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‘The girl and boy next door went to war.’
The experiences and recollections of medical personnel who served in the Vietnam War.

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Abstract

This thesis examines the life experiences of male and female Vietnam War veterans who served in the US Army Medical Department, before they were assigned to active duty in Vietnam. It endeavours to offer an insight into the factors which influenced their trajectories towards serving as medical personnel in Vietnam, and how they have engaged with that process. It interprets the personal testimonies of medical veterans in both autobiographical accounts and oral history interviews, and considers critical perspectives on autobiographies and oral histories as sources. Whilst approaching the material using gender as the primary framework for analysis, it also incorporates an intersectional approach to personal testimonies of medical veterans.
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Introduction

This M.Phil thesis serves as an introduction to a broader PhD thesis, which seeks to develop a critical understanding of the unique experiences of the men and women who served in the Vietnam War as part of the US Army Medical Department, both during the war, and as veterans. Oral historians have made a great deal of progress in documenting the previously untold stories of various groups who served in Vietnam. However there is still a gap in the field of research into the life experiences of Vietnam veterans, as there has been no comprehensive analysis on the impact the war and its aftermath had on the doctors, surgeons, nurses, and enlisted medical soldiers (enlisted medics) who served.¹

Andrew Weist has pointed out that in the high stakes academic struggles for ownership of the Vietnam War, sometimes the simple and eternal stories of the soldiers and Marines who fought it are lost, but what of the stories of those who fought the war on a different front? If the Vietnam War was a minority experience for America’s largest ever generation, then medical service was even more so. The Vietnam War itself was ‘an enormous cataclysm that killed some three million people,’ including the 58,000 Americans whose names are inscribed on The Vietnam Veterans’ Memorial, or ‘The Wall’, in Washington D.C. Yet the role of the dedicated medical staff who treated the 303,704 Americans who were wounded as a result of enemy action, and whose contributions to the medical evacuation system in Vietnam meant that 82 percent of those wounded in action survived,

¹ US Army Medical Department comprises the Army’s six medical Corps of officers and enlisted medical soldiers, including the Medical Corps and the Nurse Corps.
Keith Walker and Kathryn Marshall have focused on American women, Yvonne Latty and Wallace Terry focused on black veterans, Craig Roberts only interviewed Combat Medics, and Andrew Weist interviewed ground combat troops specifically. (see bibliography for full references)
Enlisted Medical Soldiers refers to hospital corpsmen and combat medics.
seems to have been erased from public memory, and often academic research, on
the war.²

The Medical Department is an interesting case study for a comparative study of the
American experience of the Vietnam War, as this sample will attest, because
medical personnel represented a diverse cross-section of American society. This
was the only branch of the military, in this era, in which male and female
personnel, from a variety of class, and racial-ethnic backgrounds, worked
alongside each other. In this context, the comparative experiences of men and
women will be explored, because whilst male Vietnam veterans have been visible,
if not well served, American women who served in Vietnam are scarcely
acknowledged to exist, even since the dedication of the Vietnam Women’s
Memorial in 1993.³

Whilst only 2.3 percent of Vietnam veterans are women, 80 percent of those
women served as nurses. Many combat nurses contended that the endless
procession of mangled bodies they saw upon the operating was the worst of the
Vietnam War. It was the duty of doctors, surgeons, and nurses in hospital units to
put broken bodies back together again. They worked alongside each other in
mobile and fixed surgical, evacuation, and field hospitals across Vietnam, and their
oath dictated that they treated the sick and wounded, whether they were
American, Vietnamese, or Vietcong.⁴

This was the largest generation because between 1964-1973 over 50 million Americans turned eighteen,
³ Cynthia Enloe, Does Khaki Become You? – The Militarization of Women’s Lives (Boston: South End Press,
1983) p109
In contrast, enlisted medical soldiers travelled with platoons in the field, providing immediate medical care to the injured soldiers. They usually had little more than six to eight weeks of medical training, and had often been channelled towards medical service from other branches of the service, had been drafted, or were ‘forced volunteers.’ Their job was to control bleeding, bandage wounds, provide essential blood and fluids, and sedate the patients until they could be evacuated. As Craig Roberts argued ‘the system owed its success to the medic in the field. It was there...that medical aid counted most. And it was there that the courage and dedication of the “Docs” was continually exhibited.’ The majority of these men were as young and frightened as the infantrymen they accompanied, and more than 1,100 enlisted medics were killed in action during the war. The experiences of medical veterans in Vietnam were distinct from soldiers, and arguably more traumatic, because as non-combatants tasked with saving lives rather than taking them, medical veterans witnessed the devastating human cost of war first-hand.5

