach Gia I think.

HB: Yeah, Rach Gia, Rach Gia.

LC: Rach Gia, down in the Delta.

HB: But they had a very different experience.

LC: It will be very interesting to speak with them I’m sure. Now, Helen, let me just clarify that when did you receive orders to go out to Vietnam?

HB: I was at Key West.

LC: Now, we haven’t really talked about that. What were you doing?

HB: Yeah, I don’t think—did we get to Portsmouth, Virginia?

LC: Yes, you told me quite a bit about Portsmouth. We did it a little bit out of order.

HB: Yeah, well that’s all right.

LC: But we talked about working for Edwina Todd and that you were her assistant and then became the acting chief nurse there and some of the observations about her working style and how you had to kind of pick up the reins. So we did talk quite a bit about her.
HB: That’s right.
LC: And about your experience there.
HB: (Inaudible)
LC: Yes.
HB: Had a brain like a steel trap.
LC: Yeah, sounds sort of like you actually.
HB: Oh, lord no.
LC: No, you don’t think so?
HB: I didn’t have her ability.
LC: Well, you’re a pretty sharp cookie the way you come across in the interviews. So we’ll let people in the future make their own decision about that. But let me check a little bit about your time in Key West. First of all, where were you serving?
HB: In a Naval hospital. They don’t have one there now, but the U.S. Naval Hospital, Key West.
LC: Were you in the OR?
HB: No, I was a chief nurse.
LC: You were chief nurse.
HB: Yeah.
LC: Okay. What was your rank at that time? Do you remember?
HB: I was a commander.
LC: Commander.
HB: Oh, no, by that time, I was—no wait a minute, wait a minute, wait a minute. I never thought that much about rank.
LC: Yes, ma’am.
HB: So I was a commander.
LC: Okay. Tell me about the facilities at Key West and—
HB: Oh, it was an old hospital. Of course, Key West is only about seventy miles from Cuba.
LC: Yes.
HB: They were bringing in—the boat people were coming in and that kind of thing. We had somebody, usually they were brought in, went to immigration. It was a
quiet hospital. There’s an airfield there, Boca Chica, a Navy airfield. It was a very quiet situation really, no great big dramatics. We’d have some accidents and things like that. Well, we had a big hurricane. That was sort of interesting.

LC: What happened? What do you remember about it?

HB: Well, one of the things that I remember is that families came in, of course, the hospital, they didn’t run that many big structures. Well, it wasn’t very big at that, the hospital wasn’t. It was—it would save people—the civilians came in for the security and they brought their families with them. So, that created all kinds of little things. Sometimes they had their animals with them. Then we had an orthopedic ward. The one that we had was on the second floor. In those days, we had people in traction, weights and that on them. We lost the electricity and we were trying to get these orthopedic patients out of there because the whole side, all the windows and all that kind of stuff blew out and blew in whatever way they went. Everything was blowing around and I was trying to help get the patients out of their traction and that kind of thing. A sheet came right through the middle of the ward and wrapped itself around me. I didn’t know where I was. I had to fight my way out of this sheet. I remember that.

LC: Wow.

HB: Because you couldn’t breathe. You couldn’t do anything.

LC: Was it a little scary?

HB: Yeah, oh, well the corpsmen came and rescued me.

LC: I bet they did. They were looking out for the chief nurse I think.

HB: They did. That was fine.

LC: Now do you remember which—?

HB: Pardon?

LC: I was going to ask if you remember the hurricane’s name.

HB: Well, it did damage, you know, here, there, and everywhere, but not to the hospital to any great extent. It knocked out a few things and anything loose went flying through the air, but it wasn’t that bad. I’ve been in hurricanes before.

LC: Now how did you handle the loss of electricity? Did it affect other patients, like you have everybody on monitors and so on?
HB: Well, we didn’t have that many acutely ill patients. We did have some
emergency lighting. Operating rooms and that had emergency lighting. We had
flashlights. It didn’t last too awfully long before we got electricity for the wards.
LC: Now we’ve just had the monumental hurricane Katrina down in New
Orleans, which you and I have talked about it.
HB: Yes.
LC: I’m sure you must have—your heart must’ve gone out to those folks working
in the hospitals there.
HB: In New Orleans, I knew that coast well having been stationed at Pensacola.
LC: Yeah, so you had an idea of what they were—
HB: Yeah, because we used New Orleans as our liberty town.
LC: Right.
HB: It was about two hundred miles from Pensacola. So I don’t even know if it
was that far, but weekends and that, we’d get over there pretty much.
LC: Yeah. When you think back on your own experience in Key West, do you
understand what the medical workers at the hospitals in New Orleans were going
through?
HB: Oh, I know what they’re going through. We didn’t have it anywhere near as
bad as they did. The local population had been through hurricanes so many times, they
took them for granted.
LC: Yeah, yeah. Well, where did you live? Did you live on base?
HB: No, I didn’t live on base. I lived out on a canal, a manmade canal on the
gulf side. I didn’t get home for a few days, but I called someone when the electricity was
available, had them go over and take care of my dogs and cats. I had a dog and two cats.
I always had a few animals around.
LC: How did the animals do? Were they okay?
HB: Oh, they were frightened, but I didn’t see them for four or five days.
LC: Yeah. Yeah, they get scared in that weather.
HB: Yes they do.
LC: Yeah.
HB: Any great change. They could almost tell you ahead of time that it’s coming or something’s going to happen. They seem to have some kind of premonition that something different is going to happen.

LC: I think you’re right.

HB: I think they know.

LC: Yeah. How did your—was it a house that you were in, a little bungalow?

HB: It was a little bungalow.

LC: Did it sustain any damage?

HB: Not much, it just got wet. Everything else did. A nail came up and came in the door. Other than that; it didn’t do much harm. Everything was concrete, the floors were not marble, but tile or something.

LC: Tile or something?

HB: Yeah.

LC: Yeah, very Floridian.

HB: Yeah, but Key West is a fascinating place.

LC: Yeah. Did you have fun there?

HB: Oh, lord yes. It was funny. They were so many things. The general population is a little bit different. They sort of like Hemmingway let everybody know what Key West was like when he lived there. Yeah, his place was covered with cats. More cats in Key West than there was anywhere. Then their politics are a little different. I was sort of interested in the politics in Florida because I had a cousin-in-law who had been a county commissioner for years.

LC: Okay.

HB: He knew all the big Whigs, all the politicians in the Key West. So that gave me an in, I got to know all those people too. Having elections, the ones that got in got elected would put the others that had been in, they’d put them in jail for some reason or other. Next time election came, they’d get out and the others would go in. It was funny, it really was.

LC: So you were kind of tuned into local politics?

HB: Yeah. I didn’t ever get into politics very much, but I was interested.

LC: Yeah, you were aware of what was happening.
HB: Things were different. Most of our—like as nursing assistants and the record keeping people and cleaners and all that were from Key West. Whenever there was a death, I always felt it was anybody that was on my staff and it was on that nursing service budget, I should go to a funeral. Well, Key West sort of lives in the old days too. It used to be very hard because they had to come by boat before they put the bridges in. So they’d have to wait for the family to come and sometimes it would be oh, three, four, five months before they could get there. That tradition sort of held on. They’d keep the patient or the dead body in a room and keep it cool somewhere or other, or it might stay at the undertakers. Then they’d have a big, big funeral and there would be a procession down the street. I mean, everybody would fall in line behind the casket and there’d be a band or people playing horns or something or other. Then we’d just go through the street. Well, the first time that happened, I went to the funeral in my dress uniform. I mean, that’s what you do when you go to a thing. Here I am walking down the street at a funeral. It surprised me, but once I had done it, I had to do it for all the other funerals. Anyways, that was more of an aside.

LC: Well, did you always show up in your dress uniform or—?

HB: Sure, I did it once, I had to do it from then on.

LC: It was kind of expected probably.

HB: Yeah, and of course, it’s hot down there, especially during hurricane season.

LC: Yes, ma’am.

HB: There I am all dressed up. Once or twice I got other nurses to go with me.

LC: But you were hard pressed.

HB: That’s what it was about. I got invited to every funeral they could possibly scrape up.

LC: Well, Helen, how many nurses did you have working for you?

HB: I don’t remember. It wasn’t very many.

LC: And corpsmen?

HB: Maybe, oh, I can’t remember the numbers. I used to keep rosters of them, I don’t remember.

LC: Was it just a handful or—?
HB: Oh, it was more than a handful. I’d say twenty, thirty, something like that. The corpsmen, of course there would be more because they had other duties as well. I just don’t remember. Memory gets short after a while.

LC: Well, that’s okay. I was trying to get a sense of how many people you had under you.

HB: It wasn’t very many. It was one of the smaller hospitals. I went there because I was going to have a hospital. I had asked for California. They called me from the bureau and they asked if I would go to Key West, a friend of mine who had been there. She was a nurse down there, was retiring. The hospital I was going to wasn’t ready yet and they were building it. So I said, “Sure, I’ll go,” because I loved Florida. I had a lot of relatives in each area. So I went down and I thoroughly enjoyed it.

LC: You said that it was relatively quiet.

HB: Well, yes.

LC: I mean, obviously relative to say San Diego or Portsmouth.

HB: San Diego, Portsmouth, Virginia, Oakland. They were the bigger hospitals.

LC: But you did have some refugees from Cuba?

HB: Well, we didn’t get many of them, no, but they were coming in by boat. What do they call that? Oh, I can’t remember. Muriel or something and they would come in. But we didn’t get them, but we used to go down and watch them come in.

LC: Really?

HB: Yeah.

LC: How would—?

HB: That was just a delightful time. It really was, had good people, a good staff. It was easy, not too many problems.

LC: Not too many problems, yeah. In the chain of command, who would you report to as chief nurse?

HB: Change of command, who would I report to?

LC: Yeah, in the chain of command.

HB: Oh, in the chain.

LC: Yeah.

HB: The captain in charge of the hospital.
LC: Okay. Who was that? Do you remember?

HB: Executive officer.

LC: Who was the captain in charge?

HB: I have it written down someplace, but I don’t have it right here.

LC: Okay. Was it somebody that you worked with well?

HB: Yes, yes.

LC: Well, that makes things nice too.

HB: Yeah, it always makes it good.

LC: Yeah, when you have a good working relationship.

HB: We had a good staff all the way. It wasn’t that demarcation. We were all mixed in together.

LC: Helen, did you pay much attention to the development of the war in Vietnam at this time?

HB: Well, of course I knew people who were going and some of my nurses were putting in asking if they could go. So I knew the people going and I knew the ones that had gone over to the, lets see, we had that hospital in Saigon, but then that was closed and they opened the one up in Da Nang, it was a much bigger hospital. It was closer to the action. So I think the Army took over the hospital in Saigon. It was an entirely different situation.

LC: Did you give much thought to the politics of American involvement in Vietnam?

HB: Well, I’d heard a lot about it.

LC: Yeah.

HB: The one that was killed?

LC: President Kennedy?

HB: No, no, no. I’m talking about Vietnamese and they blamed the Americans. They thought the Americans were behind the killing.

LC: President Diem?

HB: Yeah, it was one of the Diem’s.

LC: Yes.
HB: Of course, I’d heard that stuff. The girls that were stationed, at that time, when he was killed there shortly thereafter, the hospital in Saigon was open. So they knew more about the political situation. One of the gals here was there during that time.

LC: Okay, wow. That’s one I hope that you’ll help us get in contact with.

HB: I’m sure she will. She’s not too well, but she’s—

LC: We’ll see how we go. Just yeah, we’ll see how we go. Did you have a sense of whether President Johnson was running the war in a good way? Did you feel like the United States was making a good commitment there or did you not really have a view on it?

HB: No. I just thought that McNamara left a lot to be desired as Secretary of Defense. I mean, he’s a good man. But there were problems, but they didn’t affect me any.

LC: No.

HB: I just had a job to do and we did it.

LC: Yes, yes.

HB: Of course, you can’t help but think of it. You’d hear things from some of the people that worked for us because we had quite a few of the Vietnamese working for us, nursing assistants and cleaners and things like that.

LC: Now this was once you were in-country?

HB: Pardon?

LC: Once you were in-country at Da Nang.

HB: Yes, yes.

LC: Well, let me ask you, when did you find out that you were going to be going to Da Nang?

HB: Well, I found out we had a—I think it was a, I don’t know, the American Nurses Association meeting or it was a Navy meeting, I’ve kind of forgot. It was in San Francisco. The director of the Navy Nurse Corps told me—I had been asked, when I really, I was drooling at the mouth to go. When they took the hospital ships out, I wanted to go on the hospital ships so bad. But my mother was then eighty-eight years old. My sister had a husband who was very ill. I was needed at home, I really was. I had never asked for anything like that. But you’re supposed to be a volunteer. I just couldn’t. My
conscious wouldn’t let me volunteer as badly as I wanted to. So at that meeting, the
director of the Corps said, “Oh, you just volunteered.”

LC: Now who was the director then?
HB: Bulchevsky, Captain Bulchevsky. They weren’t admirals in those days.

LC: That’s right, not like Fran.
HB: Yeah.
LC: Not like Fran Shea.
HB: I think she was the third admiral, no maybe, no—
LC: Yeah, maybe third. Yeah, third or fourth, she was right up there.
HB: The first one was Ilene Dorr, a very dear friend of mine. We spent time in
Japan together.

