MARIAN SIEVERT MOSHER

Women ’s Overseas Service League Orange County, California Unit

Transcript of an Oral History Interview

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Marian S. Mosher

Laguna Hills, California

PREFACE

This transcript is the product of an interview conducted July 7, 1989, for the Women's Overseas Service League, by Mrs. Vivian Peterson.

Signed, dated agreements of release and biographical information accompany the original cassette.

Transcribed by Patricia Siggers

Lansing, Michigan January 15, 1990

**WOMEN'S OVERSEAS SERVICE LEAGUE**

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**Oral History Project**

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MARIAN SI EVERT MOSHER

10 Orange County, California Unit

12 NOTE: July 7, 1989. This is Vivian Peterson. I am recording Marian Mosher's

14 oral history for Women's Overseas Service League, Oral History Project.

16 MM: I am Marian Mosher, and I was in the Army Nurse Corps from January 2, 1943, till January 3 , 1946. I was

18 inducted through Camp Haan in January, and in April we were transferred to San Francisco Port of

20 Embarkation for the Hawaiian Islands. We joined the staff of the 165th Station Hospital on May 5, 1943 .

22 This was on the island of Kauai. We were there until

the following year, but did have periods of temporary

24 duty on Hawaii and Oahu.

We arrived in the Philippine Islands in May,

26 1945, and we were there until the third of October, 1945, when we went on terminal leave. Now one of the

28 questions is what influenced me to become a volunteer. I had just received my bachelor of

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30 science with a major in public health nursing. The government was in need of nurses in the military and

32 also in public health. I did not like public health nursing, so I volunteered for the Army. Prior to my

34 enlistment, I had graduated from nursing in 1940, so I had done general duty nursing one year and then

36 part-time general duty for the two years while I worked for my degree at UCLA. While I was in

38 service, I did general duty nursing, primarily in the operating room and in the shock ward.

40 One of the questions relates to career preparation and my expectations. I already had my

42 career planned, so I had no further expectations at the time being. After being in the military for one

44 year, my basic pay was $150.00 per month. Since most of my service was overseas, I had an extra ten

46 percent ($15.00 extra) added and a subsistence allowance of $21.70; making a total of $186.70. Of

48 this, I had $100.00 deducted as a Class E Allotment and $6.90 as a National Service Life Insurance; so my

50 monthly check was $79.80.

As for equal opportunities for service and

52 education: I was not aware of unequal opportunities for either service or for education. The place I

54 probably felt unequal opportunities were movement

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from one place to another, and of course, in the

56 Philippines a lack of freedom to move around; for safety and our own protection.

58 As far as our assignments were concerned, we were there as nurses and were assigned according to

60 our education and our background of experience.

Before the fellows were sent over to the Philippines,

62 I did have the opportunity of teaching the corpsmen nursing procedures, first aid measures, and how to

64 administer medications intravenously so that they could carry on the procedures in the combat areas.

66 As for housing in the United States and Hawaii, we lived in wood barracks, two nurses to a room. The

68 barracks had a kitchen, living room, and bathroom facilities. They were not luxurious, but they were

70 comfortable except for there was no heat in the cold weather.

72 In the Philippines, we lived in tents and floors built off the ground, burlap around the lower half of

74 the tent and screen around the upper portion. Again, there was no plumbing for showers or bathing. These

76 were in another tent that was enclosed up to about five or six feet. The toilet facilities were in

78 another tent, which happened to be about an eight or

ten holer. I don't remember exactly.

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Medical care was adequate. I had little need for other than the usual immunizations. When nurses in our unit required help, it was made available either by the unit doctors or consultation at a nearby general hospital.

As far as uniforms we wore: In the Hawaiian

Islands it was OD for the cold weather or light beige for summer. Suits and dresses; either one were acceptable. For duty we wore beige and light striped seersucker wraparounds. We were also issued a khaki slack and blouse outfit which we wore that was a little cooler. In the Philippines we wore khaki or the seersucker pants and tops at all times. Of course, we had to be protective of mosquitoes there. We were also issued a field outfit, but never wore it except when we were enroute from the Hawaiian Islands to the Philippine Islands; and again when we were out for gun practice in the field.