Oral history and autobiographical sources provide the foundation of evidence for this thesis, largely because there is little documentation of the experiences of medical veterans, particularly their lives before Vietnam. The format of an autobiography and the in-depth interview ‘encourages individuals to explain how they viewed their circumstances, to define issues in their own terms, to identify processes leading to different outcomes, and to interpret the meaning of their

5 ‘Forced Volunteers’ were those men who volunteered for medical duty to avoid being drafted into a less desirable branch of the military. Andrew Weist, *Vietnam: A View From the Frontlines*, p14
John T. Greenwood and F. Clifton Berry Jr., *Medics at War – Military Medicine from Colonial Times to the 21st century* p140
Craig Robertst, *Combat Medic Vietnam* pxvii
John T. Greenwood and F. Clifton Berry Jr., p140
lives to the researcher, rather than merely identifying the outcomes.’ Therefore these sources offer the key to our understanding of how the war and subsequent life experiences of this marginalized, silenced, and largely forgotten group of veterans have impacted upon the formation of their identities, and the ways in which they have reflected upon, constructed, and told coherent life-stories.

This thesis interprets evidence using gender as the primary theoretical framework and draws upon oral histories and autobiographies from a sample group of medical veterans as a key evidence. However, it also acknowledges the limitations of a purely gendered approach and the source material’s reliance on memory. It thus also employs intersectionality theory, and critical perspectives on the construction of veterans’ personal testimonies.

It addresses a number of questions related to ways in which medical veterans have engaged with their trajectories towards serving in the Medical Department in Vietnam. By applying a theoretical analysis of the source material throughout, it also discusses the narrative patterns which have emerged in veterans’ accounts of why they joined the military, and what expectations had informed that decision.

Chapter one examines why the men and women in this sample group decided to pursue careers in either medicine or the military. Chapter Two then analyses how medical veterans’ have engaged with their childhood dreams and ambitions to become nurses or soldiers, and the role models that inspired those dreams.

Chapter three investigates how medical veterans interpreted military service and US foreign policy before they enlisted, and how their understanding influenced

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6 G.H. Cuadraz and L. Uttal, ‘Intersectionality and In-Depth interviews: Methodological Strategies for Analyzing Race, Class, and Gender’ in *Race, Gender & Class*, vol. 6 No. 3 (1999) p160
their decisions to join the military. Chapter three additionally analyses the ways in which medical veterans have engaged with their understanding and opinions on the war in Vietnam.

I. The Sample Group

This thesis draws evidence from a database of oral history and autobiographical sources collected over the past year. It is composed of thirty-six medical veterans who served in the US Army Medical Department, and performed non-combatant medical duties during the Vietnam War. The demographic composition of the sample is intended to represent a cross-section of the female Nurse Corps, and the male personnel who served in the Medical Department.

The gender balance is nineteen women to seventeen men, because, whilst women did not reflect 50 percent of the Medical Department, this study is interested in the role of gender in shaping medical veterans’ life experiences and the construction of their life stories. All of the women served as commissioned officers in the Nurse Corps, and the majority served in the Army Nurse Corps (ANC), except for Olivia Theriot who served in the Air Force Nurse Corps. Elizabeth Norman correctly concluded that combat nurses were predominantly young, white and from working- and middle-class backgrounds. Therefore fifteen nurses in this sample are white, three are African-American, and one identified herself as mixed race. To accurately mirror combat nurses’ class and educational backgrounds, the majority in this sample had achieved a three-year diploma in nursing, as opposed to a degree. Nurses had to be twenty-one to serve in a combat zone, and thus the majority in this sample were aged between nineteen and twenty-six years old when they enlisted. Approximately 60 percent of Vietnam nurses had less than two
years of nursing experience before they went to Vietnam, and so eight nurses were fresh out of nursing school when they joined the military, including three who had been part of the Army Student Nurse Program.\(^7\)

The male component comprises four doctors, one surgeon, and twelve enlisted medical soldiers, who either served as corpsmen or field medics in the Army, Navy and Marine Corps. In general, the men who served as enlisted medical soldiers, reflected the demographic composition of 80% of the military in the Vietnam era. They tended to come from poor and working-class, blue-collar, and disproportionately non-white backgrounds. Therefore in this sample of twelve enlisted men, four are African-American, one is Hispanic, and the rest came from white racial-ethnic backgrounds. All of them came from working-class backgrounds. Most had just high-school education and two were college dropouts, which reflects the 80 percent of enlisted soldiers who had no more than a high school diploma. Although only some enlisted soldiers disclosed their age when they went to Vietnam, those whose ages could be discerned were between eighteen and twenty-one years old when they were deployed. This sample also recognises that some medics did not voluntarily join the military, and contains volunteers, draftees, and ‘forced volunteers.’\(^8\)