LC: Oh, is that right?
HB: Yeah. She’s a jewel.
LC: Yeah. She’s on my list too.
HB: Yeah. Say hello for me when you talk to her.
LC: I will indeed. I will indeed. She was the first admiral as you mentioned.
HB: She was the first admiral. I was someone they couldn’t have selected.
LC: That may be why they decided to do it.
HB: One of the gals, the gal that was my assistant in Vietnam, and she and Ilene
are together daily, they live close together in Florida. I’ve also talked to Lacy, her name
is Foley, but we call her Lacy. I did talk to her about interviewing.
LC: Terrific, okay great.
HB: She’s a typical Irishman. She’s very different. She’s very good at personnel
work, very good. She can charm the birds out of the trees. She’s got an Irish wit. She’ll
say something and you’ve never heard the expression before and you’ll never hear it
again. She makes them up as she goes. She’s a very dear person.
LC: Terrific. She was your assistant in Da Nang?
HB: Yes.
LC: Well, tell me about how you got out to Da Nang.
HB: Pardon?
LC: How did you get out to Da Nang?
HB: How’d I get out?
LC: Yeah, how did you get there?
HB: Well, I was at Key West because I was detached there. Then I went home for some leave and I drove across country. I had to report to, oh, lord, where did I report to? I had to report here because we had to go to counterinsurgency school. We were supposed to learn how to fight off the enemy.
LC: Oh my goodness.
HB: So we went to counterinsurgency school.
LC: What do you remember about that? Can you tell me anything about that? Do you remember anything about it?
HB: Oh, they just went over the politics of the situation, the dos and don’ts and how to get along with the—how best to help the Vietnamese. That’s what they were trying to tell us. Also what to do in case there was a stock emergency or something like that. I don’t remember much about it because it didn’t seem very important to me.
LC: Did they give you any weapons training at all?
HB: Oh, they tried to teach people how to shoot.
LC: How’d you do? How did you do?
HB: I couldn’t hit the broad side of a barn, ever, and I knew it. So I didn’t take it very serious.
LC: Okay, but you got through it somehow.
HB: Sure. Simple.
LC: Was there anything useful that you got out of it?
HB: Anything I got out of it?
LC: Yeah, anything.
HB: Well, just I met some of the people who were going to go over with me. I went over by myself. So I went over a little bit ahead.
LC: How did that come about?
HB: Well, I’m not sure. I don’t remember exactly. I had to go up to Travis to get the plane. I did that. I flew to San Francisco and then took a bus I think up there. But I drove out to California, drove out here to San Diego and left my car with the people here. I also had to bring the two cats and the dog to someone to look after, so I did that.
LC: So you got that all arranged.

HB: Yeah. Well, I drove up from Key West to Charleston, South Carolina and dear friends of mine, two sisters who were also Navy. They agreed to take my cat, my two cats and dog for the duration. Now that’s what you call friendship.

LC: Yes, yes indeed.

HB: Yeah, that’s right.

LC: What kind of dog was it?

HB: Poodle, brown, chocolate brown poodle.

LC: Oh, sweet.

HB: He didn’t know he was not human.

LC: He thought he was one of you.

HB: Yeah.

LC: Thought he was a people.

HB: That’s right. He was funny. If he saw a dog that looked hungry, he’d bring him home and let him eat out of his dish.

LC: Oh, what a good dog.

HB: Open the door and let him out again.

LC: But you said that these two gals were sisters, they were both in the Navy as well.

HB: They were in the Navy and they had their mother and father. They were very good.

LC: Oh, it sounds like they were very, very good to you.

HB: And kept them.

LC: That’s something else.

HB: But the dog died. I felt bad. When I pulled away that day, the night that I was leaving them in Charleston, Robert Kennedy was killed. Of course, we stayed up with that. I didn’t get much sleep. But the day that I drove away leaving them there in, the dog ran after the car as far as she could come. I was just heartbroken.

LC: Yeah, that just makes you so sad.

HB: It was bad. He died. He didn’t eat. He just refused to eat.

LC: Broke his heart too sounds like. Oh, dear.
HB: That was bad. I got that news in Da Nang.

LC: Let me ask you about, you said you stayed up that night because you had heard the news about Robert Kennedy. What did that, how did that affect you? I mean, how did you feel about it?

HB: Discouraged that this could happen in our country, take off two young men, his brother first and then him. He had been doing so much to try to help the situation out. You just felt, what is happening to my country.

LC: Of course, you know, of course as you mentioned earlier, Helen, the Kennedy’s were from, I mean, they’re from your part of the world.

HB: Yeah, sure they were.

LC: Did it—?

HB: His uncle lived in Lowell, my hometown.

LC: Who did?

HB: One of their uncles.

LC: Oh, right.

HB: It was Kennedy’s brother I believe it was, lived in Lowell. I think he was on the fire department.

LC: Did you think that, I mean, this is a political question. It’s up to you how you would like to reply, but obviously President Johnson was not going to run for president again. Did you think that Robert Kennedy might have made a good president?

HB: Yes, I think he would have, very definitely.

LC: Yeah. A little bit earlier of course in the year, Martin Luther King had also been shot.

HB: That was another time that broke my heart.

LC: Yeah. Where were you? Were you down in Key West when that happened?

HB: I don’t remember exactly where I was, but I remember Robert Kennedy going to immediately and to see Coretta. He stood by that family as he did Jackie during her trials when John was killed.

LC: Yes.

HB: He just did those kind of things. I don’t think anybody told him to do it.

LC: Yeah. But you had a sense of loss around both of those.
HB: Yes, very definitely.

LC: Yeah. There were of course riots in some parts of the country.

HB: Yes. Well, I could understand the Negroes rioting. I couldn’t understand the whites. All my life I’ve been an independent. I could neither be a democrat or a republican because I’d switch around. If I liked them, I didn’t care what party they were. If I thought they were willing to handle things and could handle it, young enough to tolerate what goes on, I’d vote for them. But I have never been able to affiliate with any party, although I’ve worked for some politicians.

LC: Candidates.

HB: In the military, you don’t really go all out for working for politicians.

LC: Well, no, no.

HB: We’re not very acceptable to do it.

LC: No.

HB: But I did some.

LC: Did you observe any incidents of racial tension that you remember?

HB: Oh, yes, I remember them. I remember them both in and out of the service. I remember going to Florida. I went to Florida very early because of family there. I can remember the shanties that they lived in with all the drapes over the windows, no glass or anything. The areas they had to live in and people cursing them as they—an old Negro going across the street, if he was slow, they would curse and pretend they were hitting him, I remember that. I was shocked because I came from Massachusetts. I know the first Negro I ever saw, my father was alive and because of his heart condition, he had difficulty in the fall and spring of the year. But his family came from Northern Vermont and they were up high. Up there they call them hills, but they’re close to mountains. That’s where they lived and he would leave Massachusetts and go up there and because I was the only one that wasn’t in school, he would take me with him. One Christmas, he was there for Christmas. It was the night before Christmas. My family always has had Christmas the night before. We never had our Christmas tree up until then. Dad would tell us, when the other kids would get their stuff on Christmas morning, we’d ask him, you know, “How come we get ours on—how come Santa Claus comes”—we were still at the age where we believed that.
HB: He said, “Oh,” he said, “That’s because you’re so good. He comes to kids according to who’s good and who’s bad.” We believed him of course.

LC: Of course.

HB: Evidently it was a tradition in his family too. We were up there and the night before Christmas, I was sitting on his lap in the sitting room. The door opened, their houses up there were strange. Somebody came in the door with two little black ones and the father was black. My father’s hand came right across my mouth. I just remember the feel of that hand because of course, I was going to say something big because it was the first time I’d ever seen anybody black. His hand, I knew I wasn’t supposed to say anything. He closed my mouth. So I never forgot seeing my first black.

LC: He got there just in time.

HB: He had me. He knew what was coming.

LC: But do you think that growing up in New England, you had would you say more tolerance than maybe some people in the south?

HB: No, I don’t think so. We had some pride in the family. Negroes that had come in were descendants of some of the ones that had come Underground Railroad. My grandfather’s place was one of the places they would go, about the last stop before they went across the line into Canada. So we always felt that they were something special to us, the Negroes.

LC: Up in Vermont?

HB: Yeah, up in Vermont.

LC: No kidding?

HB: Yeah.

LC: Wow.

HB: I knew because the family talked about it.

LC: Sure.

HB: Not bragging, but because they were able to do something to help these people. Some of them had come long journeys, a lot of it on foot traveling at night only.

LC: Oh, yes, absolutely.
HB: They got there and they would feed them and that. Then they’d go across into Canada. It wasn’t very far from the line. Evidently my family had come down across the line when the French took over, I guess. I don’t know the whole story. They didn’t go very far. They were up in Northern Vermont.

LC: But you grew up knowing that your family had been involved in the Underground Railroad.

HB: Yeah. I don’t think it was a real extensive involvement, but some people stayed there. Most of the war ended and this group stayed. It’s unusual, even now you don’t see too many blacks up in Vermont.

LC: No, that’s probably true.

HB: Vermont is a very different breed of people.

LC: Yeah. Why is that?

HB: Yeah.

LC: What makes them different in Vermont?

HB: They’re very independent.

LC: They’re just independent, yeah, yeah. Well, I mean, politically, it’s a very important state because of the primaries and so on. But yeah, it’s a very interesting—

HB: I’m sure that’s where I got independent voting.

LC: That’s right. That’s right. When you were living for example in Key West, did you see incidents there where either blacks or Cubans or other Hispanics were kind of given a hard time or not so much?

HB: No. The Cubans were pretty well integrated. We didn’t have many of the, don’t say lower class, but the ones, the poorer people and the ones with less education. You didn’t see many of them. It was the doctors and lawyers and that kind of group of people that got out of Cuba first. They were the ones that came out.

LC: They were pretty well integrated into—?

HB: Yeah. Some of them had been there for years and years, families had been. You didn’t see much of it.

LC: We were talking about you going out to California, that you drove out to California out to San Diego in 1968 and that you had to go up to San Francisco. I mean,
this was the summer of love, right? I mean did you see any evidence of kind of anti-war, hippie culture, all that that was going on up there?

HB: Never saw any anti-war.

LC: You did not?

HB: No. Although some of my nurses coming back said that they had seen it, but I didn’t.

LC: You didn’t see anything?

HB: Usually I got the usual eyesight at that stage, not so hot now, but I didn’t see any antagonism. No one ever said anything to me. They probably would’ve got a sock in the eye, but no one ever did.

LC: You said that you actually flew over to Vietnam, is that right?

HB: Yeah.

LC: Where did you stop on the way? Do you remember?

HB: I stopped—I think we refueled in Hawaii and the Philippines. But we didn’t stop long. We just went along. I landed in Saigon.

LC: Really?

HB: Then I had to get from Saigon up to Da Nang, which is up north. I hadn’t had the faintest idea how I’d get there, but I figured I would somehow. As I got off the plane and came into the, of course, it was filled with military people.

LC: Yes.

HB: Here’s a guy in uniform. I went over and spoke with him, ask whereabouts he was and what would be a good way to get to Da Nang. He said, “I’m going to Da Nang, come on with me.”

LC: Really?

HB: It was the chief of surgery. Prior to his getting in the Navy, he had done a missionary tour. I don’t know, wasn’t exactly a missionary, but it was some kind of a helping group. He had done that in Vietnam and Saigon. So he knew the area well. So we hopped a plane and landed in Da Nang.

LC: Now what was his name, Helen? Do you remember?

HB: Vern Fitchat. He’s dead now.

LC: How do you spell his last name?
HB: Oh, don’t ask me, I’m the world’s worst speller. I think it was F-I-T-C-H-A-T. I think, I’m not sure, I’m going to have to ask somebody or I’d have to go look at some of the pages I have.

LC: Well, maybe we can—we can look it up too. But Fitchat was his last name?

HB: Yeah. Vern was his first name, at least that’s what we called him.

LC: So you just kind of found him.

HB: Pardon?

LC: You sort of found him by serendipity it sounds like.

HB: I told you the Navy’s one big family.

LC: Yeah, yeah. Well, he must’ve found out immediately what your position was too.

HB: Well, if he didn’t, I told him.

LC: Yes, yes ma’am. So do you remember that flight up to Da Nang?

HB: Not very.

LC: Not so much.

HB: Pretty tired.

LC: Yeah.

HB: He managed to get transportation from the airfield over to the hospital.

LC: What do you remember when you first arrived at the hospital? What were your first impressions?

HB: Well, he dropped me off in front of the nurses’ quarters. The nurses’ quarters were a group of Quonset huts all connected together. But you couldn’t go from one hut to the other, you had to go out under this little pathway we had, dirt floor. Some of the floors were dirt. Some of them that the Seabees had put down concrete and put the Quonset huts on them. There was a couple of them, they had put linoleum down, those linoleum squares.

LC: Yes.

HB: They had put them down with red kind of cement or blue, whatever kind of stuff. It would seep up through the cracks. Of course at night, whenever there was a bombing going on, we soon learned not to go out to the bunkers. We’d go under the beds. For a long while, we were red all over.
LC: Oh, dear.

HB: That red goo would come up, get all over our clothes. That was a time. We called our quarters, well, we named it ourselves. The Da Nang Hilton. They were already calling the one up in Hanoi, the Hanoi Hilton. So we named ours the Da Nang Hilton. We had, let me see, six people to a hut. They would divide it into sorted rooms. The rooms were about six by six or six by eight, something like that, not very big. There was a bunk and a chest of drawers. That was it. It wasn’t hard living. It wasn’t bad. We got used to it. And gradually we got the old stuff up off the concrete, got all of them with concrete bases and then had talked the Seabees into doing some real linoleum, whatever you call that stuff, and so that we got rid of the red business.

LC: So you got that changed overtime?

