# HELENE GRAM FORSTER

REMINISCENCE OF WORLD WAR II

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PREFACE

This transcript is the product of a tape-recorded interview conducted on May 10, 1983» for the Women's Overseas Service League.

Mrs. Helene Gram Forster was b o m in Buffalo, New York, on May 9» 1913» the family moved to Lakewood, Ohio, shortly thereafter. Mrs.

Forster graduated from the University of Michigan in 1935« At the time of her volunteering for overseas duty with the American Red Cross, she was employed in the Home Service Department of the East Ohio Gas Com­ pany, Cleveland, Ohio. On her return from overseas duty, Mrs. Forster was employed in the Home Service Department of the Cleveland Electric Illuminating Company. She married Edward C. Forster in March of 19^9\* In early 1960s, she returned to college to retrain to teach and taught primary grades until 1969. The Forsters moved to Port St. Lucie, Florida, in 1973.

This is a transcript of the spoken word as preserved on cassette tape, and the informal, conversational style inherent in an interview is preserved in the transcript.

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Q. On Tuesday, May 10, 1983. The interviewer is Edna Fonn, the interviewee is Helene Gram Forster, who lives in Florida with her husband, Edward, She is now in Cleveland visiting children and grand­ children,

Helene, in which organization did you serve, where, and for how long?

A, I served with the American Red Cross in Hospital Service in Africa,

Italy, and France. I joined in June of 19^3 a-nd left in December of 19^5» 2-1/2 years.

Q. What did you do prior to being employed by the American Red Cross?

A. I was with the Home Service Department of the East Ohio Gas Company of Cleveland.

Q. What influenced you to volunteer?

A. Well, I guess just the desire to serve and to be with the service personnel, as versus doing something back here in this country, behind the lines, as it were.

Q. What did you do while in service?

A. I was called a Hospital Recreation Worker, which in the military jargon was a "Hospital Rec" (laughter) as versus those who were with the American Red Cross Club Service, they were called "Able-Bodied Rees" (laughter). The nature of our work, I guess you would say, was really like occupational therapy, was to keep the patients busy and keep their minds off of what their problems were. Plus, my job was to

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do everything with the Special Services Forces, the enlisted men, and the officers, in handling all of the USO troops that came through the area in which we were stationed at that time.

Q. What was your uniform dress?

A. On duty in the hospital we wore a grey seersucker dress, with which we were allowed to wear a while collar with our insignia on it. We were allowed to wear either a pale blue, a navy blue, or a red sweater, I

can remember that, to brighten up this horrible drab grey uniform. Then we had— what did we call it— street uniforms (laughs), dress uniforms— the skirt and the blouse and the jacket in both the grey

seersucker and the grey Palm Beach fabric, I believe it was called, and then the regular, that grey one— what did we call it— oxford grey, the woolen uniform which we didn't use for quite a bit of the time. Then part of the time we were in very cold climate and we did not have any type of trousers, dress uniform type of thing, and so we were issued— the American Red Cross, all American Red Cross, Hospital, Club, every­ body— uniforms made out of the British RAF fabric, a blue fabric, and we were issued the heavy woolen trouser and the Eisenhower jacket, and a cap that matched. We wore that a great deal.

Q. How did what you /wore/ compare with uniforms of the other service women in your area?

A. I would say very comparable except for color. We were the greys and the blues and they were the O.D. /olive drab/, I guess that was what it was called? and the nurses wore a seersucker pin stripe/dress/

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a brown and white pin stripe, where we wore grey. And then the nurses

wore their dress uniform, it was the green, whatever it was— OD, I think it was called OD, wasn't it?— do you remember? I think so, as versus the color of ours. But essentially we were very comparable in our appearances, our caps, and all that sort of thing,

Q. Here there any other servicewomen in your area other than the nurses and the Red Cross?

A, Not that I can recall. I can't recall that there were WACs

/Women's Army Corps/, but I'm sure there must have been.

Q. Just weren't around....

A. There must have been in some headquarters someplace, there must have been WACs around. But I guess maybe we never had them as patients, otherwise I would remember it.

Q. What medical care was provided for the American Red Cross personnel?

A. Everything the same as for anybody else, because we lived in a hospital. Anything that....

Q. That was your housing— in the hospital? What type of accommodation was it, tent or?

A. No, Well, yes, in Africa we were in tent. I haven't told you yet where I was (laughter). I was in North Africa, in Algiers— Algeria, in Italy, and two different places in France. In Africa we lived in

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tents. In Italy we lived in an old hospital building, lived in like an apartment building type of thing, and also in France. But we lived right with our nurses, and we all were right together. And, therefore, our medical care was all right together, too. If we had the sniffles or anything else, whenever anybody needed shots, we were right along with the rest of them. We just traveled with our unit.