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The doctors and surgeon in this sample all served in the Medical Corps as commissioned officers. These men had attended college, followed by Medical School and came from wealthier, middle-class backgrounds, than the enlisted medics and nurses. The Medical Corps was also predominantly white, which was a reflection of the poor access to education, the economic limitations, and racial discrimination faced by non-white men in post-war American society. James Evans recalled his Medical School being ‘pretty homogenous in the sense of our backgrounds were pretty much the same. I don’t remember any African-Americans. There were a few Hispanics.’ All five doctors in this sample are white, middle-class males. Doctors were also a few years older than nurses and enlisted medics, Byron Holley, for example, was twenty-seven when he began his tour of duty. Only two of the five volunteered for military duty, three were drafted for their medical skills.  

The sample is composed of two different types of personal narrative. This includes six autobiographies, and oral histories which are broken down into the following subcategories: seven digitised interview transcripts; four oral history interviews which have been videoed; and nineteen sources from edited oral history collections. The purpose of including different forms of personal narrative was to attempt to limit the potential drawbacks of each, and to offer a nuanced, comparative analysis of the construction of life stories and narrative patterns. The relative advantages and limitations of each source will be considered.

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9 Commissioned Officers in the Medical Corps had to hold an M.D. (Doctor of Medicine) or D.O. (Doctor of Osteopathic Medicine) qualification in medicine.
Interview with James Evans, The Vietnam Archive, Texas Tech University, p7
The overall aim of this thesis is, firstly, to introduce Vietnam-era medical veterans, and to offer an impression of their diverse backgrounds and the multiplicity of their identities. Secondly, it aims to analyse the ambitions, motivations, expectations and life experiences which both influenced their decisions to enlist in the military, and their trajectories towards Vietnam.
Chapter One

Gender and Career Decisions

There is a clear distinction between women’s and men’s experiences of entering the workforce, as either medical professional or by enlisting in the military, as all of the women in this sample served in Vietnam as nurses, whereas the men served either as qualified doctors and surgeons, or enlisted or were assigned to the US Army Medical Department after joining the armed forces. Therefore this chapter explores what motivated American men and women to pursue careers in medicine or the military prior to being assigned to active duty in Vietnam. However theoretical issues arise when examining the ways in which individuals have interpreted their motivations and ambitions in autobiography and oral history sources. There is a complex relationship between individual agency and dominant ideologies. Medics’ professional motivations and decisions were gendered, however the influence of gender roles is intertwined with that of class, and also racial-ethnic background. Therefore this chapter will consider the framework of intersectionality in its analysis of how gender roles espoused in Cold War American society shaped the motivations, expectations and experiences of young male and female medics bound for Vietnam.

1.1 Theoretical Issues

It is key to analyse the ways in which medics have engaged with class, and the class with which they have identified their past selves, when discussing their career decisions. However, class was a complex social construct in the Cold War
United States, reliant upon neither economic circumstances nor social standing alone. This study reveals that whilst male and female medics came from a variety of working-and middle-class backgrounds, the process by which the authors of autobiographies and interview respondents have engaged with their class identity, then and now, is both fluid and complex.

It is no simple task to examine class consciousness as it was expressed by Vietnam veterans featured in oral history collections, not least because full interview transcripts are not always available to the reader, and the available sections of the interviewee’s testimony were selected at the discretion of the collection’s editor. Editors are free to employ what Stewart O’Nan refers to as ‘conscious selectivity’ in this process, 1(p299 O’Nan) meaning that the reader may only view the subjects responses through the selective lens of the editor and what he or she deemed to be significant or of interest. For instance, this sample draws upon evidence found in collections compiled with the intent of communicating the experiences of particular groups within American society that the editors felt had been overlooked or ignored. Both Kathryn Marshall’s *In the Combat Zone* and Keith Walker’s *A Piece of my Heart* focus on the experiences of female Vietnam veterans, and therefore, as one would presume, Marshall’s and Walker’s research was framed by the concept of gender. Whereas Wallace Terry and Yvonne Latty conducted interviews exclusively with African-American servicemen and women, and thus their research was framed by the concept of race and experiences of racism in American society.