HB: Yes. The Seabees were wonderful to us. You know, like always, when you’re overseas, when there aren’t many women around, they do everything they will to get you to come to a party. They’ll always have a party. They’ll always say, “Oh, we’ve got steaks.” Well, steak was something, we got so sick and tired of this steak that was cooked over gasoline, the drum with charcoal, it tasted and smelled like kerosene. It got so we didn’t, you couldn’t beg us to come for steak. We didn’t want to go. We didn’t have much time to do it anyway. They would try. They would try so hard to get us to go. We’d try if it was at all possible. If people weren’t so tired that they could dance a little bit or something, we’d go. But they never went alone. If they were going to go, either we had an officer with a gun on his hip or I went with them.

LC: Now this was just to kind of what, keep everything in line?

HB: Yeah.

LC: So nothing would get out of hand.

HB: They’d try to get—they’d want to smooch and all that kind of stuff. Uh-uh, none of that on my watch. If I just saw them sneaking off to go and try to get someone alone to talk to, they didn’t do any—there was no sexual harassment. These were lonely, lonely men. They’d come in from the field. They’d work so hard. You’d do all you could, but believe me, the women, both World War II, Korea did double duty. We did USO (United Services Organization) work as well as take care of patients.
LC: By for example listening to them and trying to keep their chin up and that kind of thing.

HB: Oh, yes. Just (inaudible) once in a while. It wasn’t romance with it, but of course, there was some that formed attachments. Of course, most of the men were married. I always found out, I’d have the Catholic chaplain or the Protestant chaplain if we had one get them to tell me if a new fellow turned around was married. If he was, I let the gals know right away. I think we did all right. Oh, there were some hearts that got broken I think, but that’s part of living.

LC: It’s kind of inevitable.

HB: Yeah. But you got to have someone that’s going to do those things. To tell you the truth, I didn’t do much nursing. I had qualified nurses there. My thing was to keep them well enough and happy enough so that they could work. I spent more time looking after the Da Nang Hilton than I did looking after patients.

LC: How many nurses did you have when you first got there?

HB: I had seventeen.

LC: Did that number grow while you were there?

HB: Oh, not much until we had—oh, the malaria was terrible. It was just as bad as the trauma. We had deaths from falcip malaria. I lost my train of thought. I began thinking of those patients.

LC: Do you remember some of the patients?

HB: Yes I do, but you don’t get to know them unless you’re really taking care of them. I would make the rounds of course and go here and there and make sure people weren’t getting overtired or that they had what they needed to work with. Somebody wasn’t giving them some trouble. I would do that and see if they needed anything. So I was the jack-of-all-trades.

LC: Well, at this point, that’s pretty much what the person in charge had to be.

HB: That’s right. As far as being, knowing the OR, that was the one place I never got. Very seldom did I get to the operating room. I’d just go see the nurses and I’d see them as they came off duty or went on duty, but I didn’t get much sleep.

LC: Well, Helen, who was the OR director, OR supervisor there?
HB: Well, I had two or three, but they weren’t—they sort of, they were all senior OR nurses and we sort of spelled one another. Nobody was really directing, in charge because they worked with the patients all the time. But I was the OR supervisor.

LC: Essentially, in addition of course to being chief—

HB: But I didn’t get into the operating room very often.

LC: And just to clarify—

HB: Not very often.

LC: Yeah.

HB: But I got to the wards very often, intensive care, POWs, all that stuff.

LC: How busy was the hospital? Did it come and go in rushes?

HB: It was very busy. As soon as you got a patient that could travel—well, they would travel long before they could normally travel. You have a patient in a body cast from his chest on down and the cast wasn’t even dry before we’d send them over to the airport. The Air Force nurses, I got to give them credit, they were wonderful. They came over to the hospital. They would come in, the flight would come in. It was clear across—the Da Nang Airport was across town. We were out on the beach. So the beach was right there. They would come over to the hospital. They had like trailers that were very nice that they used and stayed in and sometimes would hold patients until they got them on the plane. But they would come over the night before and see each patient, talk to the nurses that were taking care of them and make plans to take them to the—so if they had to go with blood, if they had to go with IVs, if they had special medication needs, they would see to it, the nurses and them. There was good communication between the two groups.

LC: Did that run through your office, the communication?

HB: No, they did it directly on the ward. They went to the wards with the nurses in charge of those patients. They made their arrangements as to what they needed for the trip and where they’re going. Although the planes were well equipped they didn’t really need to take very much with them.

LC: But they were there to make sure that the—

HB: Well, they took some awfully sick patients. I don’t know how they survived. I don’t ever know, but they did. They’d either get them to Japan or they’d get
them to the Philippines. Those hospitals were swamped. Even Guam got some of the
fresh casualties. I don’t know how they did it.

LC: Did you have a chance to speak with any of those Air Force nurses?
HB: Oh, yes.
LC: What impression did you have of them? I mean, you’ve said they did great
work.
HB: I felt that they were very capable and mature in their judgment.
LC: Were they younger like the Army nurses or more mature?
HB: No, there weren’t that many younger ones among them.
LC: More like the Navy then.
HB: I’m sure there may have been, but they carry themselves older. But they
were very good.
LC: Did they have—?
HB: There were some excellent Army nurses. I don’t mean that.
LC: No, no, I understand, yeah.
HB: Even despite their likes and dislikes they did.
LC: Sure. Well, it’s interesting that the patients then had to be kind of transferred
over to the airport.
HB: Yes.
LC: And then flown on.
HB: That’s right.
LC: Did you know which patients would go where? Did you—?
HB: No, I didn’t know where they would go because sometimes it just depended
how they could travel. They got them to the closest place they could. But you see, you
couldn’t—we’d get filled up. If you took in, and we didn’t take quite as many as we did
aboard ship in Korea, but if you took in fifty to a hundred patients, you had to let them
out someplace or you’d soon be choked with casualties. So you’d have to let them go.
Even you would think, wish you could keep them for another couple of weeks, but you
couldn’t.
LC: How would the patients get to Da Nang? How would they get to the
hospital?
HB: Helicopter, almost all helicopters.

LC: Would they be coming right from the field then?

HB: Yes, right from the field. They might’ve had an aid station. They might’ve had a corpsman snap on a blanket, a bandage or a tourniquet or something. Some of them came in with blood started, but they came right from the field.

LC: So you would be seeing primarily Marines.

HB: Mostly Marines, but we had VC (Viet Cong). Well, we had VC prisoners too, but we had Vietnam Marines, Vietnam Army. Whoever needed help got it. We had American Army, two of course, but there weren’t that many in our area.

LC: That’s right, yeah. Tell me about treating the Vietnamese who were our allies.

HB: You mean Vietnamese casualties?

LC: Yes.

HB: Oh, we had civilians as well as the—most of the patients we had, the combat patients we had were Marines, the Vietnamese Marines. But we’d get some others when they were around. We’d get some—although the British, there was some other troops that had participated, we didn’t have very many, not like we did in Korea. Korea was a mishmash of everyone.

LC: But you didn’t see for example very many Australians?

HB: Yeah. Well, there were some Australians there too and they would come up, but they had their own medical people with them.

LC: I see. Did the Vietnamese Army and the Vietnamese Marines have their own medical facilities?

HB: Oh, they had their own, but they didn’t have all the facilities that we had.

LC: I see.

HB: But it was good. They were very good to their patients.

LC: Did you ever get off base enough to go to a Vietnamese Marine hospital for example?

HB: Oh, yeah. They weren’t separated from the Marines and that. It was a Vietnamese hospital.

LC: Vietnamese hospitals.
HB: Yeah. Yes. Their system is quite different from ours, not in the military ones so much as the civilian ones. We had something to do with the student nurses and that, if there was time, we just didn’t have much time for such things. Some of the nurses like the ones in Saigon that were with the CORDS (Civil Operations and Rural Development Support), CORDS unit is what I was trying to think of before.

LC: CORDS, yes.

HB: Like the State Department, but some of these were Navy nurses and there were also Army nurses that would be involved. Most of them were male nurses that were down in Saigon of ours. They would tell me the things they put up with. They’re very different from our way. The patient’s family came with them. They would sleep under the bed. They’d cook the food right there beside the bed and feed them. There wasn’t a whole lot of trouble trying to feed them and that. That’s not always—not anything is solid fast.

LC: Sure, sure.

HB: The nurses would go to bed at night sometimes and the relatives would give them their medications and things. It was different from ours, but they did very well. They really treated their patients well because they’re family oriented, extended families.

LC: Helen, when you came in as chief nurse, were there changes that you needed to make?

HB: Yes.

LC: Can you describe the things that you saw that needed improvement?

HB: Well, the trash was haunting. It piled up. Well, we had trouble with it too. The flies, oh, the flies. Of course, here we are with surgical wounds and we’re trying to keep them clean, trying to get it organized so that we didn’t have trash hanging around, dirty dressings, things, that kind of thing. We finally got plastic bags and got them taken care of so that close off a little bit, you couldn’t do it entirely. Then we had a dump. The hospital was on a street over by the water. We were right on the ocean and Marble Mountain. Well, I forget, I don’t know what the—I’ve forgotten what the Vietnamese call it, the Mountain of Marble and the whole thing is carved inside rooms and everything. There was no way you could go near it because the VCs and the enemy was all holed up in there.
LC: Yeah.

HB: And every once in a while they’d come out. Well, one time they came out and they captured our trash, our dump. Well, if you don’t think we were in trouble, we had no place to put our stuff. There was a Seabee camp next to us and then Marble Mountain. Our dump was in between Seabees and Marble Mountain.

LC: Oh, boy.

HB: Once they got our dump, we were stymied.

LC: What did you do?

HB: Well, we bagged things as best we could and we got someone—I don’t know who did it, but they got some group to come and throw them out of there so that we had it back again.

LC: Because that was pretty important, having a place to—

HB: Yeah, and having it clean. Then we had some interesting patients. We had one civilian—well, we had civilian casualties too you know.

LC: Uh-huh. That you would treat?

HB: One of them was brought in and she was pregnant, really full term, pretty close to full term. She had taken a gunshot wound in the abdomen and had to quickly do a c-section because she was bleeding. They got the baby out fine, but the baby had a little nick in his butt from the bullet or shrapnel, whatever. Anyway, we called him Nixon Nguyen.

LC: You called him Nixon Nguyen?

HB: Some newspaper reporter got a hold of it because we didn’t keep the baby there. We kept it for a few days, but we couldn’t start a newborn nursery. This newspaper reporter got it to Washington and Mrs. Nixon, she sent over a whole layette, a lovely thing for the baby, but the baby was long sense gone and we couldn’t find her. So some other little Vietnamese baby got it.

LC: What was included? What did she send?

HB: Pardon?

LC: What did Mrs. Nixon send over?

HB: Baby clothes, things, very nice. Blankets and with little bath blankets and clothing for a baby, a new baby and powder and soaps and that kind of stuff.
LC: Sure. That’s interesting.

HB: We never could find her. The baby didn’t get the present. I don’t think it ever got the present because I couldn’t bother—I would like to have bothered with that kind of thing, but I couldn’t. But we did have children and we would get clothes from someone—the chaplains evidently told his church, he said we needed children clothes. We’d get these bundles of clothes. There was no place to put them except in my office, which I never got to. I seldom ever got to an office. There was a Quonset hut that was designated as the nursing office, but I never made it, very seldom.

LC: Right.

HB: I kept them there and then if they had any kids, either the nurses or the corpsmen or somebody came over and we’d give them clothes for the kids. Well, the kids certainly, they got to know that that’s where the clothes were and they wanted them. Well, there was certain things they wanted, there was certain pieces. There was one that was a ruffled dress, a pink ruffled dress. Every morning it was a battle with these kiddies because they all wanted the same dress. Another one must’ve been a Halloween costume of—oh, who was popular at that time—one of the cartoon people.

LC: I can’t remember.

HB: Anyway, they got so they’d come over to the quarters and they’d be lined up outside the Da Nang Hilton door and follow me. All of the Quonset huts were connected by a covered walkway, just would open at the sides of course. I’d go marching over to the office and all these kids trailing behind me and they were coming to get their clothes. I wish I had pictures of it. I got teased. I called it my Army.

LC: Now did they have a name for you?

HB: When I got over to the office, then the fun would begin.

LC: Oh, yeah.

HB: They wanted this. They wanted that. They wouldn’t put that on. They were just like any kids you want to know.

LC: Right, right. What did they call you? What did the kids call you?

HB: Oh, lord, what was it? I’m trying to remember the Vietnamese word for captain. They called me a few other things too. I don’t know, but—

LC: Okay, but they—
HB: Talk about names, what did I get called. We had some Koreans that were brought in as sort of a workforce that did things around maintenance and that kind of thing. I wasn’t there more than a day or two that I ran into this Korean. I didn’t know him from a (inaudible), but he remembered me. He was one of the boys that came aboard ship in Korea to wash instruments, he was a kid. He called me God damn chiefy. No matter where I was, that’s what he would call me, God damn chiefy. His language he’d learned you know, from—

LC: Oh, sure.

HB: From the sailors and the soldiers, that was terrible. I did everything I could to stop him. The Quonset hut that had the office in it didn’t have air conditioning. He said, “God damn chiefy, you’ve got to have air-conditioning here. You can’t live in Vietnam and not have air conditioning.” Well, the Vietnamese had lived there for years and they didn’t have air-conditioning.

LC: That’s right.

HB: But anyway, I went down to give the CO the report one morning about what was going on and he was stewing. He had lost the air conditioner out of his Quonset and I knew where I got mine. God damn chiefy got it. So I said, “Never mind, you will have it back shortly.” So I had to round up this Korean and tell him to take it back. You want to talk about names. Some of my nurses decided that it would be just the thing to call their chief nurse deary. So they all called me deary and it wasn’t long before everybody else was. To this day, I’m called deary. They still do it.

LC: Well, I’ve heard that it was thought even out on the ships, even out on the hospital ships that you took care of your nurses better than anyone else there at that time.