Q. Did you find overseas life demanding a great adjustment, such as living arrangements, regulations, lack of freedom?

A. I don't think so.

Q. Tell us about your trip over to Africa. From what port did you leave and did anything happen along the way that was interesting?

A. We sailed from New York */on* the Susan B. Anthony/, and after the war, after World War II, learned that— some time after— we learned

that we had sailed in the largest convoy that existed in any theatre of operations at any time during World War II. We rendezvoused from nine different ports— don't ask me what the ports were, but I remember Norfolk— and along the time there they came out from nine different places. We rendezvoused two hundred miles out at sea. It was utterly huge, we were an enormous thing. We rode one of the more dangerous positions of the /convoy/ because we were in a fast ship, in a ship that could have broken away from the convoy and moved quickly.

Q. What type of accommodation did you have on the boat?

A. I guess it was triple-deck bunks, if I can remember rightly (laughs).

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About thirty people in one bathroom, and the fresh water turned on I

think it was ten minutes at a time, three times a day, something like that. And you lined up to take your shower and do your laundry, and that sort of thing. We were right with the nurses. We lived right with them. I don ’t remember of any segregation, whatsoever.

And then when we came into the Mediterranean, because we were heading for North Africa, you had to fairly well single out, I can't remember that it was single file, but I mean to go through the Straits of Gibralter you had to narrow down this enormous convoy. Therefore, you were literally sitting ducks to the enemy because you weren't spread out in a vast position. We were attacked at sea just out of Oran, I

believe it was, between Oran and Algiers, and we were riding side by an airplane carrier and, of course, that's what they were after. And they, as I recall, they got the airplane carrier, the plane carrier, but they didn't hurt us at all. I mean we were hurt, but we were in the bomb situation where we all had to huddle down with our helmets on and be all prepared to go overboard, but nothing happened, fortunately.

Q. And where did you land?

A. We landed first in Algiers, then we were taken by truck out to a place called Cap Matifou, which was twenty miles outside of the city, and we were bivouacked there, in the tents, and we were there just less than a week, I guess possibly five days. They started to build our hospital. It was to be built out of pre-fab buildings and that type

of thing.

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It was under construction and suddenly the construction noise stopped, and at dinner one night our Commanding Officer advised us that Italy had just capitulated and our orders had been changed. We were not to function in Africa? we were to be moved to Italy as soon as it was safe

to cross the Mediterranean. With such a large group of women— I should back up a little— I was with the 36th General Hospital which was from Wayne University, Detroit, Michigan, and we had a complement of over a

hundred women with us, counting the nurses, the physical therapists, the dietitians, and the Red Cross girls, and, therefore, we were sup­ posed to sail when it was reasonably safe, if there was such a thing as safety then. So we lived in Africa from the time that our orders were changed, I think we got to Africa late August, and I believe it was late October when we finally sailed, so we were just, I guess you would call it, staging all that time— waiting.

Q. Were there any interesting experiences in North Africa that you remember?

A. Well, I remember having to take the— in order to try to keep us busy, I guess that’s what you ’d call it, they made us all take basic training (laughs), and, of course, we Red Cross girls had never had it in the first place (laughs), so we had to go out and tromp around. I believe also that they issued us field boots, because I don't recall that that was part of Red Cross clothing. I think we just wore fancy slack shoes. And they issued us field boots because we would all have had broken ankles if we had gone over this wheat stubble. We were actually like in an old wheat field.

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And then they set up a shower place with just some pipes coming out, and it was heated solely by the sun, there was no other heat, but, of course, it was hot enough in September in North Africa. So between

11 and 12 o'clock every morning, which was supposed to be the prime

time because it would be the warmest time, when the pipes would be the warmest, was the nurses' time, which, of course, also included us. At

12 o'clock noon— obviously he went by the sun— a little old Arab who came along on his donkey cart would come under the guy wires, the guy­ lines of the tent, and take the one tent wall down every noon, just as regular as clockwork (laughter), and then it would be put back up again. We went through that daily (laughter) for, I am sure, at least a month.

And we were there during monsoon season, as I recall. I'm not sure it is called "monsoon", it's called (laughs) something else in Africa, but I mean it's the heavy rain season, so that everything was just all mud. And when you went into the mess tent you'd have to be sure that some­ body sat on each end of the bench simultaneously, because if you sat on only one side it was just all in mud, just deep slushy mud, and the whole table would go over, of course. It ’s kinda like— even though it wasn't Korea— it was kinda like M\*A\*S\*H\* (laughs). I mean that type of thing in Africa.

Then we sailed, I believe it was late October, to Italy and lived— we sailed to Naples, and it took us something like five or six days to

1M\*A\*S\*H (Mobile Army Surgical Hospital): a television program very popular the last few years, which in its story line exhibited extremes of temperature in Korea.