The authors of some of the autobiographies in this sample, on the other hand, tend to refer to their class identity specifically, which suggests that the narrative form of the autobiography perhaps offered the Vietnam medical veteran a better opportunity to reflect upon the social class which they identified their past self with. For instance, Lynda Van Devanter wrote that as a child she had imagined herself growing up to be a celebrated actress or singer, but that few ‘middle class’ suburban children, like herself, were encouraged to enter those types of professions. D.T. McGuff also referred to his class in describing his background, recalling that he was “a typical baby boomer, raised in a good, middle class family.” Such comments could imply that these authors were aware of a class identity from a young age. Devanter’s parents, from whom she might have learned to view herself in such a way, seemed to value their class status in encouraging their daughter to pursue a career befitting her social status. Alternatively, McGuff provided an example of an American whose class consciousness may have been awakened by reflection later in life, as he made the connection between middle class identity and the suburban lifestyle of his youth.²

1.1.1 Class and Higher Education

Nevertheless not all authors explicitly refer to their social or economic class and therefore other components of their personal narratives must be analysed in order to determine their background. One such indicator could be higher education. Whether they attended college and were able to pursue degree programs in either nursing or medicine makes it possible to gauge whether they came from families

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McGuff, D.T. *So that others may live – A medic’s battle to save lives* (Bloomington, Indiana: Author House, 2005) p5
who encouraged a college education, and for whom tuition was economically feasible. For instance, in 1967 before he was drafted Byron Holley was working as a doctor at Baptist Memorial Hospital in Memphis, Tennessee. Relatively few poorer or blue-collar adolescent men were able to go to medical school and train to become doctors. Schooling can also indicate social class, for example Lynn Hampton was evidently raised in a middle-class household; she described feeling relieved when she moved to a single sex catholic boarding school where “everyone looked, acted -and smelled- civilized,” a small school where the girls enjoyed lots of “shenanigans…the stuff of which Walt Disney movies are made.” Hampton’s happier memories of attending a small privately funded high school in Florida likely influenced her view of education and helped to encourage her to enrol in college.³

Access to higher education is a problematic social indicator when analysing class identity and consciousness in the post-war period. The cost of college tuition in the United States has soared much faster than the average rate of inflation since the Vietnam War era, however, the extortionate rates of tuition in the 21st century do not accurately reflect those of the United States in the late 1950s to 1960s. In 1940 just 16% of American college aged youth could afford to attend an institution of higher education, and both private and public universities restricted the admission of Catholics and Jews. However as a result of efforts by the Roosevelt administration to make education more financially accessible, the economic prosperity and the introduction of the GI Bill after WWII, college education became increasingly accessible to the average American. Kenneth Heineman insisted that

the greatest increase in the number of college students which occurred after WWII took place at state institutions as opposed to more elite and prestigious private universities such as Columbia or Harvard. State institutions had been transformed into academically comprehensive universities after WWII at universities such as New York State, Michigan State or Kent State, Ohio the student body was overwhelmingly made up of working and lower-middle class students.\(^4\)

However, for all the higher education was becoming increasingly available to the middle classes, many medics from low-income, working-class backgrounds could still only dream of college, and although some were able to find summer jobs to supplement their parent’s financial contributions, tuition fees remained a burden even for those enrolled in college. Mike Stout recognised that he needed to go to college if he were to get ahead in life, and so he enrolled in Oklahoma State University. However Stout often had to take breaks from his studies in order to find work and earn enough to cover his tuition costs.\(^5\) It was on one of these breaks from college that Army recruiters caught up with Stout and lured him away from college.\(^5\)

The military recognised the hunger for education and social betterment amongst America’s youth, and so offered some educational incentives to serve. The GI Bill had granted financial assistance to male veterans wishing to achieve a college degree since World War II, making higher education accessible to far greater numbers of men. Similarly, the Army Nurse Corps (ANC) endeavoured to boost recruitment by implementing educational incentives to serve, which increased access to nursing school for working-class women. Initiatives such as these


\(^5\) Interview with Mike Stout in Craig Roberts *Combat Medic – Vietnam* (Pocket Books: New York, 1991) p18
combined with the changing economic climate in the United States helped to provide greater access to medical training and offered many working-class Americans alternatives to traditional blue-collar professions and the opportunity to pursue a college education.

Nevertheless, the educational experiences of Vietnam War era medical personnel were gendered. Nurses had all received professional training at nursing school, whether they had attended nursing school and achieved a diploma or had taken the more expensive route and had graduated from university with a nursing degree. The majority of women in this sample group had pursued nursing before deciding to enlist in the military, and before they ever conceived of going to war. All of the women in this sample served as qualified nurses and thus held the rank of an officer.