HB: Well, they took care of me too.

LC: So it doesn’t surprise me too much that they had, that they wanted—

HB: Oh, they thought it was funny. They thought it was funny.

LC: They thought it was funny, well, yeah, but there’s a message in there too I think.

HB: I think so too. I loved them all.

LC: Well, I think that—

HB: Although, there was a few exceptions, I could’ve killed—
LC: Well, but basically, this was a group you were proud to be in charge of I’m sure. Let me ask about, a little bit more about the patients, Helen.

HB: Okay.

LC: What about enemy casualties? How were they treated, any differently?

HB: No, treatment was the same. It was hard. Well, first of all, we had them in an air conditioned—they put up, I forget the name of these wooden buildings, they were, they were stick made, but there’s a name for them, but I can’t remember it now. We had one, that was one of these buildings. It looked like a regular building sort of. It had air conditioning. Believe it or not, we had the POWs in there, the Chinese and the North Koreans. They froze to death. They couldn’t stand the air conditioning. They wanted the air conditioning turned off. So, well, if they don’t like it, why don’t we take them out of the air conditioner, put some of our people in the air conditioning? So we did. We switched them. But we found out that the air conditioning was a Godsend to the malaria patients. Their temperatures would fly up. I never saw temperatures so high.

LC: How high, Helen?

HB: Pardon?

LC: How high would they go?

HB: Oh, they’d be 107 up there. You wouldn’t think they’d ever come back again. But when we were having enemy action, bombs and things, we put everybody under the beds. You couldn’t evacuate them, you know. So we would put them under the bed as best we could. The temperatures, I didn’t notice it, but one of the nurses noticed that after they’d been under the bed for a while and it was all clear sounded, the temperatures of the malaria patients was down. We figured the cold concrete was the thing, the treatment of choice. So for patients, that really high temperature, under the bed he went and got cooled off.

LC: Put them on the floor.

HB: But it did, it worked.

LC: But the—

HB: Our method.

LC: Well, you had to be creative, that’s for sure.

HB: That’s right.
LC: It sounds like most of the wards though were not air conditioned at this time.
HB: Well, gradually they got quite a few of them air conditioned, but it was not
easy going from air conditioning to heat, from heat to air conditioning. Of course, it was
muggy. The moisture was great, especially during monsoon season. Monsoon season
was not a good thing because our Quonsets, I told you about our Quonset huts. I’m
wandering today a lot. I can’t seem to stay—
LC: That’s okay. It’s very interesting, go ahead.
HB: There was a dirt path between the Da Nang Hilton Quonsets. In the
monsoon season, we found snakes in the water in the path that we had to go through.
Well, that (inaudible) a lot of things. It wasn’t long before we had the Seabees over
there. They were doing work places, you know, for the troops. If they had any cement
left in the turners on the way back, this is the Seabees, I asked them to come and drop it
and they soon had it covered. They also did the intensive care unit. We finally got one
of those wooden buildings in the intensive care too. They cut that off, cemented, rather
than dirt and was so much better.
LC: Helen, how were you set for supplies, for medical supplies?
HB: We had the best supply system I’ve ever seen anyplace and it was all due to
the Medical Service Corps Officer, Walt Godfrey. He did a beautiful job. We didn’t
have to make out chits in the Navy. You know, if you want to order anything, you got to
make a chit. You got to write out an order and all that stuff.
LC: Yes.
HB: We didn’t have to do that. He sent his men around and they would look in
the shelves where we kept things and they’d replenish things.
LC: Before it became a problem.
HB: You didn’t have to do any of that. He did it all. Everyday they came and
replenished. It was just the most marvelous system I’ve ever seen.
LC: What a fabulous relief for you.
HB: Pardon?
LC: That must’ve been a fabulous relief for you.
HB: Oh, it was a wonderful thing that was. It was wonderful. How we did it
under wartime conditions I don’t know. You learn a lot of things. One of the things
about supplies, the VCs and the North Vietnamese, they had hospitals underground,
tunnels and things. Our troops, the Marines, captured one of these, the area where the
ting thing was built underneath and they got all the enemy out of there. Then they went into
the hospital and they found it. One of the things, you get involved in intelligence
sometimes too. They wanted to find out what country was supplying them with
instruments. So they dug out. They brought all this stuff up and they piled it around and
they asked me to go over because I had been in the operating room before, well, during
World War II and a lot of our instruments were German or French or what other—it
wasn’t all American supplied. So I recognized instruments. So I had to go out and
identify what country was supporting the combatants. I could identify most of them.

LC: What did you see, what countries?

HB: There were quite a few German and Russian. Another thing, let me see, was
it, no, was it in Vietnam, see, I get Korea and Vietnam mixed up. It was Vietnam. You
know how now you go to a hospital and you’ll see these plastic bags with blood or saline,
IV solutions?

LC: Yes.

HB: Well, the Navy was swamped with having to bring over—all ours were in
bottles, you know.

LC: Yeah, glass bottles.

HB: Glass bottles.

LC: Sure.

HB: Sometimes they’d fall on the floor and break, moving patients and they’d
fall, but not often. It was hard on the patients seeing this bottle swinging over their head,
but you don’t feel that way when you’ve got a plastic thing. It wasn’t long before
someone took that idea and I remarked about it, how wonderful it was. It wasn’t long
before the United States had plastic bottles.

LC: Where did you see the plastic bottles first?

HB: I’m trying to remember if it was Korea or Vietnam that I saw them first.

LC: Plastic, I’m going to guess Vietnam, but—
HB: I’m not sure. I’m quite sure it was Vietnam, but it may have been earlier than that. I’ve kind forgotten, but I gave it to the supply officer when I saw it, told them to do something with it.

LC: Yeah.

HB: I know this was in Korea.

LC: Okay.

HB: But see, we’d only had—penicillin wasn’t available to the general public, it was like gold in World War II because it came about in World War II, it began to be used. We had to mix it in little glass bottles. Well, we were throwing them out, you know, after we had emptied them, we would throw them out and I think it was the Koreans. They would come get them, they would scurry off and they’d have bum-bum boats, little small boats. When we were throwing trash over the side, which we did, they would pick up these bottles and put water in them and sell them as penicillin because they were all labeled and all that stuff. They don’t know the difference except the patients.

They didn’t cure them.

LC: Right, didn’t do them any good.

HB: So then we had to keep a hammer handy and crack the bottles, crack the little penicillin bottles. That soon gave out. They found other ways.

LC: They found other ways.

HB: Yeah. So in a way, there are some things you do that help with intelligence.

LC: Well, that’s actually very interesting. That’s interesting.

HB: It’s all interesting. I get to thinking about it and I’ll think, yeah, there’s an awful lot of stuff.

LC: Yeah, there is. Well, Helen, did you get out to the hospital ships that were visiting near Da Nang, the Repose?

HB: I didn’t get out. They got in.

LC: But you never visited the Repose?

HB: Yeah.

LC: Or the Sanctuary, you never went out there?

HB: Well, I knew the Sanctuary and the Repose of course had been in Korea with us.
LC: Yes.

HB: Then it was in Japan, not in Japan, it was in Vietnam.

LC: Right.

HB: So was the Sanctuary. The Sanctuary did not get to Korea. The Haven did and the Haven, I think the Haven got to Vietnam too.

LC: I don’t know.

HB: I’m trying to remember.

LC: But you didn’t go out to the hospital ships from Da Nang. You stayed onshore.

HB: Pardon?

LC: You personally stayed onshore.

HB: Stayed onshore.

LC: But the nurses might come in from the ship?

HB: No, they didn’t go either. We had one CO of one of the ships. He was a very dear person too. But he thought it would be wonderful if I would take his nurses for a couple of months, one at a time and send mine out. I didn’t think that was a very good idea at all and I said no. He didn’t like it. But my nurses, I would’ve had to hogtie them and shanghai them to make them go out, they weren’t going to leave their safe little place. But we did exchange a couple of nurses from that, some very good ones.

LC: What were the circumstances under which you had those exchanges? Do you remember? Was it just—?

HB: Well, they volunteered. When he announced that this was possible, I said I would take some if they wanted to send them in, I would’ve taken any extra pair of hands.

LC: Sure.

HB: Because I knew that they were pretty experienced mature nurses.

LC: Oh, yeah.

HB: He did send a few of them in and I did send one out, but mine, sorry, the one I sent was not a very good addition to anything. But anyway, they did come in. That’s another one you might want to get a hold of her is Jewel Lockney.

LC: Okay.
HB: She’s in Virginia Beach living now. She’s very good. She was one of the ones that came from the Sanctuary to our ship, to our hospital.

LC: To your hospital, yeah.

HB: But if I knew when somebody was getting orders, was coming, or when they were about to come to Da Nang, getting off that plane in Da Nang and the heat and all that after that almost eighteen hour trip across the Pacific, which is kind of a hard thing to hit, step off the plane, it was difficult on them. I always met my nurses when they were coming. I’d be over there. To get the transportation was always difficult. You had to practically promise your eyeteeth to get it. So I would always go over with transportation to get them if I knew they were coming.

LC: You personally would go?

HB: Oh, yes, I would go. Usually it was four o’clock in the morning.

LC: Wow.

HB: If I knew where any of the ones where the ships were going because very often the ship wasn’t there. If they were up north, they traveled between Da Nang and up north, right up there on the 38th Parallel.

LC: Up to the DMZ (demilitarized zone), they would go up to the DMZ.

HB: DMZ, yeah. So I would pick their nurses up too.

LC: You would take care of them?

HB: I would take them to my place. It was almost invariably, we would have an attack that night. So I had to instruct them to get under the bed. When the siren goes off, get under the bed. Then always doing raids of whatever, I would go place to place to see who was having more trouble with the noise and the fear and that kind of stuff. So I would go, sometimes slithering on my belly practically, but that’s my job. That’s what I thought was my job.

LC: How scary were those mortar attacks and how often did they happen?

HB: I didn’t think they were.

LC: You didn’t think so?

HB: They would happen. Sometimes you’d get a whole lot at once, several. Some of them would be pretty close, but it wasn’t that bad. I didn’t think, but they were enough to scare people.
LC: I’m sure, I’m sure. As the chief nurse and as the leader, Helen, what would you say to the gals who are having a hard time with this? Maybe they just arrived—?

HB: Well, I just tell them it’ll be soon over, it will be. I said, because all we have to do is get a streak in the sky and—because they didn’t have many planes. They would sit on a hill nearby and fire into us. They weren’t trying to hit us. That was to get across that they weren’t trying to hit us. Meg-16, which was a Marine base, was across the road from us. It was a crazy place to have a hospital. I don’t know which was there first, their base, the Marines or us. But anyway, they would be trying to fire over us to get the base across the road. They would get their range. They’d sort of walk the shells across our property to get to the Marine base. I said, “In a minute, it’ll be over. It’ll be over.” One of the things they were more afraid of than anything and this always tickled me, the PMU, the preventive medicine unit, which Medical Service Corps does that. Anyplace there’s Navy, there’s a PMU unit to protect. They do all the bacteriology and that kind of stuff to try to keep the troops healthy. They had Bonnie and Clyde, great big boa constrictors. Well, I didn’t think it was the place for the boa constrictors and I don’t know what they had to have them, but they said they had to have them for some kind of science stuff. Their place was right across the road from us. There was only a dirt path. It really wasn’t a road. Most of the gals from were more afraid that some of this incoming stuff would land on the PMU unit and release Bonnie and Clyde. They’d come over to our place. Well, that was sort of fantastic thinking, but it was easy to tell them, “Oh, Bonnie and Clyde are not going to come. They can’t get in.” Well, other snakes got in, they didn’t figure—I said, “They’re too big for the holes we’ve hot,” and just reassure them a little bit.

LC: Right. But other snakes did—

HB: I forget what kind of an animal it was. They had some of them they were using for something or other. In the wardroom one day one of the gals looked up and there on the bookcase was this little head sticking out. It was some of these animals that the PMU unit had let loose. How he got there, I don’t know.

LC: Was it a monkey or what was it?

HB: No, it looked like a beaver or something like that. I knew what it was, but my memory is not very good. But we got him out of there.
LC: But yeah, that made for a lively dinnertime.

HB: Yeah. There he was.

LC: Did you see much in the way of injuries from animals like snakebite and so on?

HB: No. The VCs got more of them on the Ho Chi Minh Trail. They got more snakebites than we did. There were a few that did and of course there were some tigers in the woods, but we didn’t see any of them either. You know, they have elephants that they use as beasts of burden. They help them, the lumbering, and they used them a lot. Well, someone of our units fired and killed one of the elephants, so they took up connections so as to buy another elephant. Well, I put in a dollar or two, I don’t know if—we weren’t familiar with that elephant. We didn’t see him. But when the replacement, they had him strapped underneath a helicopter and he went overhead, he went right over our compound. There’s the elephant on his way to replace the other. We had paid something on that elephant. We felt like he belonged to us.

LC: They airlifted the elephant over to the farmer who needed him or—?

HB: The village.

LC: The village, yeah.

HB: Yeah. They needed it. They had killed off the one they had. They live a long while and they do a tremendous amount of work. They’re wonderful to their animals.

LC: Are they?

HB: Oh, yeah, they’re wonderful to them. Of course, there’d be some nuts that are bad to them, but made their living with their elephant.

LC: So it doesn’t make sense to be mean.

HB: Yeah, it was a big thing.

LC: Well, that must’ve been some sight.

HB: Those helicopters carried all kinds of stuff underneath them.