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cross the Mediterranean, which should take like a half-day, because we had to zigzag and turn around and around and around so much to be safe. Then we stayed in what had been the fairgrounds in Naples, which if anybody ever visited there prior to the War they would recognize it as the Mussolini Fairgrounds thing. We stayed there for a couple days and

then we were set up in Gaserta, Ka-sair-ta, which again was 20 miles out

of Naples. We were set up in a — what had been a hospital for some 200

or more years. It had been a Catholic hospital originally, built as

such. The nuns still maintained their quarters in our building. It was built around a huge plaza thing— what am I trying to say?— in the center, it was a rectangular—

A. A courtyard?

A. A courtyard. It was a rectangle built around a courtyard, and then we added other buildings to it as we needed them for the hospital— the pre-fab buildings. We shared a common wall with the famous Royal Palace of Caserta, which was built to resemble the Palace of Versailles.

We were in this location, so we were informed, because the Palace became 5th Army Headquarters and the red crosses on our roof helped to

protect Army Headquarters, which it did d o ~ I mean our area there was never bombed. The first few days we were there they put the anti­ aircraft guns out in the courtyard and they were there like about one day when it was discovered that that was against the Geneva Convention to have a firearm on a hospital post, and so all of that was removed. The post was guarded only by billy clubs and then nobody could have firearms except if you had an important person as a patient. And there

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was a period of time in which we had General Mark Clark as a patient, and, therefore, his door was guarded by armed people; but other than that, not.

Our Red Cross secretary— there were two recreation workers, two social workers, and a secretary, a five-girl unit with a general hospital, with a large hospital— our secretary took dictation from General Clark and did /some errands/ for him. So when he was ready to be discharged, he asked whether there was anything he could do for the Red Cross because of our courtesy to him. Our Assistant Field Director advised him that we could use a tent for our USO /United Service Organization/ shows. So we were given the largest tent that the Army has, which I

believe is called a big circus tent. And the Corps of Engineers built benches for us so we could seat on benches— we could easily seat 500

men, plus the wheel chairs, the litters, and all that sort of thing. And we had many many many excellent USO shows come through us.

And again, part of my duty was to escort all of these people, whatever type of person they were— they weren't all actors, there were a lot of sports people and that kind of thing that came. It was my duty to set up mess for them— to see to it that there was food provided for them, and to escort them through the wards of the hospital, in addition to the show that was always put on in the tent. So I met quite a few famous people (laughs) along the line, but, unfortunately, I don't believe that Bob Hope ever came to anyplace but Pacific, I don't believe he was in our part of the war. Now, you don't want me to continue with where all I was stationed, do you?

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Q. Well, I thought you probably had more interesting experiences there in Italy. I remember your telling me about the Christmas gifts you passed around.

A. Oh, that's right. I was also going to say, too, this hospital we were in, I just happened to think of that, it was built as a Catholic hospital, but it had been occupied by all the different nationalities, the military of the various nationalities as they went through Caserta, and it had been Italian, and British, and German, and now American. And, of course, we took civilians in too, when civilians were injured they came in too. And then there was a period of time, it must have

been about December of 19^-31 yes, when the people who were called the

"Gooms'', who were Moroccans— they were the guerrilla fighters from Morocco....

Q. Was that a nickname or was that their actual tribal name?

A. I don't know, I guess it was a nickname, I don't know. They were the guerrilla fighters who fought with these things like a scimitar, this hooked-blade type of an idea, you know. Their training was to... they were very very stealthy people, of course, and they would sneak up behind somebody and decapitate them, actually, that was the way they functioned in Morocco, apparently. So they were attached to the American Army as guerrilla fighters in the hills, because, of course, that part of Italy is hilly, it isn't really mountainous, it's hills. They all got trenchfoot because it was so wet at that time of the year, and we had a terrible lot of trenchfoot patients, I can remember that. And that was what was wrong with them, of course. So they were brought

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into our hospital and they spoke French, of course. Our one chaplain, our Protestant chaplain, spoke very fluent French, having served the pastorates in the American Church of Paris and the American Church of Algiers, so he was very fluent, just as fluent in French as in English, of course. So he advised these people what they had to do. They had all to be de-loused and this sort of thing, get out of their robes, their burnoose things and everything. But they refused to give up these knives, these blades that they fought with, and they said that that was part of their— he had told them they couldn't have these in the hospital, but they said, though, this was part of their religion.

Of course, they were Moslems. So they kept them under their pillows. And most of us (laughs) were just a little bit leery about this because they didn't like us.

