

RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY

NEW BRUNSWICK

AN INTERVIEW WITH EDIE MEEKS

FOR THE

RUTGERS ORAL HISTORY ARCHIVES

INTERVIEW CONDUCTED BY

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BEACON, NEW YORK

JULY 24, 2018

TRANSCRIPT BY

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Kathryn Rizzi: This begins an oral history interview with Edie Meeks on July 24, 2018, in Beacon, New York, with Kate Rizzi. Thank you so much for having me to your house and doing this oral history interview.

Edie Meeks: Thank you for coming.

KR: To begin, can you tell me where and when you were born?

EM: I was born March 13, 1944 in Minneapolis, Minnesota.

KR: Can you tell me about your family history, starting on your mother's side?

EM: Well, my mother was one of four children, and her father was one of thirteen children that all farmed down in southern Minnesota. Mom got a degree, which was very unusual for women at that time, and her mother actually had gotten a degree from the University of Minnesota, which was really unusual. She was one of three sisters, and they all got degrees because the father said, "That's it. You have to be educated." Growing up, she was a difficult woman to live with, but we made it through, let's put it that way.

KR: Did your mother go to the University of Minnesota?

EM: Yes, she did.

KR: What did she major in?

EM: I think English. Then, she was on her way to getting her master's when she met my dad, and they got married. At that time, the women did stay at home, and he, being an old Irishman, you really had to stay at home. I think she was really born before her time, because she could've been a CEO someplace, but she had her family and that was tough on her, I think.

KR: What about your family history, on your father's side?

EM: He's Irish. He comes from Milwaukee. He was one of eight children. His father died when he was fourteen, and he had to quit school and go to work because there was no Social Security or anything at that time. He actually was a self-made man. He probably never got a high school diploma, but he worked for Cargill. He worked his way up to head of the accounting department for the international feed and grain division. [Editor's Note: Founded in 1865 by W.W. Cargill in Conover, Iowa, Cargill is an agricultural and food processing company now based in Minnetonka, Minnesota.]

KR: How did your parents end up settling in Minneapolis?

EM: Dad was working there for Cargill. Mom was born in St. Paul, and so she had always lived in the area. They just found a house in South Minneapolis, and that's where they ended up.

KR: Do you have siblings?

EM: Yes, I have one older sister and two younger brothers.

KR: What are their names and dates of birth for the record?

EM: Donna, let's see, she was born August 29, 1942. Tom was born April 13, 1946. Charlie was born August 21st, I think, and that was 1949.

KR: What was it like growing up in Minneapolis?

EM: Actually, Minneapolis is a wonderful place to live. When we grew up, we lived in a neighborhood where there were a thousand kids. All the mothers stayed home, so you just ran outside the door and somebody's mother knew where you were. There was always kids to play with, and we got into trouble. [laughter] We built tree houses and just the stuff that you do when you're a kid.

KR: What section of Minneapolis was that?

EM: South Minneapolis. It was near Lake Harriet, not too far from Lake Harriet. I went to Visitation School first until sixth grade, and then I went to Christ the King School. We moved at that time, still in South Minneapolis, but we moved. Then, [I] went to Holy Angels Academy for high school and then went to Saint Mary's School of Nursing in Rochester, Minnesota.

KR: Tell me a little bit about your early schooling and what your academic interests were.

EM: [laughter] I look at the kids today. I called my sister, in fact, when my granddaughter started reading when she was three, and I said, "Didn't we do *Dick and Jane* in first grade?" She said, "Yes, we did." Nobody was expected to read early, and it's really just kind of a delight to see what these kids can do.

We went to school, and, at that time, it was just getting through school and growing up, the relationships that you have and the cliques that there are. When I got to Christ the King, I happened to join the basketball team, the girls' basketball team, which was great fun. I loved that. It was just like a young girl growing up.

KR: What was basketball like then?

EM: Basketball, girls played half court, because we were too "frail" to run the full court, so the guards would run with the ball to the middle [of the] court, throw it over to the forwards on the other side. We had a great time. It was really a lot [of fun]. That's all we knew. I couldn't quite figure out why we didn't run the whole court because the guys did. We had a winning basketball team. We had the city championship for two years, so that was fun.

KR: What was your schooling like?

EM: Hard to say. The thing that you remember mostly are the nuns. The nuns at Visitation were Benedictines, and they were not nice people. The Franciscans that we had at Christ the King were very nice and kind, and I think we had a good education. We had a well-rounded education. We learned to sing, because we had to be the choir. If there were funerals or something, they'd haul the eighth grade out and we'd sing the funeral mass. We had to learn how to speak Latin, not know what it said, but to speak it in order to sing. We learned art, but we also learned history and geography and spelling, which I wasn't too good at, and all the other things that you're supposed to learn. [Editor's Note: Benedictines are nuns and priests following the rule of St. Benedict. Franciscans refers to members of the Order of Friars Minor founded by St. Francis of Assisi.]

KR: What was your favorite subject?

EM: I liked geography a lot and singing. I love singing. I think it's not that I liked one especially, although I did like geography, the one that I didn't like so much was math. It wasn't until years later that it dawned on me that it's because I have--a friend of mine said, when I told her about this, she said, "Well, you have a learning disability," and I said, "Well, all the nuns did was hit you if you didn't get it right." You didn't go to a special class. [laughter] I switch numbers. Even if I had done the problem correctly at the end, I might have switched a number, which would've made it wrong, and I never knew that that's what I was doing. I was always just really put off of math. That wasn't my thing.

KR: Were any of the nuns mentors, or did you have any teachers who you remember as mentors?

EM: I don't think you'd call them mentors. Some you liked more and would want to be more like. Some of them you just kind of tried to dodge around. Most of them, the Franciscan nuns, were really nice. I had Franciscans also in high school. They were very nice. It wasn't all nuns. We had nuns and lay teachers there. There were some that were wonderful and some that were okay.

KR: Did your sister and brothers go to the same schools?

EM: My sister was in eighth grade when we moved. She stayed at Visitation, but then she went to Holy Angels Academy. The boys moved to Christ the King, and then Charlie went to Benilde, which was an all-boys Catholic school, and Tom went there for a year and then went to Southwest, which was a public school.

KR: What were your interests as a young child and then as a teenager?

EM: I don't know if I had interests. I knew what I was going to be since I was little, little, because as Mom said, "You always asked for a nurse's kit at Christmastime," you know those little fake ones, and I always wanted to be a nurse. It was either that, or at one point I wanted to be a policewoman and then at one time I wanted to be a Roller Derby star, but I settled on nursing. [laughter] There was never a thought of doing anything else. In fact, I feel that I'm very lucky because I went back to one of my high school reunions--I think it was the twentieth--

and some of the gals were still saying, “I don’t know what I want to do. I don’t know what I want to be,” because at that time there were like four choices, teaching or nursing or be an airline stewardess or a secretary. I look at what my daughter can do today, and it’s amazing. In fact, she’s doing something I never would have even thought of, [laughter] so it’s just marvelous.

KR: Why did you want to be a nurse?

EM: I don’t know. I just knew that I wanted to be a nurse.

KR: Did it have something to do with wanting to help people?

EM: I’m sure that’s what it was. It’s interesting too because when I got into nursing, what I found was that I liked immediate nursing. I did recovery room and emergency room, intensive care, operating room, all something where you’re immediately taking care of a problem and can see an outcome. I didn’t care for the medical floors too much, because you had these patients that came back and came back and it was a chronic illness usually that they had that you couldn’t see that you really did anything for them. I liked to see the immediacy of what I did.

KR: As for your other possible career paths as a policewoman or a Roller Derby star, did you know any policewomen?

EM: No. I think part of that had to do with both of my folks were alcoholics, and it had to do with having power because those Roller Derby stars were quite powerful little gals. I never really thought I would be a Roller Derby star. [laughter]

KR: Roller Derby was a form of entertainment for you when you were young.

EM: Well, I’m watching it on TV, yes.

KR: What do you remember about watching?

EM: Those gals were tough. They were really tough babes. [laughter] That was really what I think I needed was to be tough, living in this house with two alcoholic parents. We, the four of us, lived through it, and I think we lived through it because we had each other for one thing. My sister and I are extremely close, and it’s the kind of thing where when you’ve gone through the fire, all you have to say is one word and then the other one’s off laughing like crazy because she knows exactly what you’re talking about. So, I’m very lucky to have a sister like that.

KR: You mentioned the four possible career paths that were available to women at that time. When you were in high school, what were the messages being sent to you?

EM: Actually, because it was an all-girls school--in fact, I was really glad that I went to an all-girls school--because in an all-female school, the boys won’t be president. A girl will be. The boys won’t be vice president or secretary or treasurer or head of any club. The girls will. The girls have to learn how to be chairmen of [clubs] and get things done. It’s kind of they sent you

out saying, “Yes, you can do. Of course, you can do.” I think I was a step ahead of a lot of gals in going to an all-girls school.

My daughter went to Mount Holyoke [College], which is still all female. You could see the difference in her friends. Mount Holyoke prepared them to go out and have a job. They had a great resource center for them, worked to have them have a job before they graduated, and it was pretty marvelous to see how that worked and the networking that they did.

KR: Then having two brothers would have made you double prepared.

EM: Right, right.

KR: How close were you to your brothers growing up?

EM: Very close to Tom because Donna and Tom and I were like in a little group, and then Charlie came a little later. In fact, I worked--this is going ahead--but I went on a mission. After I graduated from nursing school, I worked in an emergency room for six months and then went up to north-central British Columbia with the missionary group. Now, the missionary group was called Frontier Apostles, and Bishop O’Grady just wanted educated young people to come north. We worked in the hospital. The parish housed us or fed us. Then, we sent all but twenty-five dollars a month to the bishop, and he built schools. He was a marvelous man, Bishop O’Grady.

When I was up there, I looked out the window--now, it was in the middle of summer, which lasts about two months, and then you have winter all the time--and I saw this guy and I thought, “Who is that? That’s my brother.” I couldn’t believe it--he had hopped freight trains up to north-central British Columbia in order to see me. [Editor’s Note: Bishop John Fergus O’Grady of the Oblates of Mary Immaculate founded the lay, volunteer organization Frontier Apostles to work at schools, including Prince George College, and hospitals in British Columbia. O’Grady served as the Bishop of Prince George, British Columbia from 1967 until his retirement in 1986.]

KR: Wow.

EM: He said, “And I even bought a harmonica.” [laughter] He learned how to play it, too. So, then, he stayed there for about a week. Then, he went down to California, and he sold encyclopedias door to door. When I left British Columbia awhile after that, I went down to see him before I went back to Minnesota. When you sell encyclopedias door to door, you don’t make a lot of money. I thought, “Well, I’ll just get a job.” Those were the days where if you were a three-year graduate, which I was, those hospitals wanted you, because you knew how to work and you know how to organize because that’s what you learned. So, I walked into Cedars of Lebanon, and I said, “I’d like to [apply for a job].” “Can you start tonight?” I said, “No.” [laughter] I said, “I don’t have a license.” “Don’t worry about the license. You have one in Minnesota. We’ll get it all worked out.” So, I started work there, and I stayed there for about eight months.

KR: Where was Cedars of Lebanon?

EM: In Los Angeles, California.

KR: That is where your brother was.

EM: Yes, [he] was selling encyclopedias.

KR: To go back to Minnesota, you have talked about this in answering other questions, but what role did religion play in your growing up?

EM: It was a big part. In looking back, I always wanted a spiritual life. At that time, the Catholic Church was not what it is today. At that time, it was all about rules. It was the kind of thing where if, for instance, they told us that if you steal less than seven dollars, it's a venial sin. If you steal more than seven dollars, it's a mortal sin. Well, then later, I moved to New York, and they said, "We were told twelve dollars." So, inflation was a little higher on the East Coast then. [laughter] It wasn't about, "You don't steal because it's not yours and it's not nice and it hurts other people." It was about the rules.

When I finally, going through all of these Catholic schools, got to California, that was in '67, when Haight-Ashbury and all that was happening, that was when I really searched my soul to see what I wanted to believe in. Actually, I was glad I did it, because it really carried me through Vietnam. It was really a blessing that I had done that or that the work had been allowed. What I decided was that churches are like telephones that all call the same place. If one doesn't work, you just pick up another and that nobody really knows the answer, so why don't you believe what makes you happy and functional. I kind of conglomerated Buddhism and anything that really worked for me so that I could believe in a higher power, a God that was good, because the one that I was brought up with wasn't the best. At that time, it was, if you commit a mortal sin, even if you've been good all your life, if you commit a mortal sin, right before you die, you go to hell. Then, I would think to myself, but wait a second, if God knows everything, and when he created us, he knows exactly where we're going and my God would not create us for hell. [Editor's Note: In the summer of 1967, the center of the counterculture was the neighborhood of Haight-Ashbury in San Francisco.]

So, that's when I really started believing that God wants us all to return to him and we may have to go through different lives learning what we're supposed to learn, but that's what we do. It also made sense to me because I couldn't figure out how some people could be so evil, like Hitler or some of our leaders today, [laughter] and how they have no empathy or compassion for anybody. Then, the only thing that keeps me sane is the thought that they're going to have to come back and learn it, and hopefully they'll be some kid in Calcutta having to make their way, that they learn what it's really like to be just a person. That's what really keeps me sane. Because nobody really knows the answer anyway, I could believe whatever I want.

KR: Did you have any part-time jobs growing up?