Now for memorable experiences: In the Hawaiian Islands, one of the colonels on the island decided that his administrative staff was spending too much time behind desks. He wanted them to get some exercise so he arranged for hikes on Sundays; all day hikes Working in the op, and they invited all the nurses that were available to go with them if they

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wanted to. Those of us in the operating room had to

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take turns so that we were staffed for emergencies, but these were very nice hikes. We went into areas which were very remote, places which tourists today still do not get to see. It was educational as well as enjoyable for its exercise and for its social event.

In the Philippines, the night we arrived on Leyte and enroute to the receiving area we saw the most beautiful sunset, which I shall never forget. When we arrived at the receiving area, we shared our tents with the prisoners of war who were just on their way back to the United States. The next morning as we came to breakfast, they came with their tin cups in hand and plates for their breakfast. We saw these green scrambled eggs and were turning up our nose; yet they took time to give thanks for them. Then during our breakfast period, the loudspeaker of the camp announced the death of President Roosevelt.

When these people were made prisoners of war, children up to a certain age were sent with their mothers; were imprisoned with their mothers. The boys had now become in their teens. We shared toilet facilities and shower facilities with them. This was a little bit difficult for some people to accept, but

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to them it didn’t make any difference at all. Also, it was interesting to us how little we knew. When they announced President Rooseve1t 's death, the former prisoners that were in the tent I was in were asking us who the vice-president was and what was he

like. Most of us didn't even remember his name, much less know anything else about him. We really learned a lot in those few days we were in Leyte, living with these former prisoners of war.

Now one of the sections is comparing my

experiences with the present; I don't feel qualified to make comparisons. I do get (because I also later on in Vietnam was working under the State Department), 1 get a lot of questionnaires about various things. In those forms I receive to fill out for somebody's study (because many people seem to be studying the result of this), I sense a lot of self- pity. All I can think of is that, probably, they were either not chosen; at least they did not know what to expect either socially or jobwise, when they were accepted or applied for that program. I sense so much self-pity; and we really enjoyed our --

I was with the United States Agency for International Development, so I was not there as a military person. I was there in a nurse advisory

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position. We worked in visiting hospitals: We

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worked with the Vietnamese military, but we lived and had our services from the American military (like PX services). We enjoyed our service there in Vietnam with the Agency for International Development, but we did not have contact with the injured, which makes a difference. However, we did have contact with some of the fellows as we would see them around.

Now my next topic is: Conflict between feminine and military profession. I was not aware of any. We realized that those who were in military service as a career that they would be assuming more responsibility. They were under a completely different jurisdiction than those of us who were there just for three years, so we expected them to carry a higher rank and a greater responsibility. It did not bother us one bit.

Another question about the GI Bill: Yes, 1 was very grateful for the GI Bill, because it allowed me to get my masters degree at minimum cost; and later on, for a home loan.

About the adjustments we had to make: As a

nurse, I was accustomed to dormitory living (because student nurses in those days always lived in dormitories) and the camaraderie that goes with it.

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We were expected to wear uniforms and abide by all the regulations that go with group living and uniform codes. These things did not upset us one bit. There was a lack of freedom, which was for our own safety in most instances. I would have liked to have gone shopping in Honolulu more often, but we were on the outer islands, and transportation was not always available. But then that applies when you are living in your own city. You can’t always go to town when you want to, because somebody else is using the car or whatever. That was no problem, other than that we didn’t always get our wants like we wanted them.

Terminology was not upsetting, because every occupation and profession has its own terminology, and we knew that we had our terminology as nurses. So the military had its terminology too.

Something about unpopular requirements: Some of the things that irked us was the thought that ’command performances” were usually a bore. I don't remember any particular regulations that really gave us a big deal of bother, other than that we did resent saluting sometimes: But that was a pain to everyone, I think. I enjoyed my military experiences and the people and the work. In civilian life we may not salute, but we have other ways of acknowledging

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peers -- both uppers and lowers. One of the things,

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probably, that did bother us was not being allowed to fraternize with the enlisted men. These were the people with whom we worked; we liked them; we had probably more respect for them than we did for some of the officers around.