On the other hand, only male personnel who would be enlisted into the military as doctors or surgeons tended to have graduated from institutions of higher education, such as future battalion surgeon Byron E. Holley, Navy doctor Edward Feldman and Army doctor James Evans. Enlisted medics tended to have little education beyond high school and perhaps a few college modules by the time they joined the service. Once enlisted these combat medics and corpsmen received at least six to eight weeks of formal medical training. In fact, whilst doctors and surgeons had chosen to study medicine, many of the enlisted medics, rather than having specifically sought out medical duty, had found themselves assigned to the Medical Department or the Marine Corps’ Field Medical Service School. Some had only volunteered for the Medical Department to avoid being drafted into a less desirable branch of the service, such as the infantry.
Medical personnel thus came from a variety of different socio-economic backgrounds prior to receiving their training. Yet overall a higher proportion of young women actively chose to pursue medical professions than was true of their male counterparts in this sample. A greater number of young men chose to join the military without specifically aspiring to be trained in medicine. In general, women were more likely to have chosen medicine, whereas men were more likely to have chosen the military.

1.2 Femininity and the American Workplace

Whilst women were not expected to offer themselves for military duty, they had been steered towards nursing as a gender appropriate career. Feminist oral historian Joan Sangster believed that women’s oral histories need to be contextualised, and that the dominant ideologies which shaped women’s worlds in a specific context must then be analysed in order to understand how women understood, negotiated and sometimes challenged these dominant ideologies. Sangster found, in her research on women workers in the 1930s, that ‘ideals of female domesticity, motherhood,…and notions of innate physical differences, for instance, were both factors moulding young women’s sense of their limited occupational choices.’ This section argues that whilst Vietnam era nurses were not constrained by the dominant ideology which had encouraged women to return to the home, their career options were restricted to jobs which were associated with the nurturing, caring, and emotionally sensitive model of femininity.6

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To contextualise Vietnam nurses’ career decisions, by 1960 nearly a third of women in the United States worked outside of the home. However, one consequence of the movement of large numbers of women into the labour force was that ideas about women’s proper place in society only became more entrenched. The effect of reactionary sentiments towards women’s place was twofold. Firstly, some women felt pressurised by social expectations to end their careers when they married. However a great many, including those women who worked before they had children, also felt that the sexual division of labour within the home was the right and natural order. Even though by 1960 37 percent of women worked, and 30 percent of married women worked, few thought of themselves as having ‘careers’. Although attitudes towards married women working outside of the home had changed, the ideal family model was still the traditional male breadwinner- female homemaker dynamic. In the early 1960s few women, even among the large working minority, questioned this stereotype. Secondly, a large proportion of the new jobs designed for women after WWII were concentrated in the service industry, including: clerical work, low level jobs in education, health care, social services, waitressing and stewardess roles, all of which became associated with women’s traditional serving and nurturing responsibilities within the home.7

It is also crucial to point out that many of the gender appropriate jobs on offer, were reserved for white women. Career opportunities were even more limited for

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Mitchell K. Hall, Crossroads p99
young African-American women in this era. In 1960, only nine percent of the positions in the growing, female dominated clerical and sales sector were occupied by black women, as opposed to white women who occupied forty-one percent of these jobs. Working-class, black women remained disproportionately employed as private domestic servants, particularly in the southern states. None of the black nurses in this sample pertained to have considered an alternative career path in their youth. This was perhaps because, as mentioned in the section on theoretical issues, oral historian Yvonne Latty focused on their experiences of going to war as African-Americans, rather than investigating the intersectionality of race, class and gender in steering Elizabeth Allen, Olivia Theriot and Marie Rodgers towards careers in nursing. Another possible reason is that all three of these nurses went to nursing school before the passing of the Civil Rights Act of 1964, meaning that it was still legally permissible for employers and institutions to enforce segregation. Thus, to gain a nursing diploma was one of the few viable professional options which would allow black, working- and lower middle-class women an alternative to working as domestic servants in white households, which many of their mothers and grandmothers had done.8

In contrast, Lynda Van Devanter, who came from a white, middle-class home, described feeling that nursing was in-keeping with her Catholic upbringing because he had always been encouraged to serve her family, community, church, country, and indeed all of mankind. Devanter had volunteered as a “pink angel” at Georgetown Hospital in Washington D.C. as a child, and had also cared for her sickly mother, and she later remembered “I was a natural caretaker. Nursing

seemed only logical.” Devanter has composed her journey from caring child to professional nurse as a logical one, based upon both her class status, experience and her character. Charlotte Linde argued that, ‘One of the most powerful types of adequate account for choice of profession is character. Speakers usually take character traits as a primitive, using them as obvious causes for career decisions, with no further explanation of how those character traits came about.’ In this case, Devanter’s account privileges character over opportunity as a coherence structure, and thus offered little insight into her opinions on the limitations of her gender.9