EM: Yes, babysitting, a lot of babysitting, but I also worked at Woolworth's part time. I think I started that in my junior year, and the thing about that experience--and that's why I think every kid should have part-time jobs--is that I met people there who worked at Woolworth's for a

living. I just thought people had part-time jobs there, “Oh, yes, it’s just a part-time job place,” but they worked there for a living. There was one lady that worked in jewelry and had worked there for twenty-four years, and I thought, “Oh, my God.” [laughter] This wasn’t a lot of money they were making. So, it also showed me what I didn’t want to do for the rest of my life.

KR: What did you do at Woolworth’s?

EM: This was out in Southdale, which was actually the first enclosed shopping center that had lots of stores in it, and I worked in the bakery and pizza stand.

KR: What were political discussions like at your home when you were growing up?

EM: Well, what was interesting was my dad was a staunch Republican, but at that time Republicans were different, at least this is what my dad used to say. He said, “We believe that you should help people to stand on their own two feet so that they can have a job and work. The help should be there for them.” It was a much kinder party back then.

In Minnesota, the big party was the Democratic-Farmer-Labor, DFL, and they were very helpful, the reason being that most of the people who live in Minnesota were Scandinavians and they were very much into helping each other and working together and it being a farming community, that’s what you did because you needed to. So, I grew up in a state that was kind to its people. [Editor’s Note: In 1944, the Minnesota Democratic-Farmer-Labor Party formed when the Democratic Party merged with the Farmer-Labor Party.]

KR: Did you have family members who were attracted to the DFL?

EM: Oh, yes, yes.

KR: Were they very involved?

EM: No, nobody really argued the politics. Everybody had opinions, but it wasn’t really arguing. I remember I was in high school when Kennedy ran against Nixon, and so they wanted to have a debate and voting. Well, looking around trying to find a Republican was pretty difficult [laughter] and they may have been Republicans, but they were all for Kennedy. So, a few of us decided [laughter] that we would be for Nixon and had to make up a platform and the whole thing. So, it was interesting being on the vast minority side. [Editor’s Note: In the presidential election of 1960, Democrat John F. Kennedy narrowly defeated Republican Richard Nixon.]

KR: When you look back on that now, do you regret that?

EM: Oh, no, no.

KR: How were you developing politically at that time?

EM: I always believed that you should be kind. Travelling, that's why I think everybody should travel, you really see how lucky we are in the United States and the opportunities that we have, but you also see what really poor is. When I worked in British Columbia, that was my first real touch. We had two Indian reservations within the Burns Lake area, and we took care of a lot of people in the hospital. There, you saw really poor. Even though they were given checks by the government and then just plunked on a reservation, you saw that didn't work. What was wrong with these people that they would do that? The group of Indians that were there were called Carrier Indians and they travelled all the time, and now they couldn't.

EM: When you were working as a nurse, what were you treating these people for? How were you seeing poverty manifested?

KR: A lot of drinking. We had patients that would come in with DTs [delirium tremens]. We had people who would feed their kids tobacco, and they would spike a high temperature. They'd bring them in on Friday and pick them up on Monday, after the weekend. What can you do, except take care of the poor kid? It was things like that that really made you see that, in the first place, how lucky I was, but also that everybody's different and my job was to nurse, not to judge.

I think that really helped when I went to Vietnam, because we had to take care of Vietnamese soldiers. I remember thinking to myself, "Now, wait a second," because I was so angry that we had to take care of this guy, and I said, "Wait a second, first of all, you're a nurse and you have an obligation to take care of this guy just like you would anybody else. So, just pull yourself together and get with it." I had to make the decision to do morally what I thought was right.

KR: Did you know if those soldiers were North Vietnamese Army or Vietcong?

EM: Well, I think they had uniforms. Usually, what we would get in the intensive care unit were officers because they wanted to interrogate them. So, they were probably part of the North Vietnamese Army.

KR: I will ask you more about that in a little bit. I wanted to go back to your high school. What were your family's expectations for you regarding college?

EM: Oh, they knew I would go on to something. Everybody in the family was supposed to go on to something. My sister wanted to go into theater. The two of us actually were active in the theater group in high school, which was a lot of fun. It really gives you a feeling of being able to speak in front of people.

Then, my sister got pregnant when she was nineteen and married the fellow that she got pregnant by that she had known since eighth grade. So, that kind of put the kibosh on that. My mom went crazy, because I think she was living her life through my sister. My sister's very pretty and very smart and had just gotten into the best sorority and the whole thing. All of a sudden, it wasn't going to happen, so she really turned her back on my sister. Because we knew we could never trust her anyway, that wasn't a big surprise that she would do that, because it was always all about her.

Then, when I was going to graduate, I knew that I was going to go to Saint Mary's, I had applied there, and my dad sat me down. He said, "Listen, I'll be happy to pay for your college education. Why don't you go to the U of M [University of Minnesota] and get a degree?" I said, "Because it takes five years and I want to nurse right away," because what you do is you do two years of academic and then you do a three-year program [at the University of Minnesota]. So, I wanted to go right to the three-year program. Saint Mary's was one of the top two schools in the nation, because it was with the Mayo Clinic. So, he said, "But." He really tried to persuade me, but I said, "No, this is really what I want to do."

KR: You applied to Saint Mary's and the University of Minnesota.

EM: No, I didn't apply to University of Minnesota. I just applied to Saint Mary's. That was the only school I applied to.

KR: Tell me about Saint Mary's and about your course of study.

EM: Saint Mary's, I was so blessed to go there. What a school that was. It was amazing. What they taught you was how to take care of the physical, emotional and spiritual well-being of your patient and that of their family, so it was really a total concept in taking care of people. Actually, the Mayo Clinic still has that today. It's really amazing to go down there. My dad was sick and I had to go down there and the people were as wonderful as I remembered them. The teachers were wonderful. What was good was that we had fifteen hours of practice time on the floors. Then, we also had to work a certain amount--I think it was twelve hours a week or something like that--on the floors to help pay for our tuition. Then, we had classes. So, we were busy all the time. This was eleven months out of the year. We were totally involved, and it was great because everybody was totally involved. When you were studying a certain—now, some schools didn't do this--but when you were studying a certain subject, you also worked in that area, so that it reinforced what you were learning in the classroom, which I think was wonderful, because, otherwise, how do you make sense of what's going on?

KR: When you were working on the floor, what were you learning?

EM: When we were working on the floor, if it was academic kind of working on the floor, there was an instructor there. Because of what you had to do, you had to know the diagnosis of the patient. You had to know all the drugs and the side effects of all the drugs that patient was taking. You had to know the history of the patient. You had to know everything about the patients that you were taking care of. In the evenings when you'd work or you worked during the day on the weekend, what you learned was organization because, especially towards the end of the second year and then the third year, they would put you on a ward by yourself. You and an aid or two would be in charge of the whole ward, and so you learned organization and how to deal with people and yet keep nursing special, keep it tuned into the patient, not just see how fast you could run through it.

KR: What professors stick out in your mind?

EM: I had two that were really [laughter]--one was one of my favorites; the other one was just really tough and I think it's the tough ones that really do stand out. We had a Ms. Foster who taught neurosurgery. You'd be on the neurosurgical unit taking care of the patients before they went to surgery and after they came back. Boy, you had to know everything, and if you didn't, you got it in the neck so that you were well prepared. She really showed me what preparedness meant, that you have to be prepared if you're going to take care of especially a patient like that. I think what they forced us to do was to see what perfection was, so that at least we could aim for it out in the real world and know what it is, so that we can say it is achievable, maybe not today in this situation but it is achievable. The second one was Miss Undland. She was my operating room nurse instructor, and she was another tough one. You had to know your stuff and you had to be aware and on top of things, and so I think it was the tough ones that I really remember.

KR: Were the professors all women?

EM: Yes.

KR: Just to clarify, so when you were working on the floor, that was at the Mayo Clinic.

EM: Yes, well, it was Saint Mary's Hospital. There were two hospitals, Methodist-Kahler and Saint Mary's, and now they're all owned by the Mayo Clinic. They were run by the nuns then. They were like this [joined], because when Charlie Mayo first made the Mayo Clinic [and] had the Mayo Clinic happen, he did it with a group of nuns that set up the hospital. [Editor's Note: Dr. William W. Mayo and his sons, William J. Mayo and Charles H. Mayo, established Saint Mary's Hospital, which later became the Mayo Clinic, with Mother Alfred Moes and the Sisters of Saint Francis in 1889.]

KR: I wanted to ask you about the Midwestern ethos. What do you think you learned growing up and getting your education in the Midwest that has carried through the rest of your life that you see is really different from people who come from different regions of the United States?

EM: Well, for instance, one of the things they talk about is Minnesota nice, because people are nice there. They really are. You go there and you think, "Oh, my God, I forgot about this." [laughter] Everybody says, "Oh, you're so nice, Edie," and I think, "Well, that's just what you're supposed to do, right?" [laughter] I think that they're nice, but it's also because the Midwest, the center of the country, is almost protected from change. Change seems to start on each coast. It started in New York and it started in California and up the coast and everything for the war, for the Vietnam War, and then it moved in. I think that the Midwesterners were the last ones to see that this was not a good war, because they wanted the United States to be right. The United States had never been wrong before in a war, and this was the first one where the choice was not a good one. I think that was hard for them to take, the Midwest, but they're very nice people. They're really nice.

KR: Going back to Saint Mary's, you were away from home, not too far away from home, but away from home nonetheless.

EM: Right.

KR: What was it like being away from home for the first time?

EM: It was wonderful. I had gone to camp before. I knew it wasn't too far away, but also I hadn't moved from the culture of Minnesota to the East Coast, which must be a big change for some people and especially back then. I would say maybe six people out of my grade--now, I had two hundred in my high school class--maybe ten went out of state for further education because it just wasn't done. People didn't think about going because we had lots of good colleges in Minnesota. [laughter] Now, it's a lot different, the thought process of where you want to go to college.

Yes, I had a lot of fun. We had a lot of fun in the dorm. In fact, just recently, last week, as a matter of fact, a gal that I graduated from nursing school with came to visit, and we went up the cabin that I have up in central New York and just laughed and laughed about some of the stuff that we did. It was really nice. They were nice gals, very nice gals.

KR: What was daily life like?

EM: Well, it varied, especially as you got along in school because everybody had different shifts and different classes at different times. My roommate and I, Sara Ann Murphy, she and I ran in two different kinds of groups, and so that's why we got along so well because we weren't together all the time. It was really great. The dorms were nice, and things were fair. Yes, it was really pretty nice.

KR: What did you do for fun?

EM: There wasn't too much [time for fun]. [laughter] It's interesting because it's almost like it was in Vietnam, in that we worked all the time or we were studying. Maybe once in a while, we'd go out or something like that, but it wasn't a big party school because you didn't have time, for one thing. They had mixers, now that I think about it, where they would have young men come from different schools or whatever for a dance, but other than that, you just worked all the time or you studied.

KR: How often would you go home to visit?

EM: Only at holidays.

KR: You said this was a three-year program, eleven out of twelve months in a year.

EM: [Yes].

KR: When you were getting to your third year, what were you thinking about for the future?

EM: I really didn't know. It was interesting because I always knew I wanted to go into the service at some time. At that time, I think all the services had this situation where they would pay for your second and third year in nursing school if you then gave them three years of service.

I think we had four or five of those gals. One of the things that happened was, because you were being paid while you were in school as an officer, a lot of them didn't do the extra work that we had to do to pay for tuition. I think that they really missed out, because that's where you learned how to get organized and learned how to see the big picture and what to do first. Yes, that really helped a lot, I think.

KR: Why did you have this idea that you would go into the service?

EM: I have no idea. If reincarnation happens, then it may have something to do with where I was before. [laughter] I always knew I wanted to be a nurse and I always knew I would go into the service of some kind.

KR: What was graduation like?

EM: It was bittersweet in a way. We were all happy that we were graduating, but we had been through hell together. All of a sudden, you're going to be spreading all over, because these gals came from all over the country, from Chicago and Nebraska, to go to this nursing school.

So, I went back home to Minneapolis and got a job at a hospital I think out in St. Louis Park, Methodist Hospital, I think it was called, and in the emergency room. That was really a good thing for me, because it wasn't a hugely busy emergency room and you got a lot of broken legs or whatever, but it wasn't like a city emergency room, where I would've been overwhelmed to go into that without having some kind of practice ahead of time.

KR: What year was this?

EM: That was 1965.

KR: Okay, 1965. I just wanted to back up and ask you something. You said there were two hundred women in your graduating class from high school.

EM: Yes.

KR: Could you give a rough estimation of how many went on to college?

EM: I would say probably ninety percent.

KR: Is that because of your high school? Was that because of the neighborhood you lived in?

EM: I think it was because of the school. The school itself gave you endless opportunities of thought. To me, it was surprising how many people went on for their master's, their doctorate, became lawyers, and I thought, "Isn't that just amazing?" In fact, I went back for my fiftieth high school reunion. They asked me to speak, and I thought, "Oh, well, why me?" [laughter] The only thing I could think to talk about was what going to an all-girls school did. It really allowed me to think of endless opportunities, and it showed me that women can do anything because there were no guys to say, "That's my job. It's not yours." We had more people come

to our reunion than had ever showed up at a reunion. I think it's because--I was talking about that with my sister--my class, for some reason, was not cliquey. You belonged in groups, but you also intermingled in other groups and joined this organization and that organization. There were eight of us that sat at the same lunch table for four years, but we were all in different things. Because it was so un-cliquey, I think everybody felt comfortable in coming back. My sister said she didn't go because they were too cliquey and she didn't want to [go]. She was two years ahead of me.

KR: Flashing forward to 1965, there were massive changes going on in society.

EM: Right.

KR: How was this affecting you?

EM: Not much, because we were in the Midwest. [laughter]

KR: Insulated.