LC: Oh, yeah, yeah. Helen, were there particular cases of injuries or particular people that you remember being in the wards, anyone special that comes to mind that you took a special interest in for whatever reason, maybe because—?
HB: Not so much in Vietnam because I didn’t get—the ones that worked for us I got to know quite well, but I didn’t get to—our patients didn’t stay with us long. Now the girls can, the ones that took care of so much and all that.

LC: As you say, the patients didn’t stay there very long.

HB: Yeah. Of course my niece is here and she just reminded me of one. Do you ever know of a Chesty Puller?

LC: Yes, U.S. Marine Corps.

HB: Well, Chesty I had known in Korea.

LC: You knew Chesty Puller in Korea?

HB: Yeah, he would come to give out Purple Hearts to his men.

LC: Oh, sure.

HB: Then when I was at Portsmouth, Virginia, he brought his kids and a couple of neighbor kids and he lined them up to have their tonsil adenoids out. They were eight, nine, ten, something or other. I forget, he had two sons I think it was. I don’t think there was any daughters. Young, though he came to Vietnam, he was a young Marine, second lieutenant. He’s one of the ones that I knew when he had his tonsils out. He was following at his father’s footsteps as fast and as far as he could. One morning I was going down to give the report to the CO about what went on during the night. A helicopter came in and they brought in this patient and it was Louis, Chesty’s son badly wounded, badly wounded. I was appalled. I knew right away before I looked at his tag and who it was and I knew what his father was going to go through. So I went in and I told the CO who had just come in and he was going into triage. We didn’t think we were going to be able to save him. He lost both legs and one arm. We wanted to keep him, but the powers that be wanted to get him back out of Vietnam. So he was air evac’ed within a day or two and then he was long, long convalescent, long, long.

LC: Oh, I’m sure. Do you know where they took him in the States?

HB: They took him to Japan, but then quickly moved him. They were trying to get him back because his father wanted to—that was it. He ended up at the Naval Hospital in Philadelphia and he was there a long while. He was there, wait a minute, there was one other famous guy that was there. He wrote a book about that time. They
were devils at the hospital, I can tell you. Yeah, he later was a senator. Well, anyway, they were both patients there at the same time. They were very bad.

LC: Bad shape.

HB: Bad casualties. Well, Louis, yeah, he lost a leg, but I can’t remember his name. It sounded like Kerrey, but it wasn’t Kerrey. Was it Kerrey? Yeah, Kerrey. [Senator Bob Kerrey] He lost a leg too. He was a senator from Nebraska was it, somewhere like that. I didn’t know him. He came through the hospital I think at some time, but I didn’t—must’ve been another time. Ended up with Louis in the Philadelphia Naval Hospital. They were world famous patients.

LC: Wow. Were there other VIPs who visited the hospital?

HB: To visit?

LC: Yeah, VIPs who visited, like—?

HB: Yes, we had a lot of them.

LC: Yeah. Did you have to escort them?

HB: Yes I did. Remember, Christmas, there’d always be somebody wanting to, the movie actors and that kind of stuff.

LC: Sure.

HB: Jerry Bishop and oh, wait a minute. Oh, Bob Hope of course was around all the time. But you know—it’s on the tip of my tongue. He was one of the best actors.

LC: That’s okay. You can take your time.

HB: He and his wife came out. He had adopted her children. One of the boys was a Marine up at Quang Tri or he was in the 3rd Marine Division, anyway, up above the 38th, pretty close. He came down to visit the hospital, he and his wife. He was delightful. Oh, he was one of the best ones. Who was the one that Mr. Smith Goes to Washington?

LC: Jimmy Stewart?

HB: Jimmy Stewart.

LC: Is that right?

HB: His wife Gloria, his wife went with him.

LC: Is that who it was?

HB: Yeah, he really was.

LC: What about politicians or—?
HB: Yeah, we had politicians too.
LC: Yeah, I’ll bet. Do you remember any of them?
HB: There was Dulles and I think senator, no, Secretary Dulles came. Of course, the big wigs from Washington came. One of the funny things that happened during that though they wanted us to go through the chain of command. They didn’t want us to communicate with our superiors in Washington. I don’t remember what it was all about. They just told me not to write to the director of the Corps. So they said that I shouldn’t write to her direct, that I should go through chain of command. Well, sometimes there’s things you want to say that you don’t want to go through the chain of command. So I sent her a birthday card. She got a lot of birthday cards, something like that.
LC: What kinds of things—?
HB: (Inaudible), but what exactly have to do not write.
LC: Well, Helen, when you would send her a birthday card, what kinds of, “things,” quote unquote would you—what kinds of things would you tell her?
HB: I’d tell her about how the nurses were doing and the ones I felt shouldn’t, would have problems. Some of them that had health problems that—they’ve got some horrible colds. You think they were going to die with them. We did have to send a couple. One hurt her knee. We had to send her back and it was a fight to make her go. She didn’t want to go. But some of those things you forget.
LC: But you would send this in the, “birthday card,” quote unquote.
HB: Yeah, if I had a card. It might have been Merry Christmas, I don’t know.
LC: Right. You would use whatever you had I’m sure.
HB: Whatever I had.
LC: Whatever you had. Let me ask you—
HB: I’m glad I’m retired as I’m saying this.
LC: Well, Helen, let me ask, this is a more serious question about the patients. What were the most difficult wounds that you had to have your nurses treat? What were the weapons that were used that were the most deadly?
HB: Belly wounds were very hard. I think I told you about them in Korea.
LC: In Korea.
HB: We didn’t seem to have as many belly wounds, but head wounds are very
difficult too.

LC: Did you have neurosurgeons there?
HB: Oh, yes, we had neuros because they needed them for plastic work on faces
when the face got blown off. They’re all hard. The amputees of course are difficult.
That’s such a whack on the patient because they would realize what had happened. That
was very difficult. The chaplains were wonderful though, they really were.

LC: Did you rely on them to help the nurses?
HB: Oh, relied on them a lot.

LC: Yeah, yeah. I’m sure you had to.
HB: They did a lot of good things.

LC: Yeah.

HB: Neuro cases, I don’t remember having as many neuro cases as we did in
Korea. Gunshot wounds, you know, if you got your head up, you got a gunshot wound.
The land mines with shrapnel and stuff, those do more destruction. They blow legs off
and that kind of stuff. The bleeding, I mean, trying to replace the blood, that takes a lot
of going. The pain, there’s a lot of pain. Although so many of them, the wounds were so
great that the nerves were destroyed. It’s not the pain that you think it would be. It
doesn’t seem until later, then it begins. Of course, we were getting them so fast, you
know, right off the battlefield. Oh, there were some bad ones.

LC: Are you remembering some cases right now?
HB: Yeah. See, I didn’t have that real close relationship with patients.

LC: No.

HB: In Vietnam. Other people did it.

LC: Right. You were administer. You were an administrator at this point.

HB: There isn’t the sense of personal satisfaction in trying to get work done
through other people as doing it yourself. You don’t feel quite as responsible.

LC: Yes, ma’am, yes.

HB: The nurses that were taking care of them did, but I was taking care of the
crazy quarters and trying to keep that going and chasing the Vietnamese cleaners around
and that kind of stuff, teaching them how to use a washing machine. I never did that stuff before.

LC: Helen, did you ever suspect any of the Vietnamese who worked on the base, on the compound?

HB: Did I ever do what?

LC: Did you ever suspect any of them of working for the other side?

HB: Oh, yeah. I had one that was supposed to be an interpreter. They found out that he was working for us in the day and shooting things back at us at night. So I lost him. I didn’t have an interpreter for quite a while. There were a lot of funny things too. I remember the funny things, isn’t that awful?

LC: Well, tell me about the funny things. Which one do you remember?

HB: Well, we had one—see, the French had occupied Vietnam for forty-five years. They had little words they put in. There was one that cleaned the heads. You got to remember that these were Quonset huts. They’re not very secure.

LC: Right.

HB: But anyway, that was his job. He would come to me oh several times a week and say, “Beau coup work, ti ti money, beau coup work, ti ti money,” meaning he wanted more money and less work. He did that all the time. Then the boys, almost everybody in Vietnam, at least our people of crowd would have a short timers catalog. They would make all kinds of things. They would have animals and that and then they would have arranged the number of days before, somehow or other they would have a chart, they might have crazy things on it. They would check off the days before they would leave for the States. One of the things that was posted in head and I’m not sure it was a Vietnamese that did it and it was checked off pretty much and it said, “I’ll never go home, I’m a gook.” He was home already. That was one funny one. They did a lot of crazy things. I never, never got anything out of it. We had sort of, for the help like that, we had sort of a U.S. Civil Service. Now if you know anything about the Civil Service, you know the grades and things.

LC: Yes, ma’am.

HB: They would be just as bad as our Civil Service was. They want to go up another grade. They would want to go up another step, another step. They needed more
money and they did need it, but you couldn’t do it all for them. I liked the Vietnamese people very much. They weren’t like the Koreans.

LC: How were they different?

HB: Well, they were calmer, more gentle on the whole. The Koreans were always in an uproar. They were very strong.

LC: You know, Helen, there at Da Nang, you were right on the edge of major battles between middle of 1968 through the middle of 1969, major battles happening. I know that your hospital was taking in a lot of the casualties.

HB: We sure had a lot of them.

LC: Yeah, you must have.

HB: Someplace I have the totals, but I don’t know what I did with the piece of paper.

LC: It’s probably in your filing cabinet.

HB: I’ll send it to you.

LC: Okay, great. Did you ever feel threatened that the base might be actually under attack, not the mortaring, the nightly mortaring, although that—?

HB: Physical?

LC: Yeah.

HB: No. They were just beside our base. I mean, we had a perimeter fence.

LC: Yes.

HB: Our quarters were almost against the fence.

LC: Really?

HB: They could’ve come over the line very easy, like they took our dump. They could’ve come over to us very easily. We’d see them. You could see them sneaking through the area. The foliage and that was a lot like what you see close to a beach. There were a lot of cactus. When they use cactus as fences, you know, those prickly things.

LC: Cactus.

HB: I don’t know the name of the cactus, but they’re big. They grow up big and they’ve got very prickly—in Mexico, they cut the thorns off and use them for food, but I don’t remember the name of that. They would make holes in that. We’d see where they had got up to our fence where the cactus had been cut down.
LC: No kidding?

HB: Yup. We were so—if they came over the fence, we were the first thing they’d come to.

LC: I mean, did—?

HB: I don’t know, it didn’t bother me any.

LC: It didn’t rattle you?

HB: No.

LC: No.

HB: I was too busy.

LC: You were too busy.

HB: Well, that’s the thing.

LC: Yeah.

HB: To delay fear and that is to be busy, to be busy.

LC: You had important work to do. It wasn’t just busy work, I mean, you—

HB: Pardon?

LC: It wasn’t just busy work. You had important work to do.

HB: Yeah, well, it’s not the same as taking care of patients.

LC: Did you wish that you could’ve done more of that?

HB: Oh, I would love to. I’d liked to have got that operating room under my wing. I didn’t have time, I couldn’t.

LC: Yeah.

HB: I was lucky to keep the place. The important thing was to have enough help.

We had some extras that came over very quickly when we had a bad malaria scare. We got choked up with malaria patients for a while there.

LC: Well, do you know when that happened?

HB: Pardon?

LC: Do you know when, what part of the year?

HB: It was in the spring I think that was so bad. I think it was the spring.

LC: You’ve mentioned it several times, Helen. Can you describe what happens to someone when they have malaria?
HB: Well, the weird thing is that they ache all over. They’ve got temperatures way up. They get dehydrated very rapidly, kidneys get involved in it. I mean, that high temperatures, they get dehydrated very quickly. They are sick, really sick and they die.

LC: How important were these kinds of illnesses as opposed to field or combat injuries? I mean, did you see a lot of just plain sick men coming in?

HB: They’d get the flu.

LC: Yeah.

HB: I couldn’t tell you all the crazy things we had.

LC: But you had to spend a lot of time on this too, illnesses.

HB: Yeah. Malaria was the thing that really—and of course, the heat, it was such a muggy climate, especially during monsoon season and the water everywhere.

LC: Yeah. Did the heat get to you? Did it bother you?

HB: Not much. I perspired more than I ever had in my life, but I’d spent a lot of time in the tropics or semi-tropics.

LC: Right. You had come from Key West, which was probably helpful.

HB: Yeah, which is warm.

LC: Yeah.

HB: There’s always a breeze. There’s always wind in the Key West, always. So that wasn’t bad, but we didn’t have the cooling breeze.

LC: No, very muggy.

HB: Yeah.

LC: Yeah.

HB: Muggy.

LC: Yeah. Well, Helen, lets take a break there for today.
Laura Calkins: This is Dr. Laura Calkins of the Vietnam Archive at Texas Tech University continuing the oral history interview with Cpt. Helen Brooks of the U.S. Navy. Today is the nineteenth of October 2005. I am in the Special Collections building on the campus of Texas Tech. Captain Brooks is kindly speaking to me by telephone from California. Good afternoon, Helen.

Helen Brooks: Hi, Laura, how are you?

LC: I'm very good and so pleased to have time with you this afternoon. Helen, you mentioned that we have failed to talk about so far some of the doctors and surgeons that you served with.

HB: Yeah, I don’t know why. Of course, we worked very closely. I mean, there was no separation and we were all in it together and that’s what we were doing and we wanted to do it.

LC: Right.

HB: But some of them, they were just so outstanding. Now when we first went to Vietnam, Dick Lawrence, he was a medical man, not a surgeon, Captain Lawrence.

LC: What was his first name, Helen?

HB: Richard. Well, we never called him Richard; he was Dick.

LC: Sure.