However, not all nurses saw nursing as natural evolution based upon their character, many were aware of their limited opportunities available to women, especially working- and lower middle-class women who could not afford to go to college. For example, Hannah Wynne remembered:

It became pretty evident that—oh, my family was not well off, is not well off. Back then, I’m talking about—what am I talking about—in the ‘50s, early ‘50s, it was girls could be schoolteachers, they could be nurses, or they could go to work for the telephone company or something like that. That’s essentially what was presented to us. I knew I didn’t want to be working at the telephone company and I didn’t want to be a schoolteacher, so I opted for nursing.10

Wynne described the potential careers presented to her as a girl growing up, and concluded that nursing was merely the most appealing of very few options.

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10 Interview with Hannah Wynne, The Vietnam Archive, Texas Tech University  p1
Jill Mishkel also claimed that nursing was never her true calling, but she opted for nursing school because she did not want to be a teacher or a secretary. Marsha Jordan also trained as a nurse so that she could avoid a life which revolved around sitting behind a desk or teaching children. Leslie McClusky acknowledged that as a woman nursing seemed like something to fall back on because “the other option was teaching or secretarial work. And then you got married. And that was the end of it.” Such responses demonstrated that while some felt that nursing was their calling, many more did not but recognised and even seemed a little frustrated that as women their opportunities were more limited. All three of these women served in Vietnam after 1968 and therefore were more exposed to debates ignited by the resurgence of Second Wave Feminism and the women’s liberation movement in the United States. Perhaps Mishkel’s, Jordan’s and McClusky’s comments reflected a growing awareness of the limitations of the ‘glass ceiling’ facing working American women.11

By the mid-1960s women were becoming more aware of the constraints facing them, and an increasing number sought to challenge the expectations that they were to marry, bear children and find fulfilment in motherhood and domesticity. Some women’s key motivation to become nurses was to avoid being thrust straight into domestic life like many of their peers. Mary Robeck, for example, joined the Nurse Corps because she simply did not want to “do the married after high school thing.” Religion also seemed to have played a significant role in many nurses’ opinions on the options available to them after they completed their education. Marilyn Roth came from a Jewish community in Brooklyn and she explained

“Jewish women don’t join the Army. [But] I couldn’t afford to go to college or marry a doctor or lawyer, so I decided to join the Army.” Roth was breaking the mould, because she was unable (or perhaps unwilling) to marry a professional Jewish man, which could suggest that Jewish women were presented even fewer options out with their own community in the 1960s. Mary Lu Brunner had attended a Catholic girls’ school, an environment in which she commented “I don’t remember being offered a whole lot of other ideas [than nursing]...I just said ‘Well I’m not ready to get married. Don’t want to be a nun.’” Regardless of their faith, nurses had been born into a post-war world in which women’s aspirations were restricted and channelled towards eventually bearing children and becoming housewives.12

1.2.1 Marital Status

Women were actively discouraged from pursuing or maintaining a career once they found a husband, especially if they had young children. The nurses in this sample were aged between their nineteen and their mid-twenties when they joined the military, and with the exception of Lynne Hudson, who was married before she began her tour of duty, all of the nurses were single, which the ANC preferred. Mary Stout was in a relationship with Carl Stout (who would become her husband) before her tour, and she admitted that she requested duty in Vietnam in order to follow him, because, “I thought it would be important for us, for our life together, that I had that experience too.” Stout might have been legally single, but she still

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considered the implications her career decision might have upon her potential marriage, suggesting that she never would have volunteered if Carl were staying home and that his professional life was prioritised above her own.  

Some of the male medics in this sample were either in long-term relationships or married before they went to Vietnam. The median age at first marriage for men was 22.5 years in 1964, and remained so in 1968, therefore it is not surprising that, as doctors in their mid-twenties, Edward Feldman and Robert Rankin were both married before going to Vietnam. On the other hand, corpsman John Bennett was still a teenager when he went to Vietnam, yet he too was already married. Whereas the median age for women at first marriage in 1964 was 21 years, falling to 20.5 years in 1968. The majority of nurses in this sample were actually older than the average age at which American women tended to marry in the 1960s. It appeared to be less common and less socially acceptable for married women to have careers and serve in the military.  