So our first Christmas we received all of our Junior Red Cross boxes from the States— thousands of them— so Mary and I who were co-workers, she and I were the recreation workers, dyed some GI underwear red, and— I wasn't the size that I am today— I stuffed myself up with a pillow, and we were playing Santa Claus. So we were marching down the aisles, and on */one/* side of the aisle were all the American patients, so we're giving them all these little boxes. These Gooms'— those Moroccan eyes were just following us down the aisle, and as we got to the end of it, I turned to Mary and I said, "Do you have a strange feeling that you're gonna get one of these blades in your back if we don't turn (laughter) the other direction and give them some Christmas gifts?" She said, "Yes." Of course, they weren't Christians and so we were not thinking in terms of Christmas gifts. So we just turned around and just acted

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as if we went down one side (laughs) of the aisle a time7 and we

handed them the presents. They were very happy and they smiled. In the box was an ocarina, a sweet potato, you know those little flute- type of a thing. Of couse, that is very comparable to the instruments that they play, that the Moroccans use. So they were tooting these things in nothing flat and they were teaching the American boys how to

play this thing. So it\*s the age-old story, the language barrier was nothing. By other means they could still communicate, they got along very well. They actually turned out to be very very nice fellows.

Despite the fact they were guerrillas, they were very nice to us.

Q. Good patients?

A. Yes, very good patients. And they were very good to us, they all wanted to— they did, this leather tooling was their specialty, and they tried to tool our purses, which, of course, (laughs) was not uniform so we couldn't allow it to be done. But they were very nice fellows.

Now, I can't think of anything else.

Oh, yes, the most important thing of all, practically, I forgot that while we were in Italy— we were there from let's say about the first week of November probably to about the last week of June, as I recall— during this period of time I had lost my father, my father had passed away. And inasmuch as there was a war going on— of course, we were all just numbers and.... Therefore, if there was no financial dependency, if there was no dependency on the survivor, on the person who was in service.... In other words, my mother was not dependent upon me, therefore, I could not return to visit her. So I kinda tried to pull

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some strings from stateside to try to get back, but nothing succeeded. So one fine day, one afternoon, my boss, who was the social worker with

our unit, came to me about 6 o'clock in the afternoon, just before we

went to mess, to dinner, and said, "Helene, would you be ready to sail to the United States tomorrow morning at 10 o'clock?" And I said, "Yes, I guess that I could be." It turned out that a hospital ship, which actually was the flagship of the Atlantic Fleet, the largest one of all, a beautiful beautiful thing, had sailed into Naples Harbor, was laying out in the harbor, because everything was mined there, and, of course, it didn't some in.

The ship had come in— I can't recall the name of it now, but it doesn't make that much difference— and she had been laying in Scotland, in

Glasgow, I believe it was, for several weeks waiting for D-Day for the northern French, for the Normandy invasion, June 6. Then, typical of course, they (chuckles) suddenly realized that she was too large a ship

to shuttle the Channel, the English Channel, so she was sent down around to come in through the Mediterranean, to come to Naples to take

patients back to the States. My understanding is that /personnel/ were each issued like a 12-hour or whatever kind of a pass that they could go */off*the shij/ because they weren’t doing anything, they were just

waiting for the ship to sail. And the Red Cross girl aboard somehow missed the boat, I guess you would call it that (laughs). At any rate, she was out on pass and didn't return when she was supposed to and so they had to sail without her. So when they came into port, if they had not had a Red Cross personnel aboard, they couldn't touch Red Cross supplies, even though the Captain of the /shi]/— the Commanding Officer

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of the hospital unit of the /ship/, had all the keys and everything else, but, technically speaking, he could not use the supplies. So they radioed in from the harbor and asked whether they could put a Red Cross girl aboard. And it just happened that the girl who was my superior was sitting across the desk from the woman who received this call in Red Cross Headquarters and said "Yes." She turned to her and said, "Can you have Helene Gram on that ship tomorrow morning?" (Laughs) So there I was. I sailed back to the States, on leave, just had my leave, that ’s all, and then sailed back again.

Q. You sailed back on another ship?

A. A regular troop ship, yes. Not a hospital ship, no. I came back

*/home/* on a hospital ship. And when we came in— I can't remember all the dates, it seems to me it took us a couple of weeks, but that seems like a terrible long time to cross the Atlantic, doesn't it, because

we wouldn't have been zigzagging. It wouldn't have been like in convoy because we came completely lighted, brightly lighted, with our red crosses on */to¿/.*

Q. No convoy at all?

A. No, no. Completely alone. I can't recall now. At any rate, we came back to Charleston, South Carolina, and then the patients were

taken there, and so forth. Now on the ship, understand, there were several hundred of the men who had been our patients in 36th General, so, of course, I knew most of the fellows that were aboard ship with me.