I remember one night in the Philippine Islands the Red Cross arranged a dance in the boys' mess hall, and they got special permission that the nurses could come. It was one of the nicest social events we had out of our who le military service with the 165th Station Hospital.

After service, I went on and got my master's degree and taught nursing and later did some teaching with the nursing education advisory work in Vietnam and in Cairo, Egypt. I think that's about it.

VP: Tell me about this duty in Cairo?

MM: Cairo was my post-retirement. I retired in 1975, at the age of sixty so that I could still do another overseas assignment because I had enjoyed them. When I retired, I took a job with Project HOPE, and I spent two years as nurse education advisor at the High Institute of Nursing at the University of Cairo (It's a big title). I was there for two years and it was very interesting.

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We were one of the first land based -- We were there at the beginning of the time in Cairo. Project HOPE, I think, is still there in Cairo. I was assigned to someone who had a doctorate degree, and I had a master's, and I think this made a difference as far as my effectiveness goes. I was supposed to teach in the baccalaureate level and do an evaluation of the master ’s in medical-surgical nursing. When I got there, I discovered that the students in the baccalaureate level were just learning English so

they could not understand me. Besides that, the lecture room was right on a busy, busy, busy street with horns blowing; and my voice would not drown out all that noi se.

The master's program as it had been set up was a farce. A bunch of stuff had been put into it without any reason why it was there, or who was going to do it, or how much of it should be done or not so there was a change of staff there. Instead, I ended up being in more-or-less an advisory capacity and helped with the faculty of the baccalaureate students and setting up the medical-surgical part of the master’s program. The first year was a flop of all the flops I've ever had, but the second year made up for it in that it was one of the most dynamic groups of

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students I have ever had. It changed my whole view

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of nursing; in Egypt.

VP: When you came back from the Philippines, what did you do then?

MM: When I came back from the Philippines, I started looking for a public health job. I wasn't satisfied with anything, but the school at Huntington Memorial Hospital, Pasadena City College, needed an instructor. I started teaching at Pasadena City College in their nursing program the fall of '46, but I did not have my teaching credentials so I was teaching under emergency teaching credentials. That required that I get back to school, so that's why I went back and got my master's degree; master of science in education, so I could get my teaching credentials. That involved teaching once-in-a-whi1e science classes on campus as well as teaching nursing subj ect s .

In 1963 , I knew I was due for a sabbatical leave, and I felt I needed some refreshing. I had been taking courses all along the way. The school year of 1963-64, I took a sabbatical leave and taught nursing at the Christian Medical College of Nursing at Vellore, South India. That was a real, cultural experience, but I always felt that I could (because

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of having gone through the hot weather in the Philippines), I could tolerate and adapt to the hot weather in India and didn't get upset about these cultural and traumatic kinds of things. There I was just as an ordinary teacher and met some of the most wonderful people I've ever known.

Then I went back to work at Pasadena City College again. After awhile, I got restless. There were some things that weren't working out like I had hoped they would work, so 1 knew there was trouble ahead. I wanted to get out of the trouble, so I took a leave of absence and joined the United States Agency for International Development and went to Vietnam as a nurse education advisor for a year-and- a-half contract. Then I stayed over. There, there was a language problem, and I had to work through an interpreter.

One of the most interesting things there is that there was so much difficulty in communication, so much resistance because my counterpart with whom I worked was an older woman; that is, older for their country. I think it was embarrassing for her among her own peer group to be having to work with an outsider.

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I found out indirectly that she could understand more English than she could speak. She always insisted that my interpreter and I work right at the desk with her (which was a big desk). You could do this; so as wetalked, I would make suggestions and try to get my interpreter to understand what I was trying to do and why I was trying to do it. I soon found out that these things were being put into action before I ever got around to start talking to my counterpart about it. Then I realized she was understanding, and why she wanted us to sit at the table with her. That way it saved her face. She didn't have to worry about the peer situation. From then on, things worked much more smoothly, and I stayed a little longer than my contract.