EM: Yes, really truly, yes, and it wasn't until I got to California actually that I said, "Oh, my God, what's going on here?" What really persuaded me to finally go in the service was the fact that I had lived with my brother down there, while he was selling encyclopedias. I have to tell you; that was the strangest group of people I have ever met in my life. They were wonderful.

KR: The encyclopedia salesman?

EM: Yes, yes. They were incredible. You could do a movie on them. [laughter] My brother was drafted, and so he decided to join the Marines instead of going into the Army. He was at Camp Pendleton, which was just south of Los Angeles. So, I stayed there working while he was in boot camp and then went down for his graduation. During that time, I thought to myself, "I don't know if this war is right or wrong, but if something happened to my brother, I'd want somebody there who wanted to be here." I had seen nurses who were like, "Oh, God, when can I get out of here?" I thought, "If you're going to be over there, you'd better want to take care of those guys because they should get the best care possible." I thought, "Well, I'll join up." After he graduated from boot camp, it was like the end of the year, I left LA. I went back to Minnesota and joined from Minnesota in the next February.

KR: What year was that?

EM: That was 1968.

KR: Your brother deployed with the Marines earlier in 1968.

EM: Actually, then he was sent to some other kind of school that he had to go to, and he was stationed in the Philippines. They made an excursion into Vietnam but then flew back to the Philippines. Actually, it was funny because I joined the Army and I said, "Oh, I joined the

Army,” and he said, “Edie, the Navy takes care of the Marines.” [laughter] So, I said, “Oh, yes.” I think he was relieved that his sister wouldn’t be there. [laughter]

KR: That is my next question. Why did you join the Army Nurses Corp and not the Navy Nurses Corps?

EM: I don’t know, but I’m glad I did because the Army was the only service that went into Vietnam. The Navy were on ships outside of Vietnam and the Air Force flew in and out with patients, but we were the ones that were stationed there. I’m glad that I joined the Army and was able to do that.

KR: I want to ask you about the enlistment process but first, I just want to back up a second and get the chronology. After you graduated in 1965, you were working in the emergency room at Methodist.

EM: Right.

KR: When did you go to British Columbia?

EM: January of the next year, of ’66.

KR: How did that opportunity come about?

EM: Actually, the bishop came to our school. He said, “Listen, we need you people up there.” He promised you a husband. [laughter] Once you got up there, you looked around, you said, “No thanks.” [laughter] Anyway, my good friend, Mary Jane [Mertz], the one that came to visit me, went up there first, and so I thought, “Why not?” So, I signed up to go up and went up, arrived there January 1st of ’66 and stayed there until, I think it was, March of ’67. It was quite an experience, quite an experience, just living that far north in the winter, because they had winter nine months out of the year.

KR: Describe what that was like.

EM: Well, it wasn’t until years later that I learned, found out within myself, that I get depressed, that no-sunshine kind of depression. If you worked nights during the winter, you never saw the sun because you’d be sleeping during the day. It was what I would call a real truly pioneer experience, because they were pioneering out there. People were cutting down trees and building houses. They were coming from all over. The Frontier Apostles also came from all over. They came from the United States but also from Eastern Canada, from Europe and from Ireland, Scotland, so it was quite a conglomeration of people.

Mary Jane and I worked in the local hospital, old Burn’s Lake Hospital. It had forty-six beds, and you did everything. You delivered babies if the doctor couldn’t make it. If they had an emergency that came in, you had to do what you could do until the doctor got there, and you just did it. [laughter] It wasn’t like you were in the pediatric ward. You were in every ward because it was only forty-six beds. Mary Jane and I were talking about the operating room, because we

both love the OR. I remember up there [when] they had an emergency appendectomy on a little boy, and one of the doctors had to do drip ether because they didn't have any anesthesia or anesthesiologist there. I said, "I think that's the last time drip ether was ever used was during that year," except in a foreign land someplace.

KR: I take it you got there not by hitchhiking or riding a freight train.

EM: No, no. Actually, I took the train from Minnesota up to Montreal and then it rode [across Canada]. It was a great transition because you got to see how different the country was. You went from Alberta to the mountains and you go through Banff to Vancouver. It was really interesting.

KR: Tell me what it was like living in Los Angeles.

EM: When I flew from Burn's Lake, which was a town of fourteen hundred people, into the LA Airport, I got off the plane [laughter] and stood there. My brother was not there to meet me, which was not a big surprise, Tom. I got on the phone and called my dad, who's in Minnesota. I was crying, because I was so overwhelmed by all the people. I hadn't been around that many people forever and didn't know what to do. You came from this area where there were fourteen hundred in the town and there was eighteen hundred in the airport. The towns were really small and everybody got to know each other. Dad said, "Go to this place and that place." I did, and I got to Tom's apartment. It was really a shock.

At one point, while we were there before he went into the service, I had to buy a car because I was going to stay there. For three hundred dollars, I got [a Ford] Edsel. [laughter] It was the kind where you pushed it to turn it on, and then you pushed it to change gears, if I remember rightly. It was the strangest car, now that I think about it. We were just glad to have something that would go. I said to Tom, "I've got to get away from all these people." The only place they had no people was Camp Pendleton as you drove through it. It was really interesting how you couldn't get away.

KR: What neighborhood in Los Angeles?

EM: Hollywood we lived in, yes.

KR: What was your first impression of going to the beach in California?

EM: I think we only went to the beach once. It's interesting because I don't think that a lot of people in LA are beach people. They just live in LA. I think that a lot of tourists are, or if you live right on the beach, maybe you are, but, otherwise, to go there and to have to park, it's more of a hassle than anything.

KR: Tell me about your exposure to the anti-war movement when you were in California.

EM: I don't think I was really exposed to the anti-war movement. I was exposed to many psychedelic kind of people and free thinkers, I guess you might say.

KR: The counterculture.

EM: Yes. Again, even when I joined the service, I really had no opinion about the war. I just figured I want to be there for my brother if something happens, but it didn't take long after I was over there to realize that this was a waste. I started becoming so angry that I finally had to tell myself, "Okay, you cannot live like this." All these young men were coming in and being blown to pieces for no reason, and they would say, "They aren't letting us win." I really had to kind of shut down. Also, you would lose some of them, but you really didn't have time to mourn or to even think about it. You just had to keep going to the next guy. So, that was when I really became anti-war.

KR: You joined the Army Nurses Corps. Your brother joined the Marine Corps. Did you have other friends, family members who were in the service?

EM: The only other member was my uncle, my mom's brother, who was in the Navy during World War II, but that was it.

KR: You said you went back to Minnesota after Los Angeles and you enlisted in Minnesota.

EM: Yes.

KR: What was the process like after you signed up?

EM: Well, first, I walked into the recruiter's office, and I said, "I'd like to join the Army and I want to go to Vietnam." Well, the recruiter almost passed out on the floor. [laughter] Nobody does that. [laughter] They were running for the hills; they weren't coming in.

KR: The recruiter did not know what to do.

EM: No, right, right. What happened was [that] there was a gal from I think either northern Minnesota or one of the Dakotas that was also going at the same time, and so we decided to ride down together. She had a car. We drove down to Texas. It was Fort Sam Houston, Texas where we had our basic training. That's where they train all the medical people. [Editor's Note: Located in San Antonio, Texas, Fort Sam Houston has served as the Army's primary medical training facility since World War II.]

The training itself was very interesting. I don't know what they do today. Today, it's so totally different. Back then, my feeling was that nurses were part of the Army and we were officers, but we were not warriors. We were nurses. Today's nurses that are in the service are really warriors. They carry weapons. We couldn't. We weren't allowed.

When we got down there, sometimes it was really bizarre. For instance, I'll never forget, we had just learned how to do a trach [tracheotomy] on a live animal. What they did was they taught you what to do if everything got so bad that you had to shift up one, so that you had to do what many of the doctors would do and the doctors had to do surgery or whatever. We learned how to

do cutdowns. We learned how to do trachs--and these were on live animals--so that we would know what was coming if it was coming. Here I am, this nurse from Minnesota who really believes that I'm supposed to be there to help people, and then this major comes in, because we also had courses in what the Army was. He was talking about the kill power of certain bombs and certain weapons, and he was almost salivating. I thought, "This is so bizarre." It was like night and day almost. So, it was really kind of strange.

KR: Had you learned how to do a tracheotomy before basic training?

EM: I knew what to do. I had never done one. They taught you because you saw them in the OR. In the emergency room, one of the things I always did was I, because I worked in the ER, I would carry a little kit of stuff in case there was an accident and I would carry a fourteen-[gauge] needle, which has a pretty big bevel on it, and you could just slip that in and the person could breathe. So, [I would do] little things like that, but I had never done the cutting and putting in the tube or anything.

KR: Were you doing the tracheotomies on goats?

EM: Yes.

KR: What were you learning about cutdowns?

EM: Just how to do them. What comes first and what comes second and what to look for and that kind of thing.

KR: Was that new also?

EM: Yes, yes, because it's a surgical procedure so we wouldn't really do that unless we needed to.

KR: What else was new that you learned in medical treatment?

EM: I don't know if it was new, because a lot of my [experience], what I had done before, was either emergency room or had to do surgical kind of things, but we learned a lot about diseases that might be over there and we might have to treat, malaria and all the other little strange things that happened. We learned about the kind of injuries that we would be taking care of, and those don't really come home until you see them and you think, "What a waste."

KR: What else were you learning about the war specific in Vietnam?

EM: What they did is what they did with everybody; they started to depersonalize the enemy. They were talking about how wonderful Agent Orange was because they could get rid of the canopy so you could see the people down below, which, to me, even then, I thought was really bizarre, "How harmful is that?" They prepared us for things, but a lot of those gals were not going to Vietnam because at that time all of the nurses over there had volunteered. [Editor's Note: The chemical defoliant Agent Orange, which the United States government used in

Vietnam to clear jungles, causes a number of serious health problems in humans, including cancer.]

It was kind of difficult when I came home too because I had six months left. I went to Madigan General Hospital. I didn't even know how nuts I was, but nobody there had served over there, so you couldn't talk about anything. You just had to pretend, "Oh, of course, this is a regular, normal, intensive care unit at Madigan General Hospital." Yet I would get so angry inside at some of the things that we had to take care of because they were self-inflicted through alcohol or whatever it might be, and you thought, "What are we wasting our time on these guys for? There are so many people over in Vietnam that are getting hurt for nothing." [Editor's Note: Madigan Army Medical Center is located on Joint Base Lewis-McChord in Washington State.]

KR: When you enlisted, how long was your enlistment for?

EM: Two years.

KR: Okay, I see. Tell me more about your cadre at Fort Sam Houston. You said many of them were not destined for Vietnam.

EM: Right.

KR: What were they being trained for?

EM: Just being Army nurses. You could go all over the world or you could go in the United States or you could put in a request and they'd send you where they want you as opposed to where you want to go. [laughter]

I formed an attachment with a gal, Diane, and we were both going to Vietnam and we were both assigned to Fort Ord [near Monterey Bay, California], which is out on the west coast, after basic training because then it would be easy to send us from to San Francisco over to Vietnam. We were both there for three months, and I worked in a surgical ward, orthopedic, where guys were missing limbs, a lot of wounds that took a long time to heal.

KR: They were coming back from Vietnam.

EM: Yes, yes.

KR: Okay. How long was basic training?

EM: Eight weeks.

KR: What else sticks out in your mind about the military training at basic training?

EM: Well, they said we couldn't carry a weapon, but if we wanted to qualify on the M-16 we could. Well, coming from Minnesota, a lot of people hunt there, my Dad and my brothers hunt, and so I wasn't afraid of guns and I also thought if all my patients are flat on their back, I'd

better know how to hold a weapon in case the enemy comes through the door. I did qualify on the M-16. That was too bad, that they didn't let us [carry weapons], although we really didn't need to carry weapons at that time. Now, I think they do, but we didn't need to.

The only thing I can say about the service is it's bizarre. It truly is bizarre, especially if you're used to a norm, a norm that seems healthy and happy, and here is a group of people that love war. I can remember going down to visit my brother before I went over to Vietnam. He was still at Camp Pendleton going to a specialty school. I went in, and I said, "I'm looking for PFC McCoy." They said, "Well, go over there and ask the gunnery sergeant." I didn't know what a gunnery sergeant was, so I said, "Okay." I went into the next building and I said, "I'm looking for Gunnery Sergeant So-and-So." This guy turns around and he has one glass eye with the American flag on it, and I thought, "Okay, I guess this guy's dedicated." [laughter] Tom said, "Oh, yes, he has another one with a Marine Corps emblem." [laughter] Tom came, and he said, "I love walking around with you, Edie," because everybody had to salute. Right, right, he was with an officer, because they had, first of all, so few female officers in the Marines, if any, but, secondly, they have no nurses, so they wouldn't have any officers.

I remember talking to this one guy. He was a captain in the Marine Corps, and he was talking about how he was really, in a way, glad this war was happening because it's the only time you really get promoted. I thought, "Oh, my God." [laughter] It's not like corporate life, although maybe it is, for all I know. It really is bizarre.

Somebody said to me, "What was being in Vietnam like?" I said, "Have you ever seen the movie *Apocalypse Now*?" I said, "It's not what they did there but the feeling the movie gave off was so bizarre and so twisted." That's exactly what it was like, the feeling of that movie. [Editor's Note: *Apocalypse Now* is a 1979 film directed by Francis Ford Coppola about the Vietnam War.]

KR: I wanted to ask you about basic training, the daily life, the hours.