We came in on the 4th of July, this I can remember. Just exactly when

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we sailed, I don't recall that, but I'd say it took us at least ten days to cross. Well, that's right, we had to come out of the Mediter­ ranean before we *got* into the *Atlantic and* started *across.* We *landed* on the 4th of July, (tape stopped and started again) as I said, we landed on the 4th of July, that part I distinctly remember, because

being a holiday, whoever would be involved in unloading, which I assume would have something to do with the longshoremen, refused to unload the

ship because it was a holiday. And we had 850 men aboard, I remember that also, 850 critically wounded patients— in other words, men who

would never be the same again. These were the only ones who were returned to the United States? the others were simply patched up over there and put back to work over there. In other words, we had the blind, the amputees, and all the rest of this aboard. They were all critically ill. And that is something I have never forgotten. It left a very bad taste in my mouth that our troops who were doing the fight­ ing and who were totally disabled— in other words, they were the totally disabled men that we now still have in our hospitals, probably— could not be unloaded because it was a holiday.

Fort Sumter, I believe, is the name of the fort that is right there at the harbor, and unfortunately for us.... First of all, there was no air conditioning, it was very hot, it was beastly hot on the 4th of July in Charleston, South Carolina— and there was a dance going on at the Officers Club simultaneously. So we lay there in this heat, our men in triple-deck bunks lay there listening to a party going on, and that didn't register too well with anybody, of course.

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Then, after whatever amount of time I had coming to me— I believe it was two weeks, I guess that was sick leave— was over, I had to report back to Washington and I was stationed for— I don't know— a couple of

weeks, I guess it was, I'm not real sure, at Bolling Field waiting for another ship to be ready to sail, and I went back on a troop ship.

Now I can't recall that that was convoy. I don't believe so, because by now we were to about August or so of 1944.

But again we went in— I went right back where I came from, I went right back to Naples, reported back to Red Gross Headquarters, to the same woman, Josephine Barber, who had put me on the hospital ship in the first place— I went back to her. Our Red Cross unit had gotten

along very well as co-workers, so I asked whether there was any possi­ bility of being able to return to the 36th General, and she said, "Your travel orders are cut." So I went right back where I came from.

The day that I sailed /from Naples/» which was June, late June, the 36th General received their order to pack up in Italy and be ready to go in for the southern French invasion. So I went right back— they had not functioned as a unit in the time that I had been in the United States, two months elapsed or something like that, and they were shipped to Dijon, France, and I joined them and they had not started to work yet. In other words, it was just a freak coincidence that the hospital was not functioning as a hospital in the interim, and I

rejoined them and picked right up where I left off. (Tape stopped and started again.) The unit, all the rest of them, all the doctors and nurses, and all the others, the Red Cross and everybody else, went in to Marseille, they went into southern France, they went up by train,

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by the old 40-and 8'ers. They went on temporary duty someplace along the line, I believe it was Aix-en-Provence. That's when I was in the

United States. And then they went to Dijon to set up again.

END OF SIDE ONE (tape allowed to run out)

SIDE TWO

The unit, as I say, went the long way around (laughs) that way from southern France to Dijon, which is up at the head of the Rhone Valley, just about central France, as I recall, a little bit farther east, closer to the Swiss border.

So when I came in and asked whether I could return to the unit, I was ready to go. So, of course, I flew, naturally, from Naples up to Dijon. We got as far as Marseille, I believe, and were going on up, and a lot of the people who were on the plane with me, one of these little C-4?s, they knew the territory, they had been around here before and they recognized what was down below us, because, of course, we weren't flying thousands of feet up in the air like we do in planes nowadays. So all of a sudden we were going the opposite way, they became aware of the fact that we were going back where we had just come from. It turned out that our wings were icing up. Now I knew that I

was on a mail plane, and I knew that the mail was important, and so forth, but I didn't pay that much attention to it. So we had to go back to Corsica, which was British-held. It was like mid-afternoon or so, and it wound up we had to stay all night because the weather didn't clear, the weather was very bad. So we were sent to the Red Cross girls /billets/. In fact, I stayed in a Clubmobile girl's apartment

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because she was out in the field. We were sent to occupy the billets of the Red Cross, which I wasn't used to, of course, because I lived only on a hospital post, what's the only thing I knew.

So the next morning we had to go out and report and we again had to wait several hours and we finally took off about noon. So when we finally got to our destination up at Dijon— it was some distance, I

forget how many hours— it was late afternoon, and then we learned why they had been so particular with us. It wasn't because we had a couple of women aboard (laughs), and it wasn't because they were carrying the

mail, but they were carrying General Eisenhower's aide, who, in turn, was carrying the battle plans. And so nothing could happen to him, and to the plans, to his briefcase, and, therefore, we had to be extremely careful as we proceeded.