HB: He thought anything we did was wonderful. He spent more time praising us. You know, that’s a good thing to do. It’s a good way to handle people, let them know that you think a lot of them and he did. He saw to it that if we went somewhere, someone would be with us. Usually he would send one of the other officers with us. We did not go out alone very much. There were a few of course who did, wanted to go that had boyfriends and that kind of thing. We would do it, but usually they would entertain, their boyfriends, we’d call it the backroom. It was a Quonset hut that we fixed up with sofas and things like that. They could go back there and have a drink or two or sometimes they made meals. I don’t know what they had. They would entertain them. The men
appreciated that because they work very hard. They worked around the clock many
times.

LC: Oh, yes.

HB: They best worked together as I said, as a family. There’s no other way you
can describe it. Surgeons we had, and then of course the medical people, very impetuous,
our chief of surgery and just give me a minute.

LC: That’s okay.

HB: I knew him both there and I knew him afterwards in Panama. He was the
chief of medicine. We didn’t call him by chief or anything like that. They were our
doctors and we told them—we said we were their slaves. Anyway, almost to a man, they
were very good people, very thoughtful. They would have ins and outs and rough times,
but nurses are used to handling that kind of thing. So it was a very pleasant experience, a
good working relationship.

LC: Helen, let me ask about some of the corpsmen who had special duties like
the medical lab people or the blood bank people.

HB: Well, I knew more about medical lab people in the Consolation because
they—

LC: Right.

HB: Lab was parallel to the operating rooms. So we were back and forth a lot
and you couldn’t get out in the passageway without bumping into somebody from the lab.

LC: Sure, sure.

HB: They were another group of people that were super. We needed blood all
the time. Every patient we had on a table needed blood. They kept the blood supply
going and they were wonderful. Of course, they did other lab work too of course, blood
counts and that kind of thing, but there were many times there wasn’t time to do those
kinds of things.

LC: Not for the OR.

HB: Yeah.

LC: Right.

HB: So it was. But then we had some Red Cross people. The girls lived with us
in the quarters. So they were part of the crew. I mean, we didn’t see any difference
between then. They would help us out and we’d try to help them out. Although, we weren’t much help to them I don’t think.

LC: Now in Vietnam—

HB: Well, of course, we had Vietnamese help too.

LC: Oh, sure, yeah.

HB: But it was mostly cleaning help and that. Of course, we have the sandbag ladies, they filled sandbags. They stayed out, they’re just outside one of the ramps at the hospital and they fill sandbags all day long.

LC: These were women who did this?

HB: Hmm?

LC: They were women?

HB: Oh, yeah, all women. Well, we had some men that did cleaning, a lot of cleaning as much as we could.

LC: Oh, sure.

HB: It wasn’t easy to keep anything clean on that sand and all that kind of thing. Oh, especially in the monsoon season, you couldn’t keep anything dry let alone to keep clean.

LC: Well, how did they get paid, those Vietnamese?

HB: I don’t have the idea really. I never saw them paid. I think I told you about an old papa san that was constantly telling me, “beau coup work, ti ti money.” Everyday, he’d give me that song and dance. There wasn’t much I could do about it. I didn’t even know what they made. But they organized the things similar to the way a Civil Service runs, had steps and stairs and that kind of thing and grades. They always wanted to have their jobs put up a little bit higher if they could. They wanted a recommendation to do it.

LC: Sure.

HB: If we could, we did it.

LC: You tried to help them out?

HB: Yeah, sure.

LC: Yeah.

HB: Many of them were put up with a lot because the VC would get into their homes at night. Sometimes they had family members killed and they’d come in, in the
morning and tell you that a child was killed or something because they were working for
the Americans. I’m sure the same is almost going on in a much large scale in Iraq.

LC: How did you respond when they might tell you that kind of thing?

HB: Oh, you couldn’t do nothing, but sympathy, put your arms around them and
let them know you were feeling for them. They were very sensitive people.

LC: Yes, you mentioned—

HB: So you just loved them.

LC: Yeah. You mentioned that the Vietnamese were different from the Koreans.

HB: Yeah, they were different. The Koreans, we had contact with them too
because I told you that we had some working for us, washing instruments and things like
that. But we didn’t have them in cleaning positions because the ship was very clean. We
didn’t have trouble there and our own corpsmen did all that stuff or the deck hands did it.

LC: Sure, sure.

HB: Yeah. But again, we worked together.

LC: Helen, did you form any, it sounds like lasting friendships with some of your
either subordinate officers or the doctors?

HB: Pardon, did I what?

LC: Did you form lasting relationships and friendships?

HB: Well, we had a reunion and that we would see them again, would be just so
happy to meet up with them again. Some of them we still do. There’s not many of the
doctors left. There’s not many of them.

LC: When did you start having reunions? Do you remember?

HB: Oh, we had, I was in Portsmouth. I told you about the time at Portsmouth.

LC: Mm-hmm. Yes.

HB: I was going to wander the last few days, but we got together for the first
time there.

LC: Wow.

HB: It was one of the—in essence, one of the doctors, the anesthesiologist that
we had that got the thing started. We got together with that. It was really nice.
LC: I mean, that must’ve been a tremendous amount of fun.

HB: Oh, yeah, it was loads of fun. Then I had one here in San Diego.

LC: Did you organize it?

HB: The second one or the third one or something.

LC: Did you organize it?

HB: Yeah. I was retired by that time I think.

LC: Right. That’s a lot of work.

HB: Oh, it is a lot of work.

LC: Yeah.

HB: Well, because by this time, we’re a small number. I think we only had about two hundred maybe at the reunion.

LC: Now was this the *Consolation* folks?

HB: Yes, it was the *Consolation*. We have had some—we’ve had more of the nurses at the reunions because every two years, we have a reunion, a Nurse Corps reunion. That’s mainly retired people that come. So then we would have a separate little reunion, one night we’d have dinner together or something of all the nurses from Vietnam.

LC: Fabulous.

HB: We’d have the big reunion and then we would be a part of it.

LC: Sure, sure. You did not get out to the ships very much, did you, Helen?

HB: No, oh, lord, there wasn’t time, but it came in. We did see the people from the ships because if they could, if the ship was in and they had evacuated their patients, they would still have some patients aboard, but they would evacuate their patients to the airfield if they could. Then they had some time free. Then they would come aboard to us. I think I told you that if I knew when they were coming, there were nurses being assigned at the ship, if I knew they were coming, I would meet them at the airport because it was very difficult for someone fresh coming in. You didn’t know where to go. You didn’t know what was coming or anything else. So I would meet them if I could. So I’d have them at the quarters for a few days.

LC: You know that some of the people that you greeted—

HB: Yeah.
LC: Still talk about how nice you were to them.
HB: Oh, well, you had to be. They were nice people.
LC: But they remember you very fondly, ones that I have talked to.
HB: Yeah, well, I remember them very fondly too.
LC: They particularly were grateful for your help in getting them acclimated.
HB: Well, I’d have to do some of it because it was almost invariably, the VC would think that when they got in, they would think that was a good time to start throwing bombs or something around.
LC: Right.
HB: They weren’t used to it. It was difficult for them. But we managed, nobody got hurt. I had a corpsman that was damaged one time because of some incoming. But we really would know, the sirens would go off and let us know the incoming was coming. So we’d take cover, get under the beds, that’s how we handled it.
LC: What if you were working? What if you were, or if one of your—?
HB: You must continue to work.
LC: Including in the OR?
HB: Yeah.
LC: You would just keep going?
HB: You just keep going.
LC: Okay.
HB: There was no reason to stop.
LC: Was it because it was unlikely that the OR would be hit? I mean, it was not very effective fire?
HB: No, the chances of being of hit were pretty good. But I think I told you too that the enemy would try to get the range of the airfield across the road from us.
LC: Yes.
HB: While they were trying to get that, they would be hitting our base as they—they were trying to get the range. Once they got the range, they didn’t bother us, but it took them awhile to get the range.
LC: You said that one of the corpsmen got hurt one time, what happened?
HB: Oh, a shell came in and hit a stainless steel medicine locker and he got hit with that.

LC: It fell over on him or—?

HB: No, it didn’t fall over, but he got some shrapnel.

LC: Really?

HB: Not bad. He wasn’t damaged too bad, not like our casualties.

LC: No, right. But still, I mean, that must have been a little scary to have—

HB: It was to him.

LC: Yeah. Was it to you and the nurses?

HB: It wasn’t for me.

LC: No?

HB: No. I can’t say I was never really scared. I don’t know why but I wasn’t. I think I’m not smart enough.

LC: No, I don’t think that’s it. I don’t think that’s it. Well, you were a very experienced nurse by this time.

HB: Yeah, I think that could be it. I was happy to be there. There’s no satisfaction, there’s nothing as satisfying in this globe as taking care of casualties, very satisfactory, the best kind of job a nurse can have.

LC: You know you said you were actually glad to be there.

HB: Yes.

LC: As your year began to run down—

HB: Pardon?

LC: As your year in Da Nang began to run out, did you consider trying to stay longer?

HB: No, because I knew that wasn’t the thing to do.

LC: Okay.

HB: Again, I think I told you that my mother was elderly.

LC: Yes.

HB: I hadn’t volunteered to go for that simple reason, that she was elderly and had begun to have problems. I knew that I needed to get back. So if there wasn’t a replacement for me, I would’ve definitely stayed.
LC: Who actually did come in and replace you?
HB: Pardon?
LC: Who did come to replace you in Da Nang?
HB: Jacobs, Francis Jacobs. She’d been on the *Consolation* with me.
LC: Really?
HB: Many years before.
LC: So you knew her very well?
HB: Not very well. I knew her when I worked with her. She also did operating room work. So, I mean I knew her. I knew of her and all that and invited her.
LC: Helen, did you meet her when she arrived to take your place or were you already gone?
HB: No, I was still there. They overlapped. It was good.
LC: What did you try to convey to her as she’s coming in and you’re leaving?
HB: Yes.
LC: What did you try to tell her about the situation?
HB: A lot of stuff to tell, I don’t know what on earth I told her, probably a lot of sea stories. We have a tendency to do that.
LC: Were there particular things you had learned or shortcuts or—?
HB: Oh, yeah. There were a lot of things, especially about people and what you had to do and where you were at and that kind of thing. But she was pretty savvy herself. She knew what to do.
LC: Yeah. Well, do you know where she was coming from?
HB: I’ve forgotten. I knew. I have some letters that she wrote after and she wrote beautiful letters.
LC: Really?
HB: Yeah. The ones that she wrote, I think I told you that we were, at one time, we weren’t supposed to write directly to the head of our corps.
LC: Yes, that’s right.
HB: It was supposed to go through channels. That had been lifted and she was doing that. She could write directly to the director. The letters are here and if I can get a hold of her, I will ask if I can send them to you.
LC: Yes, please, and equally, we’d love to interview her.

HB: It’s very, very, that is a very good.

LC: Yes.

HB: I haven’t seen her. She hasn’t been to the reunions and I don’t know where I’d get a hold of her.

LC: Okay.

HB: I forgot her address, what the address I had. So, it may be possible to find her.

LC: Okay, well you can.

HB: I’ve been on the phone all weekend trying to find people for you.

LC: Wonderful, that’s wonderful and I thank you so much for that effort. It’s important that we get as many people as we can to document their service and the service of those who were with them in Vietnam and in Korea who otherwise will not have their stories told.

HB: That’s true because you don’t get around to write it, it’s so much easier to talk it out than it is to try and—

LC: Oh, sure.

HB: Write it all down. As it is, I’m wandering and I mean, that’s, I am too old—

LC: Well you said that you had remembered some stories while you were looking through things over the weekend. Do you want to—?

HB: I’ve been looking at some of the things I’ve been trying to find. One thing I forgot to mention, a CO was the commanding officer, was relieved and went back to the States. Then somebody else came to replace him, Don Custus. He was a real jewel. He really was, wonderful man to work with, very capable. A very different man from what Dick Lawrence was, but that was good.

LC: Now what was the occasion for Dick Lawrence leaving?

HB: Oh, because his time was up.

LC: Okay.

HB: Basically the tour of duty in Vietnam was supposed to be a year. Some didn’t get to go in a year, but most of them did, even the enlisted men as well.

LC: What kinds of things did Don Custus bring in as changes?
HB: Well, he got us more or less—before that, if things were going along, everybody was acting was sort of like work with the seat of their pants, not—he established some committees and that kind of thing and made us more respectable I think.

LC: More structure for the work and so on?

HB: Pardon?

LC: More structure?

HB: More structure, knew pretty much where you were going.

LC: What kinds of committees? Did you serve on any?

HB: Oh yeah, yeah, we had committees.

LC: I’ll bet you were in all of them would be my guess, but—

HB: No, not all of them, but some. It was interesting work, but you always had some committees and stuff going on no matter where you are.

LC: Yeah. Do you remember any of those committees?

HB: I don’t remember much of them.

LC: No. They probably weren’t all that exciting.

HB: They weren’t interesting to me. If I’m not interested, forget it.

LC: Forget about it.

HB: I’m not going to do much with it.

LC: Well, when did you get your orders for leaving Vietnam?

HB: Oh, I don’t know exactly when I got them, but I got them in plenty of time to know where I was going. Let me see, I came back and I went to Charleston.

LC: Right.

HB: I knew I was retiring. I was going to retire. I was there for, I retired in ’71 and came back in the middle of ’69 and then I retired.

LC: Now how did you decide that you were going to retire?

HB: Well, I mean, again, my mother, my sister had a husband who was very ill and was having problems. So I went back to look after mother and take care, it was time for me to do it.

LC: You had what, gee, I’m trying to think, twenty-six years active duty or something?