EM: Well, there was another thing. I write to my brother, and I said, "You know you talked about basic training. I don't know what you're talking about." The maid comes in every day and makes the bed, which they did for us because we were nurses. Maybe they did this for all the officers; I don't know. It was so totally different than what [my brother said it was like]. It wasn't really basic training. We had fatigues and we crawled under wires maybe for a day, but it wasn't the physical fitness that you need to do in regular basic training. We had classroom time, and then we did these like, marching, I don't know, [laughter] drill, like drill team. I thought, "Okay, sounds good." [laughter] Just getting ready, we got our uniforms together. It was kind of like nothing, but you got to know a lot of the people. A lot of the gals were really nice.

KR: You talked about the friendship you made with Diane. What were some of the other friendships that you made?

EM: There, that was about the only one. There were others that I made along the way, but because Diane was going when I was going and because we both went to Fort Ord, [we became friends]. Actually, we both met our husbands there.

KR: At Fort Ord?

EM: Yes, at Fort Ord. She went to, I don't even know where she was [in Vietnam], but she worked emergency room and she told me later that she had been doing that for about seven months. She was the IV [intravenous] artist. It didn't matter what kind of shape the guy was in, she could get an IV in. All of a sudden, after about seven months, she said, "I couldn't get an IV in. I couldn't. It just didn't work." So, her head nurse moved her to a different area. She said, "I think you've had it with this." She just had burnout. She couldn't [do it]. I can see how that would have happened.

It kind of happened for me in the intensive care unit, because I did intensive care recovery in [the Third Field Hospital in] Saigon for six months and then went to [the 71st Evacuation Hospital at] Pleiku and went to intensive care recovery, but there they had head injuries, which we didn't have in Saigon. Head injuries for me were the toughest thing to deal with, even in nursing school. It was really a depressing kind of thing, and it was depressing there, too. After about a month and a half, I just went to the head nurse, and I said, "I can't do this anymore." She said, "I understand." So, they moved me to what they called the intensive care kind of area for medical, for malaria or whatever kind of thing would come in. So, I did that for the rest of the time that I was there. [Editor's Note: From July 1968 until January 1969, Edie Meeks served as an Army nurse at the Third Field Hospital in Saigon. From January 1969 to July 1969, she served at the 71st Evacuation Hospital in Pleiku in the Central Highlands.]

KR: The head injuries we would now call traumatic brain injuries.

EM: Actually, traumatic brain is more when the brain is juggled inside. These were more actual hit in the head with something or other and had to go into surgery. We didn't have a neurosurgeon in Saigon, but they did in Pleiku. I think it's because they're so far from the [coast], we would just ship them right out to Japan, stabilize them and ship them out to Japan. Pleiku is so far away from the coast that they had to have somebody there to see if they could help them.

KR: I have a few more questions about basic training. Who was training you? Were they women? Were they men, regular Army?

EM: Oh, they were regular Army, yes. If the women, I can't even remember, I guess it just was like a fog to me. There were some nurses there because Fort Sam Houston is a big nursing [center and has] big hospitals and things like that. I guess I never even thought about whether they were male or female.

KR: Then, after basic training, were you commissioned?

EM: We were commissioned when we first swore in, yes, so I went in as a second lieutenant. Then, when I was in Saigon, because they gave you time served if you had worked before, and so six months after I joined the Army, I was in Saigon and they made me a first lieutenant.

KR: After basic, you went to Fort Ord. You went there three months. Tell me a little bit about Fort Ord and what you were doing.

EM: Fort Ord was a huge basic training area. They had housing for us, and I worked in the ward, the orthopedic ward, with these guys coming back [from Vietnam]. The thing that was hard was that a lot of them had wounds that just wouldn't clean up. The infections were amazing.

The thing that was good about it and one of the things I thought of with this war--because I went with some friends of mine with the First Cav Division and they went down to Walter Reed [Medical Center] to see guys who were from the First Cavalry who had been injured in the Iraq [and] Afghanistan Wars--and they're all in single rooms. Now, back then, I think because there were so many of them, there was a ward filled with these guys, but they all encouraged each other. They all poked at each other, and the camaraderie was really what kept some of them going. Here, they're all in just single rooms all alone, either that or with a mother who's crying all the time. I thought, "Oh, God, I'd want to leave just for the isolationism."

KR: You said you met your husband at Fort Ord.

EM: Yes.

KR: How did that happen?

EM: Well, it was interesting because I went to the officer's area where you can go for a drink. I can't even remember the terminology.

KR: The officer's club.

EM: Yes, yes. There, I met this guy, his name was Andy, a very nice guy. We chatted and this and that. I said, "I'm going to Fort Ord." "Oh, I just came from there." He was doing a different study for something or the other. He said, "I've got some friends there. You should really look them up." So, he called my husband, and he said, "I just met a girl that's perfect for you." So, Bill said, "Oh, well, okay." So, he and Diane's future husband Denny met us at the bus that arrived at Fort Ord. I go, "Well, this is kind of strange." [laughter] At first, I was really put off. I thought, "That's not what I'm here for." He was persistent, oh, my God, yes.

KR: What was he doing?

EM: He was actually an MSC [Medical Services Corps], and they help in hospitals with all of the management and stuff. He went to Vietnam the same time I did. He was a month ahead of me. He and this other guy Bob Bander, they were in charge of all of the computerizing of the supplies that came in and out for hospitals. That's when these computers were big. The two of them, that's what they did in Saigon.

KR: Bill was your husband.

EM: Yes.

KR: You and Bill were dating when you both were in Vietnam.

EM: No. When I arrived in Vietnam, he was there, and he had asked the chief nurse to put me in Saigon, which I was a little put off with, [laughter] but I'm glad he did because it was an amazing experience. I was there maybe two weeks, and we had gone out a couple of times--maybe a month, no, it wasn't that long, but, anyway--finally, I said to him, "I can't date you anymore." He said, "Why?" I said, "It's too schizophrenic." We work twelve hours a day, six days a week. I was working with these guys that came in blown to pieces, and then you're supposed to get dressed up and go out--and Saigon still had four-star restaurants from the French--and sit in a four-star restaurant and eat this food and have nice, little conversations. I can't do it. It's just too schizophrenic for me, because for twelve hours you're dealing with this and he wasn't. So, he didn't know what I was talking about. I said, "I just can't see you anymore." You really were focused on the team that you worked with.

For instance, when I arrived in Saigon, I had a roommate, Judy [Harrington]. Judy and I received our promotions about the same time. When you receive a promotion, you give a party. Nobody gives it for you; you give the party. So, Judy and I decided to give a joint party, and we invited everybody. We invited our corpsmen. We invited the doctors. We invited everybody. We all had an amazing time.

Well, the next day, we're called into the commander's office, "You're not supposed to fraternize with the non-commissioned, the PFCs." I thought, "How on earth can you do that?" You work with these guys; you depend on them. You can't say, "No, you can't come to my party," or, "I don't want you." We were really glad that we just did it and didn't tell anybody and then got it afterwards. He wasn't really upset, but I supposed he felt he had to bring us in. Otherwise, people would talk. There's no way we could've done that. These guys were our lifeline. Our sergeant could find us stuff. If we'd say, "You know I really need ..." then he'd disappear and he'd come back with it and he'd say, "Don't ask." [laughter] We said, "We won't. We just need it." [Editor's Note: PFC is the rank of private first class.]

KR: Going back to Fort Ord, you were there with your friend Diane. What is your friend's full name?

EM: Oh, God. I think her last name started with a "P." I'd have to look that up.

KR: Sure, we can add it to the record later.

EM: Yes.

KR: Yes.

EM: She married an Italian guy. She was Italian. She married a very Italian guy, the guy that was also standing at the buses as we arrived.

KR: Denny.

EM: Yes, Denny, and they had two boys.

KR: Did she go on to Vietnam?

EM: Yes, yes.

KR: Did Denny go on to Vietnam as well?

EM: I think he did, but I don't know anything about his [experiences].

KR: Let us take a quick break.

EM: Okay.

[RECORDING PAUSED]

KR: We are back on the record. To go back to your time nursing in British Columbia when you were on the mission, what was it like delivering a baby?

EM: In the first place, you're so nervous. You're just hoping that nothing will go wrong because if something goes wrong, I don't know all of the ways of getting out of it because I'm not a midwife. When the baby is born--and I think this is true of every time a baby is born whether I delivered it or not, it is such a miracle. In the first place, everybody just breathes a sigh of relief, but it is such a miracle. It never ceases to amaze. It just is a miracle. It truly is, yes. When you're working, working, and then, all of a sudden, the head pops out and when you hear that cry.

KR: It really strikes me that you were very young and doing very real medical care.

EM: Right. Well, we thought we were supposed to do it. [laughter] I look back now, and I think, "I must have been out of my mind." I think, too, with the Army, we did the best we could and I saw some great nursing and I saw some great surgeons. I can remember when the Iraq War started, and my son happened to be home for some reason. This was a little after it had started. I said to him, "It's too bad that they don't allow women my age to be Army nurses. I'd make a much better Army nurse today than I [was]. I have so much more skill than I had then." He stopped and he turned to me, and he said, "Mom, and whose orders would you follow?" [laughter] I said, "Oh, you're right." Because if I didn't think it was right, I'd tell them off and then I'd be in the brig. [laughter] So, that's why they take them young.

KR: When you were at Fort Ord, what was the process like learning that you were going to be sent to Vietnam?

EM: Well, I knew I was going. I think everything was just so different that you were processing all the time. You couldn't quite figure out what was [going on]. Nothing was a norm. So, I

don't think I remember too much of that other than getting on the plane. I was in my summer uniform, which at that time was a skirt. We all wore skirts.

KR: White?

EM: No, it's a green and white striped, lightweight. I came back in my fatigues. I remember getting on the plane, I think there were only two females on that plane, so I didn't have too many people to talk to. I didn't feel too chatty anyway, but it took us a long time to get there. We landed in Alaska to refuel, and then the thing I do remember is we kept heading into the sunrise and so we got three breakfasts. [laughter] I thought, "They didn't plan this too well. We just had bacon and eggs." It was crazy. I feel so sorry for those guys.

KR: So, you stopped in Alaska.

EM: Yes, just for refueling.

KR: And then straight to Vietnam.

EM: Yes.

KR: Where did you first land in Vietnam?

EM: I think we flew into Tan Son Nhut Airbase, if I remember rightly. Yes, we did because it was Saigon. I can remember getting off the plane and thinking to myself, "I don't think I've ever felt such a negative feeling from land before." It was like it was just in such pain. It had been at war for a long time. They hardly gave us the history of Vietnam. We were there about the French and everything. It was hot. It wasn't the monsoon season yet.

KR: What was your first day like?

EM: Well, that was when you process in. You go to the chief nurse, and you find out where you're going to be and you go to the hospital or wherever you're going to go. I didn't have to go anywhere, because I was in Saigon anyway.

KR: Did you go by truck from Tan Son Nhut to the Third Field Hospital?

EM: Yes.

KR: Describe what your duties were at the Third Field Hospital.

EM: I was in the intensive care recovery room. The nurses' station was in the middle. On one half was the recovery room, where they would come in from having had surgery, and once we stabilized them enough, we would move them over to the intensive care unit or we would move them out to a ward if they were stabilized enough. So, that's really what our responsibility [was]. Usually, in the evenings, which was seven to seven, there were two RNs and then corpsmen that would help, and, during the day, there were more because there was more stuff

that you needed to do, like bathe them and all that kind of stuff. You were always [ready]. You never knew what was going to come in when.

That was tough, because it was so useless. The average age of the kid that we took care of was I would say between eighteen and twenty-two, and those were the ages of my brothers. Actually, when I first started working in the intensive care unit, every kid I'd look at, he'd be my brother. I thought, "What a waste," because I knew my brothers were funny and smart. What a waste. We would stabilize them, and then we'd send them either to intensive care, where we'd keep them probably not too long, until they were well enough to go to a ward, and then they'd be shipped to Japan usually.

That was a tough time for me, because I got there in July, and by October, I remember somebody saying to me, "What do you think should be done?" I said, "You know our country would save a lot of money if we just lined these guys up and shot them over in the United States," and it would do as much good. I think too, because I believe Midwesterners have a sense of justice and fairness, that it wasn't fair. These guys, a lot of them were drafted. They say now, "Well, not all those people were drafted." Well, a lot of them were drafted but joined a different service in order not to stay in the Army for however many years, so that they were forced to do this. I can remember one kid, I think he had been in country a week or something. They were walking through a pineapple grove, and they had all these landmines. One just blew up, and he came to us. I thought, "He had been here a week. He hasn't even seen the enemy." Yes, there were so many.

I think what I wished was that the fair thing would be that all of these men who were putting these guys in harm's way should be there first. I remember when I came back from Vietnam, got married and moved to New York, somebody said to me, "How do you feel about the war? What do you think about going to Canada?" I said, "Let me put it this way. I will allow my kids to go when I see the children of all of the senators and the congressmen and the president go first. Then, I will know it's important enough for my kid to go, but not until," because all of these people were getting off. I mean, look at Trump. A bone spur? Hello. And Cheney, too. Here are all these guys that want to put men to war, and they've never been there. I don't think you should be able to vote on war unless you've been there. [Editor's Note: President Donald Trump and former Vice President Dick Cheney both received multiple draft deferments during the Vietnam War. In 1968, Trump was given a medical deferment, which he says was due to bone spurs in his feet.]

KR: Yes, President Lyndon Johnson was in the Navy, but he was in California during World War II.

EM: Yes, that was too bad.

KR: The wounded soldiers that you were treating, would you know where they were coming from?

EM: The area in [Vietnam]?

KR: Yes.

EM: No.

KR: Would you personally look at the identification of the soldier that you were treating?