While I was there we built a new nursing school building. That last month I was there, every morning when I would come to work, she would come in and want to consult with me about how she should do this or how she should do that, which she had never done before: So I'm glad I had stayed an extra little time, so that it wasn't as if I was finishing a contract and running. I was staying a little bit 1onger.

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Then I went back to Pasadena College and stayed until I was sixty. I retired at sixty so that I could take on another overseas assignment because I had liked the overseas work.

I had been approved and all ready to go to join the International Volunteers in New Guinea, but that fell through because they were having political problems. Then a friend of mine put me in contact with Project HOPE, starting a program in Cairo. I went to Cairo for two years at the High Institute of Nursing at the University of Cairo.

I was supposed to be there as a teacher at the baccalaureate level and evaluator of the master's in medical-surgical nursing. Because their bachelor students were just beginning to study English, I couldn't teach; besides, the classroom was right next to a very busy highway that I couldn't compete with (the noise). I ended up doing the master's in medical-surgical nursing, setting it up. The first class was a real failure. The second class made up for it, because it was a very dynamic group.

After that, I thought I had retired, but I

. didn't have my social security because I had not worked enough under social security. As a public school teacher, we didn't get social security.

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I helped with the census in the 1980's to get

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more points in social security, and then Whittaker Corporation called me. Their personnel director had called thecollege, wanting to know if they had anyone who would be willing toteach medical vocabulary and simple nursing procedures to bilingual

students to act as interpreters in their hospitals in Saudi Arabia. Of course, the college immediately said, "Well, if anyone would, Marian might be available;" so Marian was available. Of course, the fact that I had already spent two years in Egypt was to my advantage.

So I went back to Cairo, and I taught what was

supposed to be a forty hour course; but with all the holidays (between their holidays and the American holidays), this course stretched out into five and six weeks. I taught two groups then of medical vocabulary and simple nursing procedures.

The following year (fall of 1981), I did the same thing in Amman, Jordan. Those students were going to be going to North Yemen to act as interpreters .

The interesting thing about that assignment was, if you know the Arabic culture and the relationship of male-female kind of thing, I had a class of all

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boys (or young men). The course which Whittaker Corporation had decided these students had to be taught included the anatomy and physiology of the male and the female reproductive system. Put yourself in that spot! < Laughter > They were embarrassed, but I just plowed through as non­ committal as I could. One of the men (one of the older fellows; I imagine he was in his thirties) was a school teacher, and when the boys would ask a question, he would answer it in their language because he knew what we were talking about. When I came back from that, I decided it was time to retire. By that time, I was sixty six years old.

VP: I'd like to hear more about your Service in the Philippines, Marian. Would you tell me more about it?

MM: We went to the Philippines as soon as MacArthur allowed women to go in. Our boys had gone in ahead, our corpsmen and doctors; but the nurses weren't allowed in because MacArthur really didn't like women in his unit. By the time we got there the boys had become so skillful that we wondered why they even needed us, because of their experiences.

While we were there, we had a lot of interesting experiences. One night, one of the girls got hold of

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some steaks. We rigged up several flatirons and our

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mess kits, and we prepared them using our flatirons as our heating. That was a real treat to us.

Also, if you listen to "Radar" on the TV show and his bargaining for things: One time (our fellows bargaining) we ended up with a supply of pork beyond which our refrigeration could contain, so to meet that situation we were eating pork three times a day for about a month.

Among our casualties that we had over there, we had quite a few plane crashes for awhile. They were always in the early morning when the planes were beginning to take off. It was considered that these were due to sabotage, and these were usually burn patients. They were bad burns.

One morning while feeding a patient who wasn't doing too well (really wasn't recovering at all), he had an emesis of an ascaris, which is a long intestinal worm. That made all of us wonder what else we might be carrying around inside our bodies, but the man improved immediately after he had gotten rid of that worm.

There were many flies in the area, and most of

you might know burn patients' dressings begin to smell once in a while — and ooze. The flies harbor

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and lay eggs on these dressings. I had heard of using maggots for orthopedic infections when I was in training, but I had never seen them. Because of the flies laying eggs on the dressings, these patients would become infected with maggots.