HB: Yeah.
LC: Well, with breaks.
HB: Some is Reserve time.
LC: Some Reserve time.
HB: They counted that since I had Reserve time. I was a Reserve the whole time I was in the Navy.
LC: Right. You mentioned that at the beginning, right.
HB: So it didn’t make any difference to me whether I came or went or what.
LC: Well, tell me about your time in Charleston.
HB: Well, Charleston, I had been there. That was unusual to have been there in World War II. I began my Navy career in Charleston. Then I finished my career there. When I went back, they had just had built a new hospital. It was finishing up. So I got into some of that, the constructing of the—getting that thing ready to open and that kind of thing. It was a busy time.
LC: Were you a captain at this time?
HB: Yeah, I was a captain somewhere in there.
LC: So you’d been promoted.
HB: Yeah.
LC: What job did you actually hold?
HB: Chief nurse.
LC: Okay. So they had you doing some of the work for opening the new hospital?
HB: Pardon?
LC: Some of the work for opening the new hospital.
HB: Well, yes, you had to—after they got—it took a while to get it set up and ready to go. It was an interesting time. But I had done things like that before.
LC: Many times.
HB: Yeah.
LC: Yeah. Did you have an opportunity to teach?
HB: Pardon?
LC: Did you have a chance to teach while you were in South Carolina?
HB: No. I didn’t teach much there outside of—every time I saw something I thought needed to be corrected, I’d teach.

LC: Right. Did you have a good staff there?

HB: Yes. I had a very good staff. Some of them I had known before.

LC: Did some of them have Vietnam experience?

HB: Yes. Some of them had Vietnam experience.

LC: Did you see that as a plus?

HB: Yeah, it was a plus. I don’t say it was a real big plus, nothing wrong with it, but it’s just something you’re used to and you do it.

LC: Did you have any administrative challenges at this point, or was it pretty smooth sailing?

HB: Pretty much ordinary, the kind of things you run up against all the time. Sometimes you think things are good. Sometimes you think they’re not so hot.

LC: Yeah.

HB: You try to do something about it. If you can’t do it, then you forget it. But it’s pretty routine things that go on.

LC: What about the physicians that you were working with? Who did you report to?

HB: You mean you want the name?

LC: Well, if you know them, but—

HB: Well, I didn’t know the CO when I was there, Captain Robinson. He had been on the, what was it, the Sanctuary. I think it was the Sanctuary and then had come back from Vietnam. He was a very nice man. Surgeon, he had been a surgeon.

LC: Surgeon, okay. You got along with him well?

HB: Yes, but he wasn’t the same. Different personalities, that’s the way things are.

LC: Yeah, sure.

HB: Yeah, so that you have to—

LC: You have to find your level.

HB: You figure it out one way or the other.
LC: Yeah, sure, sure. That’s true anywhere, isn’t it? Helen, did you have any
Vietnam veterans who were admitted to the hospital?
HB: Oh, yeah. We had some that were coming in. Most of them were not on
active duty, although we had some come that had been on active duty.
LC: Were they there because of combat related things or—?
HB: Some of them were combat related. It was a general hospital. Much of it
was the same kind of thing that you were used to, wasn’t any problem.
LC: Were there—this is what, 1969, 1970?
HB: It’s 1971.
HB: It was ’69 through August of ’71.
LC: August, yeah. Were you aware of the growing anti-war movement?
HB: Well, everyone said that there were, I never saw any of it ever.
LC: Never?
HB: No, I never saw any derogatory remarks. I didn’t see—maybe I just didn’t
look in the right places, but I wasn’t looking for it anyway.
LC: No, true. No protests or anything like that?
HB: Never saw any protests or anything. I don’t know what was wrong with me,
but I didn’t.
LC: Well, I think you were in the right place actually.
HB: Yeah.
LC: Charleston.
HB: It was good. I didn’t mind it at all.
LC: Yeah. Well, I’m sure. It’s beautiful. It’s a beautiful place to live.
HB: Yeah.
LC: Did you—?
HB: Oh, yes. Charleston in the spring, there’s no place like it. It’s beautiful.
LC: Oh, yeah. Well did you have a nice apartment or house there?
HB: I had an apartment and I had a dog and two cats.
LC: Again.
HB: I had collected them from my friends that took care of them while I went to
war. I thought that was something.
LC: Okay, but this is a new dog that you had.
HB: Oh, had to be a new dog.
LC: Yeah, not the poodle.
HB: The other one died.
LC: Yeah, of a broken heart.
HB: Wouldn’t eat right after I left.
LC: Yeah. He just couldn’t stand that you were gone, poor thing.
HB: He was a dear, he really was.
LC: Poor thing. Well, so you collected your animals, your cats. Did you enjoy
this part of your career?
HB: Yes, I did. I retired from Charleston. My brother-in-law died at two o’clock
in the morning the night of the retirement ceremony. So I was up all night making plans
just when I was going to get home as fast as I could to be there for his funeral. So I was
real tired. I could hardly keep my eyes open all the time the ceremony went on, but it
was very nice.
LC: Now where was the ceremony held?
HB: Pardon?
LC: Where was the ceremony?
HB: At the hospital.
LC: Okay. What was it like? I mean, I know you retired.
HB: Well, you’re piped ashore. When you aboard ship, you get piped ashore, so
I was piped ashore you know. They had side buoys, just sort of a set ceremony, but I was
in a hurry because I had the car packed and I had the dog and the two cats in the car. I
was anxious to get started because one of my nephews was coming down to Washington.
He was going to take the car and the animals and drive home. I was going to take the
plane in Washington and fly home so as to be there.
LC: Right, as soon as possible.
HB: I was anxious to get started because I knew I had not too bad a drive, but I
wanted to get there in time to—
LC: Right.

HB: Do what I could. So I was in a rush. I don’t think I said good peace and

good-bye.

LC: You just start probably took off running.

HB: Yeah. So then I got home in time for all the ceremonies there.

LC: Yeah.

HB: So on and so forth.

LC: Now were you able then to stay with your mom?

HB: Well, she died three months later. So I was there with her. I had a

wonderful time with her at that time. She was just pink and white. I mean she had snow

white hair and her skin, she had a beautiful complexion. I’d get her all dressed up in

pastel colors and take her out to lunch. Everybody would be around admiring her.

LC: Wonderful.

HB: Like having a baby dressed up. You’re proud when people admire them.

LC: Well, and she was well enough to do that kind of thing.

HB: Oh, yeah, she had all of her faculties.

LC: Right.

HB: She really did.

LC: She was having fun.

HB: Yeah, she was very, she was a smart woman.

LC: And very glad to have you home I’m sure.

HB: Yes.

LC: That makes a huge difference, that you’re timing was good.

HB: I couldn’t volunteer. I just couldn’t because I didn’t want to put her through

that and she wrote a beautiful letter to me before I left.

LC: I’m sure you still have it?

HB: Well, I did, but her letter helped.

LC: What did she say to you?

HB: Well, she said that she was proud and she knew that it wouldn’t be long and

she might not be there when I got back. But needn’t worry she would be along with me

regardless. She just assured me what I was doing was all right.
LC: Wonderful. That’s wonderful.
HB: Yeah, that was wonderful.
LC: Yeah. Well, she sounds super.
HB: Yeah.
LC: She sounds like a super woman.
HB: Yeah. Then after that, I went traveling for a while.
LC: Where’d you go?
HB: Oh, let me see, I went to Guam. I went to Hong Kong. I went back to Japan. Then I went to Singapore and Bangkok, all over the place, back to a lot of the places I had known or visited before.
LC: Did you go by yourself?
HB: Well, I started out with two of the gals that had been in Vietnam, two of them that are living here now. By the way, they said that they would be happy to interview with you.
LC: Fabulous.
HB: They’re different. They’re very different.
LC: Great, wonderful. That’ll be fun for me.
HB: Part of you may be surprised.
LC: That’ll keep me busy.
HB: Pardon?
LC: That will keep me busy.
HB: They’ll keep you busy if they get going. They had taken leave, but when we went through Hawaii and we had such a good time in Hawaii that they didn’t have enough leave left. So they had to leave me in Guam. I had never driven a car with stick shift. We had rented a car with stick shift, but we had to drop them off at the airbase. I had to drive that car back into Guam and I had to drive it back all the way across the island and chugged all the way because I hadn’t driven shift car, I remember that well, but I made it.
LC: Good for you.
HB: Yeah. That’s when I went on to all the other places.
LC: You went on by yourself then?
HB: Yeah.

LC: Did you have fun?

HB: Oh, I had loads of fun because I met friends along the way.

LC: Oh, sure, I would think so.

HB: Then when I got back, one time, some of the patients from—neuro or head patients especially might come up because they air evac’ed them. The Air Force air evac, patient evac would stop in Panama and would pick up patients to bring them back to the States if they needed to be. The chief of surgery at the hospital, at one of the hospitals in Panama came up one time and their patient was going into intensive care. Of course he was very ill. So I went over of course to see the patient and I met him. So I took him to—he was tired. He’d been flying all night and the patient was very ill, so he’d been busy. So I took him into the dining room to have something to eat, some breakfast. We got talking back and forth. I said I was retiring and I wouldn’t be there next time he came. He said, “Are you looking for a job?” I said, “No, I’m not looking for any job. I’m going home to look after my mother and brother-in-law. I’m needed.” So he said, “Well, you’re retiring?” I said, “Yeah, I’m retiring, but I’m not available to go to work.” I wasn’t a bit interested in working. So when I got back from this trip, I had a telephone call from him. He said, “Are you tired of playing?” I said, “No.” So he wanted me to come back again and work and I said no. He said, “Well, listen, we’ll pay your way down, bring somebody with you and then look us over and see if you won’t come.” So I hadn’t ever been to Panama. So I went and I liked it. So I went down and I worked. I signed a contract for three years. I think it was three years. I loved it. I had a wonderful time, but I knew it was time for me to get settled and a responsible citizen. So I stayed there for three years and then I didn’t want to sign another contract. I think Panama was a place, this was before, and I was there for some of the treaty talks. We had to handle with the hospitals and that. Then I was director of nursing services in the health bureau up on the hill. I had Balboa Hospital, which was the big one, it’s on the Pacific side. Then we had Coco Solo Hospital, which in the World War II had been a Navy hospital. That was on the Atlantic side. Then halfway through the Canal, another place was sort of a mental institution. Remember, the canal government was responsible for the canal zone workers. Many of them were Panamanian. There were some from the islands and that
kind of thing. So there was no way, they retired, they weren’t going to come back to the
States. So our government was still responsible for their care. So there was the
leper colony over on the Pacific side. There was a mental health place in the, oh, lord, I
can’t think of the name right now. But halfway through the canal, there was a place and
that’s where it was. Then we had a Public Health Service nurses that went out with a
little black bag, out and over the hills and that kind of stuff to see patients, take care of
them. It was a fascinating job because the patients would be in hammocks and thatched
roofs and thatched huts actually. It was fascinating, but all that was hard work.
LC: Would you ever go off on one of those trips?
HB: I had to go to see what was going on. I had to learn what they had to do. So I went and enjoyed it.
LC: If you can, describe—
HB: Pardon?
LC: Can you describe what you saw on some of those visits?
HB: Oh, well, what a general hospital would have. There was some surgery.
Any people that worked very hard is bound to get into some kind of difficulty, but they
had the regular things that were—and of course, some tropical diseases too.
LC: Sure, right.
HB: Yeah. It was fascinating work. I joined the Panamanian Nurses Association
and I got to go with them. I went to different places with them. I got to go to South
America quite a bit.
LC: Whereabouts?
HB: Oh, Columbia. The history of the canal is really something. If ever you
have a chance, read The Path Between the Seas. That’s a fascinating book.
LC: Okay.
HB: Then they would have reunions and I’d go to the reunions too. I’d go with
the Panamanian nurses. They have a university program there too.
LC: What kind of program?
HB: Nursing program.
LC: Was it university degree?
HB: Yeah. They were very fascinating people, wonderful people to know.
LC: It sounds like they welcomed you.
HB: I thought that they were very nice. I just liked them.
LC: You were the big cheese though. You were the big fish.
HB: Well, not really.
LC: Well, you’re director of nursing services. I mean, they probably saw you
as—
HB: That may have been, but I had Panamanian nurses on the staff too.
LC: Sure.
HB: Another interesting thing was we’d very often have people show up that
were going—they called them traveling nurses now. We had no such title at that time,
but there were nurses that traveled around. Then they’d stop someplace and work a little
while and then stay and then they’d go. I could always use some. So I hired them
because I thought that they were qualified. It was interesting to see them.
LC: Would you have meetings periodically?
HB: Meetings?
LC: Yeah, to keep up with what they were doing?
HB: You can’t run nursing service without meetings.
LC: Yeah. What kinds of things would they report back to you? What problems
did they encounter?
HB: Oh, they would have the problems with any nursing service would have.
They had a union, which was difficult for me sometimes because I hadn’t been used to
unions. But on the whole, it was a very kind, warm experience.
LC: You’re glad you did it?
HB: I was sad to leave when I left, but I knew I had to.
LC: Why would you not stay there for even another year or so?
HB: Well, I wanted to get settled. I knew that I was getting to the point by this
time, I needed to put down roots. I knew that I was going to try to come to California, so
I wanted to get back here and get settled. The other thing was is by this time, one of the
reasons they wanted a Reserve registered nurse in Panama was because if they were
Reserves, they can get you a full salary. If they were regular officers, they weren’t
allowed to take their salary. It was (inaudible) and they were proud of it. So they were
looking for Reserve nurses and I was one. It’s my advantage really. But by this time, I
was paying more in taxes than I was making money. That doesn’t set very well with a
(inaudible) Yankee. So I just decided I would go home and that’s what I did.

LC: Helen, did you just, you said you knew you wanted to move to California, did you go to San Diego right away?

HB: Yes, I came to San Diego.

LC: Did you have friends there who were going to kind of help you get settled or—?