EM: What do you mean?

KR: Would you look to see what their names were and where they are from?

EM: Oh, yes, we would know their names and their rank and that kind of thing. We'd ask them, "Where are you from?" The one soldier that really kept niggling at me, until I finally went and got help a while ago, was this one kid, he was from Kansas. He had a terrible abdominal wound, and it wasn't healing. Back then, we didn't have that many antibiotics. I mean, we had penicillin and tetracycline, but that was about it. Now, they have so many more antibiotics that they can use. He got a letter from home, and he asked me to read it to him. It was from his mom, and they lived on a farm. She was telling about how his dad had just come in from hunting in the corn field with the family dog. We used to go down to my Uncle Albert's farm and go pheasant hunting in the fall, so I could just picture it. I still get [choked up by this]. At the very end, she said, "And we're so proud of you, son." Three days later, he was dead, and it was like you couldn't tell the parents. Here is this couple just doing their farming, and they had to send their son off.

Because you didn't have time to deal with anything, you really just shut down, and I didn't realize how much I had shut down until years later when I finally went frail, but you had to. You had to keep going.

The instances of taking your breath away, I remember this colonel came by, and he was handing out Purple Hearts, pinning them on the guys. We had this one fellow there, and he was missing two legs and an arm. We were stabilizing him, so we could send him to Japan. He had his eyes covered; we weren't sure if he was going to be blind. He had a trach. The colonel pinned the Purple Heart on his hospital gown. It took my breath [away]. I thought, "Is that an even trade?" It was just so nothing for what he had given. I have to get a Kleenex.

KR: Sure, yes, let me pause.

[RECORDING PAUSED]

KR: We are back on. What were your living quarters in Saigon?

EM: We lived in, I think, it was an old school or an old apartment building or something. We lived on the third floor, and I had a roommate. My roommate was Judy, the gal that [received her promotion at the same time I did]. She had come from Chicago, and we got along great. She also worked in the intensive care unit. I'm so glad that I had someone who worked where I did, because it would have been hard to have somebody who worked on a ward where there were

recovering malaria patients or something, and if they asked you, “What did you do today?” whereas Judy knew what I did, so we didn’t talk about it at all.

KR: Where would you get your meals?

EM: I can’t even remember; I can’t even remember that. They must have had a cafeteria, someplace where they fed us.

KR: I am wondering what stands out in your memory with the hospital staff, the doctors, the other nurses and the corpsmen.

EM: One thing about the staff in an intensive care unit like that where you have to work quickly, for one thing, I think they put really bright corpsmen there, because these guys were sharp as a tack. In fact, we had one that came in that wasn’t so sharp, and we finally just said, “You’ve got to get rid of him. He’s going to be more harm than good.” So they did. They listened to us.

We had a major who was our head nurse, and I don’t think he had ever been head nurse in an intensive care unit before. I don’t know if he ever worked in one because they would do that in the army. But the thing that I knew was he was really smart. He was very nice but he was very smart in that he let the nurses do what they knew how to do and he didn’t try to micromanage them whereas some of the officers did because these gals knew what to do. Whether they had been there long enough or they were just learning, they were good at what they did.

The corpsmen, you really worked as a team. I can remember one night I was on from seven to seven and I was waiting for the other RN to come and she didn’t come and she didn’t come. Finally, I called and I said, “Where is she?” Oh, she, I don’t know if she missed her flight or if the flight was cancelled or whatever, from R&R. So, I was the only one there. Well, when we started out it was calm, I think we maybe had two in recovery room side and maybe five in the intensive care side. Then, about eleven o’clock, we heard that we were going to be getting in quite a few casualties. Because of the way it was, some of them we were supposed to stabilize before they went to surgery, some of them, after they came back. I had three corpsmen. One of them, I said, “You’re in charge of the intensive care unit. You keep an eye on those guys. If they need something, you come and get me and that will be fine.” I trusted them enough, I said, “If that IV bottle needs changing, let me know, I’ll point it out and you can do whatever. What was interesting was the corpsmen would just stop by. They would sometimes just to say hello. They had worked all day. They’d just stop by, and they’d just start working. By the end of the evening, when we had, I think we had six in the recovery room, one of them died, the captain died. That was so sad. His guys loved him. He must have been a really good leader. Anyway, there must have been every corpsman from the intensive care unit in there working, and it wasn’t their shift. They just stopped by, and then they pitched in. Then, they had to go home, get some rest, and come back at seven.

That was really your whole life; that’s all you did. [laughter] You worked, and you slept, practically. Some of the gals dated doctors. It was really like a year out of time. It was so bizarre. It was so different than anything that would ever happen to you in the United States that it was like you were in a box someplace, a year out of time, so that anything went. Not only that,

but it was a lot of the guys, in fact, I think all of the doctors were married, but it didn't matter because you really just needed solace or something. It was really strange. It got stranger at the 71st Evac hospital.

KR: Before we get to the 71st Hospital in Pleiku, how were the wounded brought in to Saigon?

EM: A lot of them, they could've been brought in by truck if they were flown into Tan Son Nhut, or they came in by helicopter. We had a pad there.

KR: They would be medevacked by helicopter.

EM: Yes.

KR: There would be a pad, and they would be brought right into the Third Field Hospital.

EM: Right, right. They'd be right at the Third Field Hospital, yes. We had a pad in the area near the ER. It was interesting because I remember talking with a friend from the First Cav, when we were talking about the Huey, because I had been asked to speak at the dedication of the Huey helicopter at the Smithsonian about what the nurses felt about it. I said to him, "You know, for the nurses, you heard that helicopter and you thought, 'Oh, no. Just more bad news.'" He said, "You know, for us, it was, 'Thank God.'" So, the whole perception was like black and white, as to what [the sound of a helicopter meant to you]. Really, that's what kind of what the experience of the nurse and the soldier [were like]. We were kind of the negative to the photo, because if they had a victory, we never saw it. We just saw the wounded that came. We didn't know whether they won or lost. We just kept getting more and more. [Editor's Note: The First Cav refers to the First Cavalry Division, which was an air assault division during the Vietnam War. The Bell UH-1 Iroquois helicopter, or "Huey," was in production from 1956 to 1987.]

It was so different. People talk about wanting to go back. For one thing, what they're doing with these young people now, sending them back three and four times, to me, that's cruel and unusual punishment. Oh, my God, these people are never going to be normal again. How are they going to deal with what they've got going on? I can't even remember what I was going to talk about.

It was so bizarre that you came back and you wished you could experience some of [insert]. For instance, the teamwork, you're never going to experience that again, because here they don't even encourage it. They don't teach it. In nursing school, that was one of the things that we were taught was to work as a team. Today, I talk about it a lot at work because some of these young nurses have never heard of the idea, that, oh, yes, if you're finished, you go and see if somebody else needs help because that's what a team does. The teamwork was amazing.

You could do nursing there that you could never do [in civilian life]. One time, I looked out from the nurse's station, saw this guy, I thought, "Boy, he looks really gray." So, I did a hematocrit, and it was really low. So, I hung blood, because the doctor was in surgery and he couldn't give the order, but I knew he'd cover me, which he did. You could never do that here, but you did what you needed to do. You worked in a whole atmosphere of trust, really. The

soldiers were trusting you. We were trusting each other that we would do the very best because we were all there for one reason and one reason only. [Editor's Note: A hematocrit is used to separate a sample of blood into its components to determine the ratio of the volume of red blood cells to the total volume of blood.]

There were two surgeons at Third Field Hospital. One was a thoracic surgeon, one was a urological surgeon, but they worked together a lot and they were friends. They had been drafted right before they had turned thirty-six, which was the cutoff for doctors. Now, some of the doctors were bitter about it, but they just decided they were going to be the best job they possibly could and they did. I thought, "That's really great medicine," when even though you'd say, "I'm torn out of my practice," but you're here now and these guys need you. I saw some doctors--there weren't many; I would say maybe two that I know of--that weren't giving their all, shall we say.

KR: What would it be like when a new nurse came in?

EM: To me, that was what was really tough. You were inserted, so it wasn't like you were a unit that came in and then left together. That was another thing that was really difficult with your emotional shutdown, because you could become friends with these people and then in six months they'd leave and you were still there. Then, what do you do? At least they learned not to do that with this war because that was really tough. It was really tough on the guys out in the field, too, because they would have somebody inserted into their group, if one of them got shot. They didn't know if they could trust this guy. They didn't know what his skills were, but they just wanted a number. They wanted to make sure that six were there, whatever.

I think one of the things that was so sad was that you saw that not necessarily the smartest people rise to the top, and, in doing so, you're at their mercy. You're at the mercy of some of these clunks, and you think, "What kind of decision is that? It doesn't even make sense." It was tough.

Also, at this point--and this was kind of a hard thing to talk about--Diane and I had to speak at the University of [Massachusetts], UMASS. I think it was nurse's week or something, and so they wanted us to come. So we did. We were having dinner the night before, and Diane was talking about the sexual abuse that happened to her. All of a sudden, this realization came to me that I had been raped in Saigon. Now, I was so surprised that I didn't remember that, and I spoke to my psychiatrist about it. She said, "That's not unusual." She said, "In the first place, you were so busy and you were suppressing so much stuff that you probably figured in the first place, who are you going to go to? There is no one that would back you up. The females that were regular Army would have never have backed you up, and if you have nobody to report to, then there's nothing that's going to be done." It was an Air Force guy, and the Air Force, the pilots really thought they were something else again. Now, it could have been my generation, but I think they still think that, that they're something else again and that they could do anything they want and that no means yes. It was really not a positive thing, and the thing that was so strange was he kept calling, like I would want to go out with him again. I don't think so. Then, after that, I just didn't date at all. I actually went out with him, because a friend of mine said, "Oh, come on, you'll have a good time." Right, right, yes. He was a major. Luckily, I was going to

the VA at the time and had a woman who was my psychiatrist, so that helped a lot. I couldn't believe that I couldn't remember that, but I felt much better with her saying, "Oh, I can see how that could happen."

KR: I am going to ask you a question about something you said before. You talked about how you needed a certain supply, you would ask a corpsman who would just get it.

EM: Right.

KR: Were supply shortages a common thing? Were there some things that were always running out?

EM: No, I don't think so. Usually, it would be a machine of some kind that we needed, like suction. What was nice was seeing that whatever we needed actually they had plenty of there. Blood, it didn't matter how many units you needed because nobody thought of cost. Now, today, it's like crazy how they're pinching pennies and everything in hospitals, but there they really had anything that they could. We had the first, if I can remember this rightly, the first ventilator ever used in a theater of war. These were huge boxes like this, and they [making a breathing in and out sound that is emitted by a ventilator].

KR: What type of wounds would that be used on?

EM: That would be if they had, if they really so seriously ill that they couldn't breathe or you had to breathe for them. It could be brain injury. We didn't use it often, but when we did and then it would sigh, it would go [making a breathing out sound]. I always remember thinking, "I wonder if that guy really wanted to sigh then." [laughter]

KR: What other new technology was there?

EM: I don't think there was a lot. Look at the technology that they have now, and actually I saw a program on Channel Thirteen. It was about civilization, and they were saying that with wars, because I kept on saying, "When are they going to stop the wars?" and what this program said, "Wars are what makes civilization," that usually the biggest increases in medical knowledge are done during wars, which is true because they have to figure out how to take care of these guys or what disease it is. We had much better facilities than World War II and probably Korea, but looking back now, I think we had nothing. [laughter]

Also, another thing that was difficult was we got patients that in World War II, you never would have never seen. They would've died. They could fly them in. I can remember thinking to myself with some of these guys, "Are we doing them a favor?" It was really difficult to think that you were going to send this poor fellow back, but you did the best you could and just hoped that whatever happened was a positive.

Actually, it was interesting, because one time--I was on the Board of Directors of the Vietnam Women's Memorial and we had to be down there every Memorial Day and Veterans Day--and one time there was this guy that came and he had a patch over an eye. We were chatting, and he

said, "Where were you stationed?" I said, "Third Field Hospital." He said, "I went through there." I said, "You're kidding." He said, "Yes, with my injury ..." he had a head injury, so we wouldn't have seen him, but he wouldn't have been stabilized and sent off to Japan. I said, "Thank you for coming, because you're one of those people that I would've wondered about." He was married. He had three daughters. He had a business of his own. I thought, "Well, that was worth it." It makes you see that you can't be the judge of who this is good for and who it isn't with the care that you're giving. You just give it and hope.

KR: What do you remember about Saigon the city?

EM: It was busy. I remember that when I first got there, one of the first things they told you was don't kick any of the cans because they could have explosives in them and to be always careful, that Saigon was also a war zone. You didn't know who your friends were and who they weren't. I came in one morning and a ward clerk wasn't there. I said, "Where is he?" "Well, he was killed last night." "What happened?" "Well, it turned out he was VC [Vietcong]." So, you never knew. You didn't know at all who your friends were and who they weren't.

One morning, I came in at seven. At about eight o'clock, we got the news that we were going to be getting in five to nine casualties. These soldiers had been standing on the corner waiting for a bus and somebody rode by on a little motorcycle, threw an explosive, and so we were getting, what? You didn't know. It wasn't like there was a line of demarcation like there was in World War II or even Korea. They were everywhere, and you just never knew. You just had to be careful.

KR: How secure was the Third Field Hospital and your living quarters?

EM: They were pretty secure, yes, because it had been after Tet and I think that after that, they really tightened up on everything. [Editor's Note: Named for the Lunar New Year, the Tet Offensive began on January 30, 1968, when North Vietnamese forces and Vietcong launched a surprise offensive at points throughout South Vietnam, including Saigon.]