Now maggots are not what you would call an aesthetic form of treatment, but it is very effective. Those patients' wounds were very clean, and they healed quite readily. We also had a lot of patients who had hepatitis.

One time the government provided a trip for us to the city on the island, Calpan. We flew over a lot of green land which I imagine was jungle, because there wasn't too much else on the island. We had a good time, but when we got home all of us had intestinal upsets for several days.

One time the Red Cross planned a dance for us in a community. We were picked up by jeep, and we were riding through some of the trails, which were rutted. As we went over the tree roots, you wondered why the jeep didn't turn over, so I know jeeps are very good on rough terrain. One place we stopped to ask directions, and we were invited into their bamboo house. It was night, and most of them had been in bed.

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One time, someone from the Philippine -- whether government or Army -- I wouldn't know, arranged for us to have a trip to Calpan, which is the big city (about the only city, I think, on the island). It was a very interesting trip. We had a nice time. We met a nurse who had graduated from Philadelphia General, and she stayed with us the entire time. She seemed so glad to have contact with American people.

Red Cross planned this. We went by jeep; we went on very rugged roads. They were at an angle so that as we drove over tree roots, I wondered why we didn't turn over so I know the jeeps are good. Of course, we didn’t really know where we were going, and it was dark at night. We stopped at one of the houses It was a bamboo house built up on sticks (stilts); and asked directions, and of course, we were invited into the house.

Pretty soon the children started appearing from their sleeping mats. We were the center of a lot of attention. We were served chicken which had a few little ends of feathers on them, but of course, we ate them. The bones were thrown out the door to the pigs who were underneath the house, so you can see

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what some of the families were living in and why some

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people got sick when they were over there.

When we finally found the place, we had to park on a road. Then we had to walk what seemed like an awfully long distance in the dark over one of these little paths that goes between the rice paddies. Eventually we got to this place where there was a little light; I think it was a lantern. There was a

camouflaged parachute hanging over a spot of dirt (earth); I think it was growing, and there were Filipinos there who were dancing in their bare feet. We didn't dance, but some of the fellows did. It was an interesting trip out to see another section of the country and how they lived. Roads don't go all over, so I was very grateful for that.

As far as nursing was concerned: One of the things that I often look back, since I did go into nursing education — and how fussy we were about our students' technique. This was the day when penicillin was still new, and you gave a lot of it, and it had to be given intramuscularly. There was a shortage of syringes so we had to fill a 10 or 20 cc syringe with penicillin and then change needles between patients, which meant you never aspirated to check if you were in a blood vessel or not. I hope

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| **514** | **VP:**  **MM:** | **They weren't Filipinos, then?**  **No. They were Americans, and they were on their way** |
|  |  | **back to the States. The two people in the tent where** |
| **516** |  | **I lived were younger people. It was a woman whose**  **husband had been employed by the government, and her** |

no one ever got sick because of it. When I think of how strict I was with teaching students, and here we had been in a position of doing that kind of nursing out of necessity.

The prisoners of war that were on Leyte when we came in (and of course, all I know is what we talked to the people who were in the same tent that we were and seeing the others around the camp): These were people who were employed by the U.S. Government, working in the Philippines, and got caught there and had been imprisoned at San Tomas.

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sister, who had been visiting her. They were younger, and they didn't look too bad for the wear and tear of a prison. Some of the others that we saw, the older ones, they looked so fragile and almost as if they were still in sort of a daze from the experience. These were people who were Americans, who had been working there; that is , the ones I talked to and saw. But they were al 1 Americans: They were not Filipinos.

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I went into Service as a second li eut enant. I

528 was given a first lieutenancy after I

got to the

Philippines, but I think it was jus t a routine

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promotion that you get if you stay in you get raised to first lieutenant. I "combat" because this was considered a I was given a combat star, but to my never saw an enemy.

long enough; was given a combat area, knowledge, I

< End of Interview >

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Transcribed by Patricia Siggers

Lansing, Michigan

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