HB: No, I didn’t need any help getting settled. I had used enough time for my life.

LC: Did you know exactly where you wanted to live?

HB: Of course I knew a lot of people here. I had been stationed here once.

LC: Yes, right.

HB: I decided that’s where I wanted to be, the weather was nice. There was a margin, young crowd of people and I liked it.

LC: Sure.

HB: So that’s where I came.

LC: Sure. Now when you got out to San Diego, was that in, what, about 1974?


LC: 1975, somewhere in there?

HB: Well, I got back here in mid ’73.

LC: In ’73, okay.

HB: Well, then I did some more traveling.

LC: Oh, okay.

HB: Yeah. I went to—well, I’d been to Europe a couple of times, but I went to Europe again. Then I went on a six-week tour of South America. By this time, I always traveled and I would take a studio apartment or something. I had a very good friend that usually would go with me. Then I’d stay for a couple of months in one place. I had lived in different countries and mostly in the Orient. You get to see the place more when you are going to the market to buy things and that kind of thing.

LC: Sure.
HB: Not just in a tourysty type thing.

LC: Right, not riding through on a bus or something.

HB: So this friend and I went to—what we usually did and would take an apartment, a small one, maybe a studio or something and then go out from there, rent a car and go out from there, have a good time. So I did that too for a little while, but then I came back and bought a house and settled in.

LC: In the San Diego area?

HB: Yeah. I was in Leucadia, which is up on the coast. I wanted to be where I could see the water all the time because—then of course later, let me see, it was about eight years ago, I moved into this retirement home run by hired hotel people. They have several. In Florida, they have several. I don’t know if they have any in Texas, but they’re, you know, condominiums of residency, some of us independent and they always have a care center.

LC: Sure.

HB: Our care center here has skilled nursing facility and also assisted living. They also have an Alzheimer unit.

LC: So you’re in a very, sounds like a very nice place that suits you.

HB: It is very nice.

LC: Yeah, it sounds like it.

HB: I always had problems, like everybody’s got problems.

LC: Oh, yeah, but that’s what makes it spicy.

HB: It’s not anything you’re going to trip over. You can avoid it if you don’t like it.

LC: Well, Helen, let me ask you a couple of big picture questions, big picture questions about your career and about American military involvement. I know you’ve done a lot of reading and probably a great deal of thinking about these issues from different angles, but I wonder whether you in retrospect think that the United States ought to have been committed to South Vietnam in the way we were.

HB: Well, I think it was an honest—I don’t think we did them any good. But it brought them forward a good bit. They learned a good bit from us, but they weren’t excluded from our thinking and doing. I think that in that respect, they gained something.
They lost something too, some of the bars and all that kind of stuff were pretty raunchy sometimes. We didn’t see much of it of course. But they always seemed to like us, they really did. I don’t think that’s true in Iraq. They don’t like us.

LC: Yeah, I think you might be right.

HB: But the whole time we were there, I felt we were doing some good. Oh, there were things that were bad, of course, but I really think that we did some good.

LC: Did you believe that the idea of trying to stop advancing communism was a good reason to go to war?

HB: Well, it’s hard to say. Russia doesn’t look like it’s much better off, but that’s their business.

LC: Yeah.

HB: Haven’t handled it very well I don’t think. But again, it’s their business.

LC: Yeah.

HB: We probably wouldn’t like it either.

LC: Probably not, yeah.

HB: We’re pretty opinionated in our doing.

LC: Well, it hasn’t been a system that’s been very successful, that’s for sure. So in that perspective, it seems like maybe we were doing a good thing, trying to preserve part of Vietnam anyway.

HB: Well, I think that’s it. This business, a group of people that think differently and they’re going to take over as the communists did. I think the fact that they’re gone, it’s going to take them a little awhile to get back in the rut I think. It’s quite a bit difficult for them, but they certainly have done better since we left than they did before I think. That’s my personal opinion.

LC: Did you feel badly when you found out that Saigon had finally fallen to the communists? How did you feel about it?

HB: Well, I felt very bad when we saw them on the top of the buildings. I mean, coming out of the Embassy and that kind of thing, couldn’t help but feel bad if you knew it. I felt that we had not done everything we should. I think we tried hard.

LC: Yeah.
HB: But in some instances, we didn’t know what we were doing. But that’s the way things go.

LC: Do you think the U.S. could’ve done more?

HB: It’s hard to tell whether you can do more or not. You can’t do things for people if they don’t want it to be done.

LC: Right.

HB: Not easy.

LC: Right. Yeah, you’re pushing a rock uphill really.

HB: Pushing things uphill.

LC: Yeah, yeah. Now do you have any feelings about Vietnam now? Would you like to go back?

HB: Oh, I’d love to go back for a visit.

LC: Would you?

HB: Really would. My very good friend went about two years ago and tried to find where the hospital was and couldn’t find it. That, I felt bad about that because it was, it was Quonset huts, but there were some good buildings, but I felt that they could’ve been used. But that’s none of my business, so they have to go and do things.

LC: But that’s a little disappointing though.

HB: Pardon?

LC: It probably was a little disappointing.

HB: Yes, it was disappointing to hear that there was nothing left after all that we really—I knew every rock and grain of sand practically in that place.

LC: But it’s still something you might like to do just to see Saigon and so on now?

HB: Yeah. Saigon was a nice city, but it wasn’t very nice when I was there.

LC: Well, no, it was a war zone when you were there.

HB: Yeah.

LC: Yeah. But you would go back if you had the chance.

HB: The Vietnamese suffered a lot for the war, they did.

LC: Yes, ma’am.
HB: They were hearted people. They tolerated it I think better than we ever would’ve.

LC: Have you gone to Washington D.C. to the Wall?

HB: Oh, yeah, I’ve been there. I was there at the dedication of the Korean Memorial.

LC: Really?

HB: Have you seen that?

LC: Yes, I have.

HB: To me, it’s the most impressive memorial we have.

LC: Yes, yeah. Yes, it’s incredible really.

HB: Yes, it really is.

LC: Can you describe the feelings you had when you were there at that dedication?

HB: Well, it brought back a lot of memory. I mean, it was a boiling hot day. It was very, very hot, but you couldn’t help but be impressed with what was going on and the people that managed to participate in that. You would know it was very hot with all us there. You know how the humidity in Washington can be.

LC: Oh, yeah, it can be awful.

HB: Can be awful and it was awful that day. I like the heat. I can take a lot of heat. I like it.

LC: But Washington is special. It can be so miserable.

HB: Has its way about it.

LC: Yes it does. Yes it does. What about the Vietnam Women’s Memorial, have you seen that?

HB: Oh, yes. I didn’t like that.

LC: What about it did you not like?

HB: Well, I was there for the dedication of it. I participated in the dedication. The Women’s Memorial was the one that I didn’t like.

LC: What about it bothered you?

HB: Well, because that piece of land has been there and partly hasn’t been—they evidently started to build something else and they had it right outside the Arlington
Cemetery. I said there was a whole other place to put the women’s. But that was just me. Nobody else felt that way, no one. But I thought that wasn’t really a good idea that you could see this outside the cemetery. That’s kind of funny.

LC: Yeah.

HB: But that’s the way I saw it.

LC: Have you been to the new World War II Memorial on the mall there?

HB: I haven’t been back to see it. I plan on going, but that is not as close.

LC: Yes, yes.

HB: As the other because I wasn’t overseas.

LC: Right. What do you think about the whole idea of having these memorials built?

HB: Well, I think we’ve gone kind of far.

LC: Do you?

HB: Yeah. I wonder how meaningful they’ll be to people in the future.

LC: Yeah, I think you’re right to ask that question.

HB: I don’t think they’re going to be very meaningful.

LC: I think they’ll possibly be more meaningful because they can listen to some of these interviews with people who served.

HB: Well, that may be so, it could be.

LC: I think that might help.

HB: I wish it would help others. Believe me, what till they finish with Iraq.

LC: Oh, yeah, yeah.

HB: That looks like it’s going to be—they just should not have it happen.

LC: Do you think that one’s going to go on for a while?

HB: I don’t think it’s going to be that long.

LC: No?

HB: We’re going to have to leave.

LC: Why do you say that?

HB: Well, they’re not getting anywhere.

LC: Yeah.
HB: It’s very difficult. But they’ll have to try somehow to get out of there briefly. We didn’t get out of Vietnam very briefly.

LC: No, that’s right.

HB: It was a real difficult time.

LC: Do you see any other parallels?

HB: Pardon?

LC: Do you see other parallels between Iraq and Vietnam?

HB: Somewhat yes. It’s going to be difficult to extricate ourselves. But maybe we can do it, I hope. I don’t know whether we can do it gracefully or not.

LC: Helen, what do you think about women who now are in so many different branches of the military?

HB: Well, of course, I was in when we didn’t—well, it was World War II.

LC: Yeah.

HB: They were only nurses. There were some Red Cross people, but they weren’t in the zone. I don’t see women going to war, leaving their children, which happens. That’s not easy.

LC: Yes.

HB: There’s a lot of work for women to do besides being part of the actual battle program. If they can just not have to go to—well, I don’t really know how to put it into words. I think women can do the work. I think that they very much well can do that, but do they need to? They certainly need them in their families. Their families need them more than—officers say that they do a very good job. I’m sure they do. They can do it, but why? I don’t think we need that.

LC: Really?

HB: I think it’s an awful lot for them to do. There’s the supply corps. There’s a lot of things. Also the repairs department, they’re very efficient at some of that.

LC: Right, intelligence—

HB: Yeah.

LC: Some of that stuff.

HB: Very good flyers and that kind of thing, but to go off to war and leave your children, I just don’t see it.
LC: So not so much in favor of frontline combat assignments.
HB: Yeah. The chances of them not coming back, there are some that aren’t coming back.
LC: Yes.
HB: This is no reason why they should not come back anymore than other people do. Some men don’t come back. So I think they can go head and—I don’t know. I’m not being very sensible in this stage of the game.
LC: Well, I mean, it’s a tough question. It’s one that—sometimes you think one thing and then if you think about it for awhile, you—
HB: I change my mind.
LC: That’s right, I do too. I do too. Helen, as you look back on your career, where would you say you were the most useful?
HB: I thought I was the most useful on the *Consolation*.
LC: Is that because you were doing so much treatment?
HB: Yeah, that’s what I was doing it for because it was much more satisfying to do the work—to me it is. Now maybe it isn’t with other people, is do the work, just work for other people.
LC: I was asking you about your most useful times and you thought the *Consolation* years.
HB: Yes, very definitely because I was busy doing things for somebody, not trying to get other people to do it. Maybe I’m not making that very clear, but it’s some feeling that I have that, that it was better for me. I would like to have many times in Vietnam, I wanted to dig in. I wanted to get into that operating room and do things.
LC: Instead of being the administrator?
HB: Instead of having to assign somebody else to do it.
LC: Yeah, yeah.
HB: But I wanted.
LC: Yeah. Would you say that—I mean I know you’re a very modest person.
HB: No.
LC: Well, you’re pretty modest.
HB: Tell a fib sometimes.
LC: Well, yeah, there’s that. But would you say that those were your, the years when you did your best work?

HB: My best work?

LC: Mm-hmm.

HB: Oh, I don’t know. I always tried to do a good job, but I think my skill was greater. I mean, you had to use your thinking if you’re assigning people or you’re trying to get them to do things that you think need to be done. It is not the satisfaction. I think that’s one of the problems with nursing these days anyway. They’re handling an awful lot of papers and things like that and machines. They’re not that close to the patient situation. I know I wouldn’t. I don’t think I’d like to be taking care of bedside patients now because what kind of satisfaction do you get? It’s not the same.

LC: Is it because you’re checking monitors and all that kind of stuff?

HB: Things, it’s things and it’s not easy.

LC: Yeah. Helen, is there anything that I haven’t asked you in the course of the interview that you’d like to make sure that we include in the record?

HB: Well, I’m sure there’s some things. Everyday when we finish taping, I think of things that I wish I had said. Did I give you a correct spelling of Vern Fritchet’s name?

LC: No, please do.

HB: F-R-I-T-C-H-E-T.

LC: Okay. I think that might have been what you told us before, but—

HB: I might have.

LC: But we’ll double check.

HB: I’m not the best speller in the world.

LC: Nor am I.

HB: I have problems. I can spell a word ten different ways on the same page.

LC: Well, you know, we’ll have a chance for you to add things to the interview if you’d like when we send you the transcript.

HB: As I go to look at some of the papers and things that I’m going to get ready to send you when I get around to it—

LC: Right.
HB: It brings back things.

LC: Oh, sure, yeah.

HB: I would be ready to do something with it.

LC: Okay. Well, I’ll tell you what. We’ll make a deal. If you have a set of things that you would like to add to our interview, you can let me know by just dropping me a line and I will call you and we’ll set up a time to do an additional session.

HB: Okay, I’ll do that. I know the things will come back to me when I begin getting the slides and that.

LC: Oh, yeah.

HB: I haven’t looked at them for years.

LC: Oh, yeah. Well, that’ll be—

HB: That will, I know that there will be quite a bit then.

LC: I’m glad you’ll have a chance to do that because it’ll be probably fun for you and—

HB: You’re not in a big rush are you?

LC: Oh, no. We’ll be here.

HB: That’s good.

LC: We’ll be here.

HB: You’re going to be at it for a long while.

LC: Yes, ma’am. Yes, ma’am. Well, with that, I want to thank you very much, Helen, for participating in the oral history project.

HB: Well, I’ve enjoyed it.

LC: Your time invested here I think has been invested well. I personally thank you for the effort that you’ve made.

HB: Oh, well thank you very much. I appreciate it. I’m glad to get it done.