KR: Yes, because Saigon had been attacked during Tet.

EM: The hospital had been attacked during Tet, too.

KR: Did you ever go out with your girlfriends in Saigon, go out to eat, go out for a drink?

EM: No. If we drank, we went to the officer's club, because it was safe. For me, I guess I didn't want to go out and, see, when you're partying with your friends, you're rejoicing, you're having fun, and I never felt like I could do that.

KR: Was it not safe for a woman, or was it not safe for anyone in 1968?

EM: I think it was not safe for anyone. The guys always carried weapons with them. We weren't allowed to. Therefore, they would say, "Always take somebody with you." Judy and I wanted to buy a refrigerator, one of those little small refrigerators, so we were going to go down

to the PX [post exchange], which was in a different part of town, and we had to get there before the Koreans did because they would go in and buy all this stuff up and send it home. [laughter] So, we got there really early, but it was big project just to get down there and get it back.

KR: How did you get there?

EM: I think a jeep.

KR: Did you get someone to drive you?

EM: Yes.

KR: I wanted to ask about contact with Vietnamese civilians. You talked about this person who was killed who had been VC. What was your daily or weekly contact like with Vietnamese civilians?

EM: The only Vietnamese civilian that I would come in contact with would be my mama-san. Everybody had a mama-san that would take care of their room and do their wash for them, the whole thing. Then, you paid her, and that was true at the 71st Evac, too.

KR: What was your relationship like with your mama-san?

EM: There wasn't really one.

KR: She did not speak English.

EM: Well, if I worked seven to seven, I wouldn't see her. If I was not working, I'd be asleep. [laughter] It was kind of difficult to have a relationship.

KR: Were Vietcong and North Vietnamese Army soldiers being brought into the Third Field Hospital?

EM: Only if they wanted to interrogate them. Otherwise, they didn't deal with them at all.

KR: What were sanitary conditions like in Saigon?

EM: Well, at the hospital, they were good. In Saigon, I don't really know. When we were out, it didn't look like a clean city, but it wasn't the worst city I've ever seen. We went to one of the local hospitals, these guys that I was telling you about, they, on their days off, they would go and do surgery at the local hospitals to help the local people. A couple of times, Judy and I went to help. Those conditions weren't too good, but they were better than they were in Pleiku.

In Pleiku, I went with another gal just to see what the hospital was like, and it was built like in a circle. The nurses went home at three o'clock, and so if you needed IV fluid, you had to get it all before then. Families came to do the care, and when they came, they brought their chickens and their pigs because if they left them home and they came back, they wouldn't be there. So,

everything moved into, to take care of this person. Then, in the center of the hospital was the burn pit for all of the garbage and the bandages and everything. So, it was different.

KR: In Saigon, at the hospital that the doctors would go to and you and Judy went to visit, what was it like there? Who were the patients?

EM: The Vietnamese, it was just the Vietnamese.

KR: What were they suffering from?

EM: Well, you could tell, a lot of them had goiters. They had eye problems, a lot of eye problems. They mostly did the goiter surgery, or if they needed appendix or something like that. Nobody had what I would call preventative care. [Editor's Note: A goiter is a growth in the thyroid gland.]

KR: When did you find out that you were going to be sent to Pleiku?

EM: Actually, I asked to be moved.

KR: Okay, tell me about that.

EM: Well, I think it probably had to do with the rape, but also that some of the people that were there were going to be leaving and I didn't want to be the only one left there. I decided that I was going to move to Pleiku, which I did. At the Third Field, you wore a white uniform because it was supposed to be the showcase for the congressmen or whoever was coming through, which to me was like so bizarre. I remember [laughter] somebody was coming through, and so our head nurse said, "Oh, let's wax the floors." I said, "Wait a second, hello, we've got enough problem getting these guys up. You don't want them to fall on a waxed floor. Let's just clean the floor." The Army is crazy, I think, they really are. Anyway, so I went to Pleiku.

KR: How did you get there?

EM: By plane.

KR: Oh, by plane.

EM: And by helicopter.

KR: Where did you fly from?

EM: I can't even remember. I flew out of Tan Son Nhut. I can't remember if we went all the way by helicopter. Pleiku is right next to Laos, and it's in the Central Highlands. Anyway, I went there, and that was where I met, who came the same day I did, Diane Evans, who is the founder of the Women's Memorial. She was from Minnesota. Immediately, we were fast friends.

KR: What was that like? You are at a new place. It is your first day. You are meeting somebody from Minnesota.

EM: Right, yes. Well, it was actually comforting I think to both of us because she had been six months someplace else. I think she worked in a burn unit someplace. We both arrived, and, luckily enough, we were in the same hooch. I signed up to work in the intensive care unit, and she worked in a ward where they got not only--I think her ward had soldiers but she also got a lot of children, because there was a pediatrician that worked on her ward. Thank heavens we had one.

There, we wore fatigues, and you took your flak jacket and your helmet to work at night because we were rocketed so often. The beds were high off the ground, so that if you were rocketed, you'd climb under your bed, like that would do any good. [laughter] It made us feel better. I remember the mold grew on the wall in my room, and it would cover the whole wall. Then, I'd wash the wall. Finally, I just wrote home and I said, "Could you please just send me a shower curtain?" So, Mom sent it, and I just tacked it up there and figured, "Then, I don't have to look at it.

KR: What was your hooch like? What material was it made out of?

EM: The hooch was a building, but it was sandbagged almost up to the roof because we were rocketed so often. We each had our own room, and then there was a bathroom. Joan Furey was in that hooch. She was the one that was on Ken Burns' [documentary *The Vietnam War*]. They had one woman, I think it was, and that was Joan. She lives out in Long Island if you want to talk to her. [Editor's Note: Joan Furey served as a nurse in the U.S. Army at the 71st Evacuation Hospital in Pleiku. Furey appears in Ken Burns' 2017 documentary *The Vietnam War*.]

KR: Yes, thank you.

EM: Barbie Chiminello, actually, Barbie worked in the emergency room there, and that might be an interesting story for you. She lives in Manhattan now. I met her on her second tour, and it was her second tour because her first tour she had to go back with her brother's body to Boston. Then, she came back again, and she worked in the emergency room also, I think. Yes, she did, and Joan worked in the intensive care unit.

KR: Tell me about your duties.

EM: Well, at first, when I worked in the intensive care unit, they were pretty much the same, except that we did have head injuries and we had more Vietnamese than we had in Saigon. I think I probably just had it with that. Especially, there was this one fellow who had a head injury and he looked like he was getting better and getting better, thank God. Then, one morning, I came in, and he wasn't there. He had spiked a temp [temperature] that they couldn't get down, and he died. I think that was kind of the breaking point for me, so I moved to the ward that had the malaria cases. Usually, it was just malaria, but sometimes it was other things that they had caught.

KR: Like what?

EM: I can't even remember. I just remember taking care of these guys that were so sick and the ones that would spike the temperature because your temp could really go high with malaria and trying to get it down.

KR: How would you treat someone with malaria?

EM: Well, you would try and get their temp down with cold water and that kind of thing, just sponging them down, so that they could [get their temperature down]. I think we had an ice machine if I remember rightly, which helped. I think we did. Those guys didn't feel too well.

KR: Were they shipped to Japan for more treatment?

EM: Some of them were sent right back to their units. It depended on how sick they had been, I think, but I often wondered what happened to them if they kept having recurrences of it because it does come back, and so I was asking some of the guys that I would meet and they said, "Oh, yes." It got farther and farther in between, but you never knew if you were going to have a flare up.

KR: What did you do to prevent yourself from getting malaria?

EM: Well, they gave us pills that we were supposed to take, which I did, especially there.

KR: Atabrine?

EM: Whatever it was. I can't remember. Now, it didn't disagree with me--I didn't feel the best taking it, but it didn't disagree with me--but with some guys it did and that's why they stopped taking it. It was kind of like the flak jackets. They were so heavy that a lot of the guys didn't wear them and then they got hit.

KR: Pleiku was under constant threat of rocket attack. Would you just work right through a rocket attack?

EM: Actually, what you do is, as far as I know, they only happened at night. That's the only ones I can remember, and what you would do is all your patients would get under their beds, and if the patient was so sick they couldn't, then you covered them with a mattress in case some things came falling down. It was interesting because the first time that this happened, when I was working, the patients, the guys, were all saying, "Now, Lieutenant, it'll be all right." They're taking care of me. "Yes, we'll do this." They were all the sweetest things; they didn't want me to worry. [laughter]

KR: Do you become numb to the threat?

EM: Actually, you don't care after a while. I mean, I think I got that way, I maybe had three months to go, and I just didn't care anymore. [I thought], "If I get hit, who cares," because you

were just so numb and you knew that there was nothing you could do and you couldn't even count on the Army of doing anything that would be appropriate.

The Montagnard people were sweet, very nice. [Editor's Note: Montagnards, also known as the Degar, are an indigenous group native to the Central Highlands of Vietnam.]

KR: What was your contact with them?

EM: I loved them because they were short. They were really short people.

KR: Oh, interesting.

EM: Yes, and slight.

KR: How did you have contact with them?

EM: Well, they could be patients, for one thing. They brought their kids in, and, actually, soldiers would bring their kids in too if they got hurt or something because the Montagnards helped our soldiers quite a bit. They were the sweetest people.

KR: What sticks out in your mind about the Montagnards?

EM: What sticks out is that they were just people who were living their lives, and all of a sudden, this war inserted itself into their presence and they were just trying to be as stable as they could. I mean, they weren't the enemy, and they weren't the aggressor. They had crossbows with arrows, and they were little. They were slight people, and you thought, "How sad is that?" They were just living their lives. All of a sudden, these bullies from both sides come in.

KR: You talked about Diane working in the ward with a lot of children. Why were the children being brought into the hospital?

EM: A lot of the soldiers would bring them in if they saw that they were hurt with injuries from the war or something, but even if they were really sick, and I think it's because they worked with the Montagnards. These guys were nice guys. The soldiers were nice guys. They were Americans. That's one of the things that I really saw was, on the plane on the way over, the feeling on that plane was, "We're going to help. We're there to help them." The feeling on the plane on the way back was just so beaten down because they had not been allowed to help because we had rules of war that were given to our soldiers. The VC had no rules. They could do anything they wanted, and so you're fighting two wars, two different wars. You could say, "Oh, you can only go so far." Well, the VC, they said, "Go as far as you want. Just get the job done." I don't even know why we were over there, because they certainly weren't letting them win the war. What's sad is, did you see the Ken Burns' special?

KR: I did, yes.

EM: When you see how Ho Chi Minh approached us first, because he really wanted just a united Vietnam, and how we didn't even listen to him. Well, of course, he's going to turn to somebody else then.

KR: Tell me about sanitary conditions at Pleiku.

EM: They were good. One of the things about the Army is that they do keep a discipline about all of that, so that the whole place was neat and clean and you didn't have to play catch up that way at all. They also had enough supplies. The only thing that they didn't have was the food arrived from the sea and then would work its way up. By the time it got to Pleiku, you had all the green tomatoes. I mean, here they got the lobsters and the steaks, and we got [green tomatoes], so that's really how it kind of worked.

KR: Yes, that is the story of supplies in every war.

EM: Yes.

KR: What was the food like, and where did you eat?

EM: We ate in the mess hall. The food wasn't [great], but what could he [the cook] do. In the first place, these are guys that were told to be the cook, but, secondly, we didn't have the food that they did on the coast.

KR: You talked about the mold in your hooch. How else were you affected by the elements?

EM: Well, it was really hot, [laughter] and then it was really rainy.

KR: You were in Pleiku during the rainy season.

EM: Let me see, the monsoon [season], I was in Saigon for part of it, so I must've been in Pleiku for a part of it, too.

KR: What was that like?

EM: Well, you just did it. You just went. Actually, you were so busy working that it's not like you said, "Oh, it's raining, oh, too bad, our plans [are ruined]." "What plans?" "No plans." Especially in Pleiku, where are you going to go?

It was interesting too because the gal that wrote the book *Home Before Morning*, she was a nurse at Pleiku and she was there [at] the same time Diane and I were there. [laughter] Diane read the book, and she called me up. She said, "Ah, do you remember any of this?" I said, "No." She said, "There must've been two different groups there." I said, "There were." I think one of the groups was the one that had already had it up to here and came from another place, like Diane and I did, and then there was the group that was there the whole year. [Editor's Note: Lynda Van Devanter's memoir *Home Before Morning* recounts her experiences as a nurse at Pleiku from June 1969 to June 1970. The memoir became somewhat controversial after its publication

in 1983 with some Vietnam nurses disputing the recollections and others supporting the memoir's veracity.]

KR: How were your perceptions different than the other group?

EM: Well, for instance, Diane and I didn't party at all. We went to one or two, but by that time I didn't feel like partying at all. There was nothing to party about.

KR: For the record, the book being referenced made allegations of the drug use and alcohol affecting the medical care.

EM: Right.

KR: At Pleiku. Where were those parties taking place?

EM: On base.

KR: In people's hooches?

EM: I'm not even sure where they were, but I think they were in hooches, yes. Yes, they were, yes, now that I'm thinking about it.

KR: Now, beer would have been provided by the Army.

EM: It was?

KR: Yes.

EM: I never had any. [laughter]

KR: The beer did not make it that far up the supply chain.

EM: I guess not. [laughter]

KR: What evidence of drug use did you see at Pleiku?

EM: I didn't, because the ward that I was on, the nurses that I [worked with], they looked okay to me and I was just doing my own business there. To me, it was kind of like I learned quickly in Saigon that I really didn't want to drink because I wanted to be there the next morning without feeling hazy or something. I needed to be alert, so that was mainly why I didn't drink at all.