1.2.2 Economic Motivations

Nursing was considered both a feasible and economically viable career for young women and many women elected to go to nursing school out of practicality or economic necessity. Lily Adams went to nursing school prior to enlisting but confessed that it had not been her first choice; Adams knew that college was not an option for her and thus “it was down to either being some kind of teacher or a nurse.” Saralee McGoran said she had dreamed of becoming a doctor as a child, but her family could not afford to send her to medical school and so she was

13 Interview with Mary Stout in Kathryn Marshall, *In the Combat Zone* p84
forced to settle for nursing school at the Albert Einstein Medical Centre in Philadelphia, where a three-year nursing course only cost her family four hundred and fifty-five dollars.\textsuperscript{15}

Penny Kettlewell’s grandmother advised her, as many others’ families likely did, “Be a nurse. You’ll always have a job. Then you’ll be able to do what you want because you’ll be able to make some money.” Kettlewell’s grandmother was part of an older generation who valued women’s economic independence having lived through the hardships and mass unemployment of the Great Depression. Sara Evans described the grim years that followed the 1929 stock market crash as “a way of life that would scar a generation.” For many nurses the generation gap between their mothers and grandmothers became apparent in their differing opinions on their daughters working as nurses. Many of the grandmothers of Vietnam-era nurses had faced the realities of poverty, eviction and starvation, and during the Great Depression many married women were forced to seek employment as their often unemployed husbands were no longer the breadwinners.\textsuperscript{16}

In contrast, nurses’ mothers had married and raised families in the economically buoyant years following WWII. The 1950s was an era during which women went back into the home. Society and popular culture glorified motherhood, subservience and domesticity as the pillars of modern American womanhood, rather than economic independence and professional success. A child of this generation, Leslie McClusky claimed that she was from a “very traditional” family and that she did not know any women who worked outside of the home. Nursing did indeed allow women both an economic safety net and enough flexibility to

\textsuperscript{15} Interviews with Lily Adams and Saralee McGoran in Kathryn Marshall, p206 and p244
\textsuperscript{16} Kim Heikkila, \textit{Sisterhood of War: Minnesota Women in Vietnam} p21
Sara Evans, \textit{Born For Liberty} p198-201
raise a family. Therefore in theory, a nursing career could allow women to abide by the wishes of both generations.\textsuperscript{17}

However, to conclude that this model of womanhood was both desirable and accessible to all American women, and that it is the kind of life they envisioned for their daughters, is too simplistic. For one thing, the divorce rate in the United States also reached an unprecedented high in the late 1950s and early 1960s. Such a conclusion would also further privileges the hegemony of white, middle-class women’s life experiences. Not all Americans could gain access to the domestic ideal characterised by affluence, located in suburbia, and epitomized by the white middle-class family. Many nurses from working-class white families remembered their mothers working when they were children. For example, Ann Powlas’s mother had worked in a hosiery mill, Jill Mishkel’s had worked in a factory, and Saralee McGoran’s mother had been employed as a telephone operator. Jacqueline Jones has also pointed out that for most black women, regardless of their class, work outside of the home seemed to form an integral and respected part of the female role in family and community life.\textsuperscript{18}

1.3 Masculinity and the Workplace

This section investigates the ways in which the young American men in this sample were subject to pressures from both their families, and wider American society, (more specific)in the post-war era to enter sex-typed careers, in either medicine or the military, which would allow them to adhere to certain models of

\textsuperscript{17} Interview with Leslie McClusky in Kathryn Marshall p52
Kim Heikkila, p21

\textsuperscript{18} Elaine Tyler May, \textit{Homeward Bound: American Families in the Cold War Era} pp xv-xviii
Jacqueline Jones, \textit{Labor of Love, Labor of Sorrow}, p269
masculinity. While the concept of gender is invaluable to analysing the influence of models of masculinity on young men in the Vietnam War era, the gender process cannot be understood independently of class and race-ethnicity either. In order to analyse the careers decisions of male Vietnam medics one must acknowledge the role of intersectionality. There were multiple, conflicting models of masculinity in American culture, and the models adhered to by Vietnam medics were drawn not just from modes of masculinity, but also from class and racial-ethnicity. Therefore this section argues that male Vietnam medics can be loosely categorised as adhering to two different and evolving models of masculinity: the ‘breadwinner’ and the more conventional soldier model.¹⁹