So then I picked up right where I had left off, literally speaking, in working with the unit at Dijon. We were stationed there not in a pre­ vious hospital, but in what had been a french cavalry school, and we built— oh, I don't know how many, it must have been hundreds, probably wasn't— many many pre-fab buildings, anyway. We lived in what had been the apartments of the French officers. Of course, they weren't like an apartment that we know in this country. They installed pot belly stoves for us and all, because Dijon is on a latitude with Duluth, Minnesota, so it was cold climate. It wasn't like where we had come from, near Naples, but even there it had gotten cold.

So I believe, if I remember right, this is where our issue of this RAF outfit came in, because we had to be in pants, in trousers, because it

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was winter and it was much too cold. The nurses went into trousers in the wards? everybody went out of these little seersucker uniforms because we all would have had pneumonia if we had stayed dressed that way, because it was deep, high-piled snow. We had to wear boots, our trousers tucked into the boots, and things like that. And heavy jackets, I remember we were issued some kind of very heavy lined jackets, I guess Air Force things.

Our Red Cross room— we had a hut, a little separate building in Italy— but here we had a room (lawnmower operated outside can be heard faintly on tape), which was part of the riding stable business, you know, it had the gutters around it and all, a great big high-vaulted ceiling room. And we had our own library, and we had a complete workshop for Mary— my co-worker was very very handy, very artistic, she could create anything out of nothing. And I was accustomed to working with groups, so she and I were a very good pair. I did the group work of taking the things out to the wards— the parties, the USO people, and this type of

thing, and the parties, the sing-alongs, and all these many things that you had in the Red Cross building— and she worked with the individual patients on handwork, and we worked out as a very fine pair.

Anyway, in this hospital what had been the riding arena of this French cavalry school was an enormously large room, and that was converted into our orthopedic ward. And again, after the war, we were advised that we had the largest orthopedic ward in any theater of operations

during the war. I remember that it was 250 beds, but I believe it was

250 on each half, like a total of 500, but I might be wrong on that— traction beds, which lined the wall, which was just like a forest going

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around this huge arena, which was like any arena, an oval-shape type of a thing, an enormous big room. Then as a patient came out of traction

and went into a flat bed, he was moved into the center of the room; there must have been a total of 500 or more men laying in that one

ward. So Special Services erected an enormous big theater screen, out of a sheet or something like that, right in the middle of the ward which is where the mess was served from. Everything, the nurses' sta­ tion, everything functioned from the center. So one night— and every night they showed movies because these men were absolutely bedfast, of course, they couldn't get up and come to the Red Gross building or come to a USO show. So every night some of the fellows would look at it backwards (laughter)— one night forward and the next night ^backwards/— they would project it from the two opposite sides, and they kept them very busy. And then patients from other wards who were ambulatory, or wheel chair patients for that matter, were allowed to go into that ward and sit in the aisles and watch these movies, because we had first-run movies, we had excellent things; maybe hadn't even shown them here stateside by that time.

It was a very interesting experience with this huge huge ward. We had a 4,000-bed hospital, and I do recall afterward an uncle of mine who was a doctor making the remark that he seriously doubted that all of the hospitals in the Greater Cleveland area could bed down any more

than— possibly not even that many— people in all the hospitals, because, of course, in a civilian hospital you have private and semi-private rooms where we had wards with hundreds of men in one ward. Just one right after the other. (Tape picked up newspaper rattling.)

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Then from Dijon we went to Garches. We went there, I distinctly remem­ ber that we arrived there--Garches is a suburb of Paris— and we arrived on Bastille Day, which I believe is July 1^, so we must have been from October to July, September to July, something like that, in Dijon, and then we went to Garches, which is exactly midway between Paris and Versailles. And there we were in what had been a tuberculosis sani­ tarium, a hospital, a beautiful beautiful hospital, the Raymond Poincare' Hospital. Just as you walked out to the road, to the entrace of the hospital, there was a sign pointing so many kilometers each way, and we were midway between Versailles and Paris. There we were billeted in regular buildings, regular concrete, brick buildings. Now we were getting very posh. Now after (laughs) starting out in tents in Africa, we had worked our way through every form of housing. The nurses had

one building, and the officers had another, and the enlisted men were someplace, I don't remember. But all the officers, which were the doctors and nurses, of course, and a certain number of the detachment,

were in these buildings which were at the top of a hill. It was exactly 100 steps up this hill, literally straight up, and (laughs) someone nicknamed it Cardiac Hill, I remember that. Remember a lot of

our doctors and even some of our nurses were not young. Our men that were in charge, like the man in charge of surgery and in charge of

medics, those men were surely 50 or more, they were not 20 years old

like the patients were. And so it really and truly was quite a thing, because our mess hall was at the bottom of the hill. The only thing we did at the top of the hill was sleep and then we had to come ^jiown^.

In other words, if we wanted to go back to quarters during the day, it

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was like three trips a day that you had to go up and down. But we were living very posh there.