KR: What stands out in your mind about the relationships you made at Pleiku?

EM: Well, the one with Diane has lasted years and years and years. She's really kind of like my sister, that I know that I can always call on her or trust her with anything. Some of the other gals, not so much. I was still friendly with them, but some of them got a little strange.

Also, I didn't really have anything to do with any of them except Diane for years and years and years, because I was just holding on--it wasn't until I started working on my PTSD [post-traumatic stress disorder] that I felt strong enough to even see people from [the war]. I was on the [Women's Vietnam Memorial Foundation] board early because Diane wanted me to be, because I went down there with her. I was there for the dedication, which was amazing. [Editor's Note: The dedication of the Vietnam Women's War Memorial, a bronze statue sculpted by Glenna Goodacre, took place on November 11, 1993. Located near the Vietnam Veterans Memorial in Washington, D.C., the Vietnam Women's Memorial was a culmination of the efforts of the Vietnam Women's Memorial Project, which became known as the Vietnam Women's Memorial Foundation in 2002. Diane Carlson Evans, RN, who served in the Army Nurses Corps from 1966 to 1972 and in Vietnam from 1968 to 1969, heads the Vietnam Women's Memorial Foundation.]

KR: In 1993.

EM: Yes. That really helped a lot. It was like going to a country where everybody spoke the same language, and you could talk about things you couldn't talk about with anyone else and they understood what you were talking about. It was really amazing. Then, Diane kept coming, and one year--I wasn't there, it was the second of third year after the dedication--some women had come up, but they weren't that nice to her. I said, "Okay, that's not fair. I'll come every Memorial Day and Veterans Day to watch your back. Nobody's going to get away with that, after what you've sacrificed to get this [memorial established]." She did, oh, my God, yes, she had to work uphill the whole time to get that.

KR: I just have a few more questions about your time in the service, and then we can go in depth into the Vietnam Women's Memorial.

EM: Okay.

KR: Did you ever get R&R?

EM: Yes.

KR: What did you do?

EM: Judy and I went to Hong Kong. It was kind of amazing, because it had been maybe the fifth month that I had been there. Now, there was no place to shop. After not shopping for five months, you went there and just felt like throwing your money on the street and saying, "Give me anything. Give me anything." Again, it was bizarre, because you're leaving this whole life of sorrow and desperation and working as hard as you can and then you're supposed to go and shop and have a good time in Hong Kong and then come back. It's kind of like the night before I flew out of country was the night that we landed on the moon. Somebody came out of the officer's quarters--for some reason, I was sitting outside--and said, "Oh, they're landing on the moon. They're going to walk on the moon." I said, "Who cares? My guys are dying over here. Who cares who walks on the moon?" To me, it was nothing, and it still is nothing. If you're

going to walk on the moon, then take care of your own first. For me, it was, nope. [Editor's Note: On July 20, 1969, Neil Armstrong and Buzz Aldrin landed on the moon in NASA's Apollo 11 mission.]

KR: What was your communication like with your family and friends back home?

EM: Well, there were letters, but you could also call them on whatever it was--it wasn't really a phone--and you would have to say, "Over" after every comment that you made, so that they would know that they could proceed. You had to alert them ahead of time--or the Army did--when you were going to be calling because they had scheduled times.

KR: What about letters?

EM: I can remember one of the best ones I got was from my brother Charlie. He played the piano, and I said, "I just want some of your piano music." So, he sent me a tape.

KR: What was Charlie doing during this time?

EM: He was going to college. He was a war protestor. He got arrested for protesting the war.

KR: Where did he go to college?

EM: The University of Minnesota.

KR: What was he doing when he got arrested?

EM: Protesting. I don't even know. I didn't know for years until later when he told me, and somebody said to me, "How did you feel about that?" I said, "Listen, two things. One is I know my brother loved me. He hated the war, but I know he loved me, and I know he loved his brother Tom." I also firmly believe that if nobody had protested that war, we'd still be there. It'd be like Iraq. We'd go on and on and on, losing more and more and more for nothing. I give my credit to the war protestors. They really, really pushed them. It took a while, but they pushed them until they said, "Hey, let's do this. Let's get out of there."

KR: Tell me about your flight home.

EM: The flight home, I was wearing my fatigues. It was totally different than the flight over. There was rejoicing that they were going home, but it was all desperate. The flight over was, you really got the feeling they wanted to help. The flight back, it was like, "Well, we wasted our life there."

KR: Was it a mix of nurses and soldiers?

EM: No, I think there were only three or four females on the plane. Then, when I got home, because the incoming nurses would tell you whatever you do, if you're wearing your fatigues or your uniform, get out of your uniform because you will not be received well in your uniform in

any of the airports. So, I left the plane, went into the ladies' room, took off my fatigues and boots, threw them in the garbage, and I had a dress that I was wearing home and that's what I wore home.

KR: Where did you fly from in Vietnam and to in the United States?

EM: From Tan Son Nhut to San Francisco.

KR: What happened when you got to San Francisco?

EM: You got off the plane and went home.

KR: Did you go back to Minnesota?

EM: Yes.

KR: You served at Madigan Army Medical Center.

EM: After [Vietnam], yes, I had six months left in the Army.

KR: Tell me about your time there.

EM: It was interesting, because I worked intensive care again, shoot myself, but I think I was the only person there that had served in Vietnam. So, you had nobody to talk to, but also they were getting in patients that would be normal for a normal hospital in a normal intensive care unit, like esophageal varices, which is part of if you drink too much and then they burst and then they bleed and you have to put down a whole cold lavage and the whole thing. During the whole time, I thought, "Why are we even doing this for this guy? We should be taking care of ..."
There were so many other guys.

I think another thing--and I didn't really remember this until later, years later--that when I came back, again, it was so useless, but so was what I saw at Madigan General. This was a big [base]. Fort Lewis was a huge basic training [base]. Guys would get meningitis, and they would come to the intensive care unit to be taken care of. While I was there, two of them died. Now, they hadn't even been out of basic training yet, and the parents are having to come. You're sitting there, saying, "This doesn't make sense. You just sent your kid away because the government told you to." Some of these guys were too sick, because they'd go to their sergeant and say, "I'm not feeling well," and they'd say, "Ah, you wimp, stand in line. Keep doing what you're supposed to be doing" and wouldn't listen to the symptoms. A lot of times, we'd really have to be working to bring them back from where they were. That also takes your breath away. Again, these kids were like nineteen, twenty.

KR: What can you tell me about your reintegration process back into civilian life?

EM: Well, I left the service in February, and I got married in March to Bill. We moved to New York City. That's where he had a job. We lived on 81st and First. Again, I had no idea what

was going on with me, but I was kind of like, “Let me just sit in this room. Let me just sit in this apartment.” I didn’t even want to go out. I didn’t want to deal with anything.

Finally, I called up, I think it was Metropolitan [Hospital], I think that’s north, just on the edge of Harlem, and they said, “Well, we would love to have you come. You can be in our intensive care,” not intensive care--it was emergency. The more I thought about it, the more I thought, “Oh, I can’t do that.” So, my husband called New York Hospital and said, “Have you got any outpatient positions?” They said, “Yes, we do as a matter of fact.” So, I worked outpatient there for a year and a half, I think. It was close enough that I could walk to the hospital. It was different because there, again, you’re working civilian [nursing] and you’re not allowed to do anything. You’re almost not allowed to think.

KR: Do you think because of working in outpatient, you stayed with your career as being a nurse?

EM: I think I would’ve anyway. I think that those who quit, although this is a generalization, are probably those who came right out of nursing school, because I knew that there were other ways of nursing other than [being a nurse in war]. Then, we moved to Garrison, and we had Gwyneth and then we had Bill. Then, I started working at the local hospital, which was a forty-six bed hospital, Butterfield Hospital in Cold Spring, it had two ORs [operating rooms], so I worked on the floor for about a year, just two days a week and then went into the OR. The OR was perfect for me, because you still feel like you’re doing, you’re a little on edge because whenever the patient’s asleep and you’re doing surgery, it’s kind of a crisis, but I didn’t have to deal with anybody. I didn’t have to see anybody there all covered up. I didn’t have to deal with their relatives. That was actually perfect for me.

KR: Just to go back, after Vietnam, how did you meet up with Bill again?

EM: Actually, what happened was I moved to Pleiku. He found out where I was, and he started writing to me. No, he called, that’s right, and I was so surprised and then we chatted. Then, he called again and he called [again]. He really saved my sanity up there, because we would talk about everything but. He wasn’t doing medical work, so we’d talk about this, that, and the other thing, and he really saved my sanity. It was interesting because I knew that he was the right guy, but I just couldn’t date there. He was living a life where he’d go to work and he’d do his computer stuff and then he could go out to dinner, but I just couldn’t. Anyway, so when I got back, he came to see me, and then I went down to meet his folks. We just decided to get married. I think that we knew that that was the right thing to do.

KR: What years were your children born?

EM: They were born in ’73 and ’74.

KR: How did your career develop from there?

EM: Oh, let me see, well, Bill must have been maybe--he’s the youngest--fifteen months old when I finally [laughter] decided that I needed to go back to work, because being a nurse was

part of who I am and I love it. So, I started two days a week every other week, but it had to be on weekends. Then, after a while, that got a little old. So, I decided that I would work two or three days a week, and I found somebody who would take the kids, Betty Ann Lyons, what a doll. I could take them over in their pajamas. She'd change them. She'd feed them. Her kids loved it. Her kids went up in the attic, got out all the toys. I remember at Halloween, she said, "Can I take your kids around Cold Spring?" I said, "Sure, why not." [laughter] She had a wonderful time. So, that worked out really nicely, and then they went to nursery school in Cold Spring. She would take them over there and pick them up, so I was lucky to have her.

KR: What was your next step in your nursing career after that?

EM: Actually, I worked there for twenty-five years, and then they closed the hospital because this was the big thing. New York wanted to close all the little hospitals, and Peekskill Hospital bought it and then just closed it down. They said that they were going to keep it open, but we knew that they probably wouldn't, which was too bad because it was a nice, little community hospital, where if you were old and got sick, all your friends could still come and see you because they could walk there. Anyway, they closed it down.

Then, after that what I did was, I got a call from a company called Magellan, and they supplied clinical specialists and support people to companies. There was this up and coming company called Spine Tech that had a cage that they were going to be using, an interbody, for fusions, spinal fusions, but they needed clinical specialists to cover hospitals because they didn't have that many sales reps because they were just starting out. So, I said, "Sure, why not." They flew me out to Minneapolis, and there were a whole bunch of us there, really nice people. We learned how the whole thing worked, and then we were assigned to sales reps. Actually, no, we weren't, at first. We were assigned through Magellan. Magellan would call and say, "I've got this case in New Orleans. Can you do it?" I could do it, because my kids were up and out. Some of the people couldn't because they had kids. I flew to Louisiana and Oklahoma and Illinois, all over, being the information person for this. It was interesting; it was really interesting.

What was interesting was doing that kind of travelling because when you travel and work, you get a real feel of what the area is like, as opposed to being a tourist. For instance, I went to five different cities in Louisiana, all totally different from each other, and you'd think to yourself, "Now, that state truly is a foreign country." [laughter] It really is. In going around to all these different states, what I saw was it is amazing that we are the United States because each state is so different. You could feel when you were passing the Mason-Dixon Line, you know it was the feeling being a woman in the North and being a woman in the South, totally different. Oklahoma is totally different than New York. Norfolk is totally different than D.C., even though they're fairly close together, and it's really amazing that we're still the United States.

KR: I am curious in the 1970s and in the 1980s, when your kids were little and growing up, what would you tell them about your service?

EM: I wouldn't tell them. I didn't tell them a thing. I never talked about it.

KR: You never talked about it.

EM: In fact, when they were going to do the dedication at the Women's Memorial, somebody found out that I had served and put an article in the local newspaper, the *Putnam County News*. I was at the grocery store and a friend of mine was way over there, [across the store], and she said, "Edie, I saw that article about you. I've known you for twenty years. I never knew you were a nurse in Vietnam." Well, I never talked about it, and mainly because I found that people would say, "Oh, you were in Vietnam. What was it like?" It was just too big, so you didn't tell them at all, because you couldn't tell them in a minute. No sound bite for that.

KR: When did you start opening up?

EM: It was before the dedication. Diane had always said, "Oh, we need help." I'd always said, "Oh, Diane, I don't know how you can talk about this." Before the dedication of the memorial, she had called me and said, "You know, we really need people out in the East to talk." I said, "Well, okay."

Then, Gwyneth, who was going to Mount Holyoke at the time, called me up, and she said, "Mom." There was a course on Vietnam, and there was a course on the '60s. She was taking the course on the '60s, but one of her best friends was taking a course on Vietnam. The guy that taught that would start the course by saying, "You women will never know what it's like to be at war." Gwyneth had heard about this, and she said, "Mom, would you come up here and talk?" I said, "Well." She said, "We're doing eight hours on Vietnam in this '60s thing." I said, "Well, if your professor says okay, I will." So, he said okay. He was a nice guy. He took us out to dinner I think probably to see if I was a nut. Then, we went into this little amphitheater thing, and first they had a short movie. It was called *Letters from Home*. Have you seen that? [Editor's Note: Directed by Bill Couturie, *Dear America: Letters Home from Vietnam* is a 1987 documentary featuring footage from the war and letters written by Americans.]

KR: Yes.