There we had a French Red Cross woman, Croix Rouge Française, attached to us, and she was basically the interpreter, because, of course, all your help in any country where you go was /local civilians/— you see,

there were a thousand Americans in our outfit, between our doctors, nurses, and ?50 enlisted men, who were, of course, your ward men, and your ambulance men, and your motor pool, and everything it takes to

make a thing this large function. So there were a thousand of us alto­ gether, and so we had interpreters every place that we were because your civilians were your help, did the cooking, and the serving, the cleaning and all that, and in the cleaning of the wards. We did our own in our quarters, of course.

This French Red Cross woman who was attached to us— her name was Agnes— we devised the system of taking our patients on trips to Paris, and sightseeing around the countryside, and so forth. We had quite a thing functioning. We did it several days a week. And that again was part of my job— to go with them. Of course, the patients had to be issued a uniform, because they were in pajamas and robe. And I had to account for everybody, I mean I was responsible for them.

We would take them to the Eiffel Tower, and Notre Dame, and all this and that and the other thing. So at a very early stage in the game, of course, Agnes was reciting the scenery as we went by and telling them everything that was going on, you know, as we go along, and she was going to give them all the history of everything. I learned, I

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recognized the fact very early that the only reason they were in a uni­ form (laughs) was just to get out of the hospital; they were not out on a sightseeing trip— maybe one-tenth of them were interested in what we were trying to show them. So I caught on very quickly that you simply stood at the /front of the bus/.... We were on a bus, I don't know where we got it, it must have been a civilian bus because it had win­ dows, and it wasn't a truck, I mean you could see out, it was a regular bus. I learned that you synchronized your watches (laughs) and you said, "We will leave this point in exactly a half-hour," whenever it was. You had time to go to the Eiffel Tower, you had time to do this and that and the other thing. Well, of course, of them went to the local bars or chased the girls down the street, or something like this.

They didn't go with us at all. But they were back 'cause they knew the consequences if they did not report back, of course, then they

were AWOL /absent without leave/ and they wouldn't /want that/. So it really was quite an experience. I won't say *90%>,* possibly half of them, I guess I am exaggerating. But a certain number of them would go

with us and were very interested in the history of the place and inter­ ested in the fact that they were in Paree and they would probably never be there again in their lives; and the rest of them, of course, did the other.

We were there only a few months, I believe only from July to late September, something of that nature, and then we were ready to go home. They had this point system, I can't remember what it was. This is the Army I'm talking about. You see, we traveled with the Army, we did everything right with them. We were not Red Cross on our own. We just

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did everything with our own unit. There was some kind of a system, I

can't remember it all. At any rate, those who had been over the least time were to go direct to the Pacific— this was before V-J Day, and the various categories that there were, some went back to the United States on a furlough and then to go to the Pacific.

We were the longest over, we had by then been over for two years, so therefore we were the ones who were supposed to go directly home. We wound up being about the last ones home because we spent a couple of months in the staging area in Camp Philip Morris (laughs), and every­ body else was already */home/.* In the meantime, of course, the whole war was over and it was time for everybody to come home (laughs). And by the time the longshoremen's strike in the United States was over and we were able to be shipped */on* Vulcania/, we landed in New York City, came in on the Staten Island Ferry, I can still picture that. It was blustery and cold and it was Veterans Day, it was Armistice Day. It was November 11, 1945 when I landed. And then, of course, we had to stay a few days and have physicals, and then we finally could get home. So that by the time you */used/* accrued leave that was due you or how­ ever it was, I can't remember those details, I was officially dis­ charged in December, so I had actually been in exactly years in

service, and 27 of those months were overseas.

So, is there anything else you can think of that you want to ask me? Oh, I know one thing I do want to tell you. My co-worker— the girl that I mentioned who was so artsy-craftsy— and I, we got along so well, I will be seeing Mary in about a month from now. She lives in a suburb

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of Harrisburg, Pennsylvania, and I will visit her while I am up north here now on this trip. We have seen each other quite frequently. She married an RAF officer who is now deceased for over ten years. He came to this country, married her, worked here, and so forth. She had met him in Italy while we were stationed in Italy; he was there. And I will also be visiting in Lancaster, Pennsylvania, a man who was one of my patients who was blind and lost his right hand, and he and I became very friendly through the letter-writing.

I guess I forgot that part of it, didn't I (laughs) of what my duties were? That was one of the biggest things that we did. I am thinking in terms of only the group work that I did, but, of course, one of the biggest things, which I'm sure everybody knows, that the Red Cross girls did was write the letters for the patients. And in his case, because he was blind I was reading them to him, those he received from his wife. When he first was admitted he was not totally blind; he had what they call traveling sight, but that was lost in successive opera­ tions .