EM: Well, at the end of that, I was like a basket case, and then I was supposed to speak. They played a lot of the '60s music [in the documentary], and the music triggers a lot for the Vietnam vets. Anyway, so, I got up, and I said to them--oh, the biggest thing about that was that when my daughter introduced me, she said, "This is Edie Meeks, my mother, and she served as a nurse in Vietnam and I'm so proud of her." I had never heard of that before. So, I started out by saying, "I don't know politically, I don't know historically, but I'm just going to tell you what it felt like to be a nurse who served in Vietnam," and so I did. One of the reasons why I think it was so wonderful and that I could do it was because it was all girls, and I was speaking to a group of young women who were used to listening to women and their attitude was, "Well, of course she should be here." A lot of places where I speak it's almost like you have to explain why [you are speaking], what's your validity about speaking about this. Because they're so used to listening to women, they said, "Well, of course you're supposed to [speak]. We may not agree with you, but of course you're supposed to speak. I felt so safe that I just talked and talked. At the very end, this little gal came up to me after and she said, "Oh, Mrs. Meeks, I would've welcomed you home," and I thought, "Maybe it takes her generation." To this day, my generation is still conflicted about that war.

I went back to my hotel room and I called Diane, and she said, “Do you realize we have known each other for twenty-three years or something, and we have never talked about Vietnam?” So, that was really the beginning. I said that I would speak to people, but the criteria was I could leave whenever I needed to. Actually, I found it therapeutic after a while, but it was because I could just do a little and a little and a little. I didn’t have to remember the whole thing up front.

KR: The 1990s were an interesting time for veterans because the World War II generation was getting older and there was this burst of movies about World War II. Oral history projects like ours were founded in the 1990s to interview World War II veterans. I think that probably a lot of Vietnam veterans feel that they were welcomed home for the first time in the 1990s or in the 2000s.

EM: Yes, I think so, yes. It took society that long to really fess up, to face the fact that this is what you asked them to do and they did it and you didn’t treat them well. You read now about the traumatic brain injuries and things like that, and I’m sure that happened to a lot of guys in Vietnam because of the landmines that were there. Because they knew nothing about it and didn’t want to know anything about it and the same with PTSD, all those guys weren’t cared for. One of the things that they really are seeing is that that’s why some of these guys ended up in prison. So, they’re doing a lot of outreach to Vietnam vets in prison now.

They’re also making it--I was just reading about this in that Vietnam veterans’ magazine, the [publication of the Vietnam Veterans of America] VVA--about how they’re working with younger veterans who got a less than honorable discharge. When they came back, some of these guys still had time to [serve], same with the Vietnam vets, and after you’ve been over there and you’ve been afraid for your life and nothing really matters anymore and the sergeant says, “Your shoes aren’t polished” and you say whatever you’re going to say, and then you get a less than honorable discharge. Instead of seeing [that] this is part of it, you’re going to have to deal with the fact that these people have been under such strain and such pressure and such fear, [the military punishes them].

It’s kind of like my daughter at the dedication--she went with me--and she came back and she said, “Mom, what’s with those guys? They’re still wearing their fatigues.” I said, “Well, Gwyneth, let me put it to you this way. The most your brother has ever done is float down the Delaware with the Cub Scouts. If he was drafted,” because he was nineteen at the time, “if he was drafted and put in the middle of the jungle for a year, where you live in fear for a year, he would come back a different person. He would not be the person that we sent over there.” I think people didn’t want to see that. You were expected to come back--I felt the same thing--we were expected to come back and be the person that left, and you couldn’t. You didn’t know how. You didn’t even know who that person was anymore. Some of the guys just went on with their lives, but others of them had a really difficult time. Those were the ones that went into the woods.

Actually, in buying land and having a cabin built, I could totally understand why they did this. To me, the first five years that I owned my cabin, the only people I let come up there were my kids because it was just a haven for me. One morning, I was sitting out on the deck, and I saw

this red fox running down the driveway. It jumped up, and it leaped and caught a mouse and ate it and ran away. I said, "That's what this place is all about. It all makes sense." That fox did not need twenty mice. It didn't need all the mice. It just needed that one, whereas the greed that's happening, a lot of war is about who's making the money. To use people up to make money is just unfathomable to me, but people do it. When I go up there, I know that the earth will take care of everything. The world will take care of itself from us.

KR: How has the VA helped you?

EM: Actually, when I first went to the VA, I think they were surprised. [laughter] I don't know if they've ever had a woman come and especially a nurse that served in combat. I know that they've had women there, but not a Vietnam vet and not a combat kind of thing. I started out with this young man; he was a psychologist. We really were working through it together, because I don't think he had the faintest idea, but he was willing to try. One day, I brought him a picture, it's a print that I have, and the print is of three soldiers, three soldiers who served in Vietnam just coming out of combat. Each one has little splinters throughout his face and each one is splintered in a different way, and the dog tag says, "PTSD." That's really what it's like. You feel splintered. You feel shattered, but each one's different because it's not the norm. It's taking yourself out of anything you thought was normal and putting you in this world. That was the whole thing, too. In World War II, they said they had two weeks to adjust coming home on the ship. Well, we didn't have much time to adjust. We just flew home and were supposed to be normal. [laughter] Somebody said to me, "Now, what was your discharge [physical]?" I said, "Discharge physical? They just said goodbye." [laughter] I don't think anybody got a discharge physical. The VA was very good.

When I went back and told him when it came up about the rape, he put me in touch immediately with a gal that dealt with that, another psychologist, and so that helped a lot. Now, I have a female psychiatrist that I see once every one or two months just to keep my balance. I'm on an anti-depressant, and somebody said, "Well, what's that like?" I said, "The thing about taking an anti-depressant, at least this for me, is that I feel normal. I don't want to feel high. I just want to feel normal, and that's what this does for me."

They did a study years ago, and we were all asked to participate. I signed up, and I was going to go. It was testing women who served in Vietnam to see what psychologically and chemically and physically and how it changed us. The day before I was supposed to drive up there, I think it was in New Hampshire or someplace, Vermont maybe, I thought, "No, I can't do that. I cannot talk for three days about this. I can't even talk a minute about it. What am I doing?" Diane did go, and after a day and a half, they told her she had to go home because it was affecting her so much. The outcome of that was that they found that the women who served over there, their brains chemically changed, and so for me what this anti-depressant does is it just balances out the chemicals so that I feel normal. I am just so grateful that we have it. Otherwise, I was getting so down, and I didn't know why. I can remember thinking to myself, "Wait a second, I've got a great life. I've got two beautiful kids, a lovely house." At the time, it was a wonderful husband, and, "Why am I always reaching? I feel like I'm digging myself out of a pit and instead of standing on top of [it]." That explained it really.

Then, having to deal with stuff, even now, knowing that she's [the VA psychiatrist] there and that I can call her and talk to her if I need to if something comes up is such a relief. I knew that I had to go to the VA because I feared if anybody understood, the VA would. I mean, there's nobody else you can really go to. You can go to a local psychiatrist, and he would have no idea what you're talking about unless he served over there.

It's interesting because it was the most bizarre year in my life, the most bizarre two years, being in the Army, and yet [when] people say, "Would you do it again?" If I had to live my life over, of course I would. All the nurses that I know who served over there say the same thing.

That's one of the things I told my kids. Even though it was tough and there are repercussions from--well, there are from everything you do--but at least I wasn't just standing on the sidelines complaining. I said to them, "No matter what you do, step out." My daughter is gay, and she really has never hidden the fact, because that's who she is. She and her wife have a little girl who has Down syndrome. I said to someone, "If God told me next time that I had to come back and I would have Down syndrome, I would say, 'Ah, that's perfectly fine, but I want Gwyneth for my mother,'" because she researches everything. Now she's with Gigi's Playhouse, which is throughout the United States I think, but it's a place where families can get together and share and do wonderful things for kids with Down syndrome. Now, she's of course on the board--they get her right away because she's such an organizer. She's stepping out, the same with my son. He steps out, and his wife does, too. Otherwise, you're just kind of wasting time.

KR: Tell me about your work with the Vietnam Women's Memorial.

EM: Well, it started when, as I told you, that I was going to be with Diane every Memorial Day and every Veterans Day just to watch her back. That happened for I think a couple of years, and then she came to breakfast one year and she said, "Well, I put you on the board." I said, "Okay."

KR: What year was that?

EM: Oh, boy, I think that might have been the fourth or fifth year after the dedication, and I've been on the board ever since. That was another interesting thing was being on that board. Going down to Washington, at the beginning it was really tough, because just being around all the veterans and when you're there, they want you to listen to their stories. Sometimes, I would get on overload and just have to leave. Then, we put on the tenth anniversary and the 20th; that was the last one. Now, we're doing the 25th this year. It was interesting being on that board because if we wanted to get something done, it was really impossible, the only reason being--this is my take on it--a lot of the women on that board were regular Army, which means that they were career Army people. Now, in the Army, they know how to manage problems, but they don't really know how to solve them. If a problem comes up, then we'll get a committee. The committee will go on endlessly, and then maybe they'll have another committee here and another committee there, but they never just say, "Let's not do that anymore." They have to study. I suppose it's a self-perpetuating job or something. To me, being on that board, that's what these people did. That's what these women did. They just kept going. I thought, "Hey, wait a sec. We know how to solve this problem." "No, we've got to do this and that." In fact, Gwyneth was on the board for, I think, for two and a half years, and finally she said, "Mom, I've got to quit."

These people are driving me nuts.” [laughter] She also was a problem solver, and she says, “If you’ve got this problem, let’s solve it.” Everything worked out fine, because we have the perfect people to take on the memorial and our legacy, story-telling and all of that, and they’re really doing a wonderful job.

We had offered it to the Vietnam Veterans Memorial, and the people who were there then--of course, Jan Scrubs was there then and he really resented Diane. He gave her such a hard time, always. Every year, we had to fight to get our people up on the stage for the ceremony on Veterans Day, but we kept at it every year, so we had our people up there. Boy, he resented that.

KR: What went into the process of establishing the Vietnam Women’s Memorial in the first place in 1993?

EM: Well, actually, it started in ’83, I think, when Diane went to the dedication of the wall. Actually, what she told me was, [laughter] she said, “I went to a psychiatrist six times and that didn’t do me any good, so then I thought, ‘We need a memorial.’” [laughter] So, I said, “Okay.” Actually, when you meet Diane, at least when she was a nurse, you thought, “Oh, what a sweet [person],” but talk about a Type A and talk about directed, oh, my gosh. When she zeroed in on something, she just kept straight ahead and people could say whatever but she just kept going straight ahead. She knew exactly what she needed, and she was persistent.

KR: Where did the funding come from?

EM: Actually, it dribbled here and it dribbled there. You’d have to ask her because she really knows if they were given big chunks. I remember on the fifth anniversary, there was a dance after, let’s see, was it Veterans’ Day dance? Maybe something like that. There were two guys there that either had movie houses or they made movies or something, but they were Vietnam veterans and they were brothers. We still owed 350,000 dollars on the [memorial], and they paid it off. So, it was things like that that happened. She really nicked and dined it. She had such a hard time from the Parks Department--not the Parks Department--but the people who judge what’s beautiful on the mall. They gave her such a hard time. In fact, one of them said to her, “Well, if you have a statue for women, then we’re going to have to have one for dogs.”

KR: Wow. [laughter]

EM: Actually, some of the guys thought they should have one for those dogs, because the dogs were really great. The thing too is that most of these people who say these things never served. It’s kind of like when you go to the VA and you put in for disability and you pour your heart out onto this form telling them why you think you should get disability and they come back and say, “No.” You think, “I bet the person who read this never served a minute.” If you didn’t have PTSD before you went for your disability, you would after, let me tell you. It is such an awful situation, and why they aren’t generous to the people who serve, it’s crazy.

KR: Well, I wanted to ask you if there is anything you would like to add. Is there anything we skipped over or any other stories you want to tell or add about your family?

EM: [laughter] Right now, my mind is numb. [laughter] It's been a lifelong adventure, and it has certainly changed my life but I think for the better. One of the things that I really learned was how useless war is. When my PTSD really hit the wall was when George Bush sent us to Iraq because he didn't even try diplomacy and what were we doing going in there anyway? We were invading a country. I was so angry that he was doing this to our people. He was going to put them in harm's way because he thought he was king. [Editor's Note: In March 2003, United States-led forces invaded Iraq, deposed dictator Saddam Hussein, and attempted to sponsor a friendly, democratic government while squashing a growing insurgency. American military operations in the Second Gulf War, also known as the Iraq War, ended in December 2011.]

Again, I think that you shouldn't be able to vote on anything that has to do with the Army or anything like that unless you've served. Every president should have to have served, so that he has some idea of what goes into declaring war on somebody else, because it's somebody's kid. It's somebody's brother or sister. A long time ago, there was a group that started. It was brothers and sisters of Vietnam veterans who had died and the stories of the loss that they had because brothers and sisters are so special to each other. That was almost harder than parents because you expect your parents will go before you, but you really are counting on your brothers and sisters to be there with you through your life.

I think another thing that really brought me great sorrow was seeing how I now had a lack of faith in our government and in the Army because I assumed that the Army at least should treasure each of its people because these are trained people, and they didn't. They were just throwing them away. I couldn't believe that and that our government would just throw these people away because that's what they were doing. So, that was an awakening for me that many people probably had a lot earlier, but when I came back I really had absolutely no trust for our government and I still don't. I think that the people who serve us don't serve us, that they're there for their own reasons and follow the money.

KR: Well, thank you so much for having me into your home and for sharing your oral history with me. Thank you so much.

EM: Oh, thank you for being here.

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Transcribed by Jesse Braddell 8/6/2018

Reviewed by Kate Rizzi 9/25/18

Reviewed by Edie Meeks 11/1/18