When he first looked at me he could very hazily make out the outline of my face. Ihe very first thing he said to me— when other patients on the ward, as I walked down, stopped me and they said, "Here's the Red Cross girl, Dick." And so I stopped and he said, "Get my wallet out of the table," which was a bedside table next to each cot. I said, "I don't need your wallet, Dick, I have nothing to sell you." He said, "No, no, I don't want my money." He said, "I want you to look at my wife's picture, I think you look like her." And I do. We are the same

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basic type. We have curly hair and wear glasses and /have a/ full fat face, and that sort of thing. I mean we are essentially the same type. So he and I became very close friends.

And after we were all back, we continued to write. I had done his letter-writing for him for all those months, and he was one who sailed back on the hospital ship with me from Italy. I continued to corre­ spond personally with his wife, Ruth, and so— I do n ’t know, 1946, 194?, somewhere along there— we met. They were in New England at that time, he was in Avon, Connecticut. They were having his training, his reha­ bilitation training of how she was to live with a blind person and what she did for him. And I went to visit them there at the hospital where they were. We just met each other on the highways we described our cars to each other, and license numbers, and so forth, and we walked up and introduced ourselves to each other. And that would be, what, push­ ing 40 years ago right now? (Laughter) We are still friends and we will be seeing them next month. So I think that's kind of an interest­ ing sidelight, that you finally have kept up with somebody. Of the

/other/ Red Gross girls, I have no idea; I have an idea they are all deceased. Ihen there was another one who was attached to us, not one of our originals. We original five stayed together. But then as we became a huge unit, like a 4000-bed hospital, we had others attached to us, but then they would go on to something else. And another one of the girls, who now lives out in California, Atherton, California, and

I saw her last summer when Ed and I were in California, and I saw her about ten years ago when we visited out there. Those are the only two with whom I have kept up. I think that's a pretty good record after

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40 years (laughs), to know anybody. W e ’re still just as good friends, (newspaper rattling in background) and Mary and I still have the same kind of taste, I mean, and we still get along very well.

It was a wonderful experience, it was something that /though/ there were a lot of hardships, I can't say that we lived poorly. We lived as well as anybody could live under our circumstances. It wasn't this country, but we were treated well, we were treated with great respect, and to me it was something that can never be taken away from you. When we first got there, I remember that we all admitted to each other about a year later, the very first experience we had when we really finally

set up, because, you see, we had been there several months before we really functioned as a unit, which, of course, was typical. But it had to be that way because the war itself was shifting, it shifted from this country to that country, and as it moved, of course, the hospitals had to go with it, naturally.

The very first day that we admitted patients in Caserta, Italy, here we are all with our little ditty bags, we are going to do what we had been taught to do at the American University in Washington (laughs), and that didn't mean one possible thing because they were seriously wounded men who didn't need any toilet articles, they didn't need anything. So we went up to our nurses in the wards and said, "What can we do to

help you," because our type of job there was no need for. They said, "I think the best thing you can do is help us feed the patients." So I was delegated to a very very large man; he probably wasn ’t as large as he appeared because he was in a total body cast, I mean right from

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the tip of his head right down, a total body cast. I guess he had a broken back or something. And just his mouth and eyes and nose were out. I had to spoon some food into ¿^is mouth/. I can remember one of the things they had to eat was beets; I can still see the beets drib­ bling down the body cast. As I did this, I thought to myself, "My God, Helene, why did you volunteer to do this?" It was just a horrible experience and I thought, "My word, I ’m into this." Then I thought, "Well, this is it, you asked for it, you ’re going to have to learn to live with it."

And we all admitted to each other about a year later that we all had the very same feeling. We thought, "Oh boy, we're civilians, we don't have to stay here. Let's all ask to go home right away." But it was a wonderful indoctrination, because it was probably one of the worst things that we could have happen to us. And it taught us, it brought back to us really why did we volunteer to serve. We volunteered because we wanted to be with the men, and we sure were. We were with those who had really given everything. You got so that you didn't see anything, you didn't see any of the horror, and after all, we were see­

ing the horror of /war *~f*.We were not on the front line, but we were awfully close to it. We lived in combat zone most of the time. By

that I mean we got free rations, the free cigarettes and the free beer ration, which meant that you lived in combat zone. So we really saw, and I think we realized that this is why we have given up a very com­ fortable position here in this country and volunteered to go into some­ thing in another country, and it wasn't difficult at all once you became indoctrinated to looking at the horror that you were seeing—

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with legs and arms and faces blown *J*and that kin wasn't difficult any more and you realized that your job there was to

help them, and to do what you could to make them as comfortable as pos­ sible and keep them in contact with their family. You were kind of the arm of the chaplain also, the Red Gross hospital worker was. I think they were in most cases. I think maybe Club people were too. But you did what they couldn't do. They only had two arms.

So, that's my story.

Q. Thank you very much, Helene.

END OF TAPE