This thesis does not employ the theoretical framework of ‘hegemonic masculinity’, in the sense that it does not conclude that there was one dominant and ‘most honoured way of being a man’ in the specific historical and cultural context of the post-war United States. On the contrary, the predominant model of American masculinity seemed to be splintering or imploding from the 1950s on as the effects of the baby-boom, economic prosperity, and the so-called “feminizing” effect of consumerism restructured both the American workplace and family life. Yet neither the breadwinner model, nor the soldier model appear to have emerged from these changes as the hegemonic model of masculinity. As Penny Summerfield highlighted, discourses of masculinity tend to be fractured and insecure. The rising divorce rate, accompanied by the mass movement of women, particularly married women, into the workforce had been slowly eroding the sentimentalised notion of

¹⁹ Teresa Amott and Julie Matthei Race, Gender, and Work: A Multicultural Economic History of Women in the United States (Boston: South End Press, 1996) pp13-14

Penny Summerfield references the work of Bronwyn Davies and Graham Dawson in Reconstructing Women’s Wartime Lives (Manchester: Manchester University Press, 1998) p13
the ideal nuclear family and the breadwinner model of masculinity. This model, characterised by the sexual division of labour within the home, was unattainable for many working-class, lower-middle class, and non-white families, and was becoming increasingly irrelevant to large groups of American society.

The soldier model, on the other hand, did not achieve hegemony for the Vietnam generation because, despite the predominant and glorious depiction of the soldier model in American popular culture, the young men of the Vietnam generation did not have the same unifying, collective experience of fighting a just war. Andrew Weist has highlighted that, for draftees and volunteers alike, service in Vietnam was very much the exception for the baby boom generation, whereas nearly every male of military age had served in some meaningful capacity in WWII. For this generation, the lines of battle in this Cold War were also more ambiguous, Gary Gerstle went so far as to call this a ‘virtual’ war against the Soviet Union.20

The availability of either of these models was very much dependent on class and racial identity. For one thing the developing breadwinner model in the post-war period could only be fulfilled by white, middle-class men, who could afford to adequately support themselves and a family. In contrast the more conventional soldier and model of American masculinity, as personified by John Wayne’s characters, tended to be adopted by young white and black working-class men with more limited job opportunities. This model had been more appealing to many enlisted medics, partly because of their class backgrounds meant that they could

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20 R. W. Connell and James W. Messerschmidt ‘Hegemonic Masculinity: Rethinking the Concept’ Gender Society 2005; 19; 829, p382
Penny Summerfield Reconstructing Women’s Wartime Lives, p13
not afford the college education which tended to be a requirement to become a male breadwinner.

However, class was not the only determinant, the age of enlisted medics when they joined the military was also significant. In this sample D.T. McGuff and Mike Stout enlisted voluntarily and they were both just nineteen years old when they began their tours of duty in Vietnam. Therefore it is unlikely that these teenagers were thinking about establishing careers, or starting families when they decided to join the military, unlike men such as Byron Holley who were a few years older and had already been through college when they decided to apply for Medical School.

Of course, there are both exceptions and incidences of overlap in these patterns. For instance, Doctor Edward Feldman admitted he had dreamed of joining the Marine Corps, which will also be examined. On the other hand, corpsman Michael Patrick Felker had no desire to join the military, and he admitted to feeling vulnerable because he was not a ‘macho’ type of man. Within this sample the soldier model of masculinity does appear to have been the predominant influence upon young American men, but this development is merely reflective of the demographic composition of the male Vietnam era medical personnel, rather than the hegemony of the soldier model. In order to maintain an efficient system of medical support, in hospitals and in the field, the Medical Department assigned far more enlisted medics to active duty in Vietnam, the majority of whom were young, working-class, and more often non-white.21

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21 Interview with Michael Patrick Felker, Veterans History Project (American Folklife Centre, Library of Congress)
Interview with Edward Feldman, The Vietnam Archive, Texas Tech University
1.3.1 Breadwinner Model

It appears that the white and middle-class doctors in this sample were planning their careers, and the lifestyle and family which would accompanied them, when they decided to apply for Medical School. They had been steered towards careers in medicine, partly to fulfil their own ambitions, but also to fulfil the ambitions their families held for them. Working as a doctor would allow young men access to the class and gendered benefits of such a respected and well-paid profession, they could become breadwinners. Barbara Ehrenreich highlighted that in the 1950s and 1960s psychiatrists theorised that ‘marriage- and, within that, the breadwinner role – was the only normal state for the adult male. Outside lay only a range of diagnoses, all unflattering.’ Ehrenreich reasoned that success, masculinity, and being a good provider were too tightly intertwined for men of adequate economic status to give up the last without compromising the first two.22

Becoming a doctor offered the potential to not only elevate social status, but almost guaranteed that white, middle-class men such as Byron Holley and Robert Rankin good marriage prospects. American men were also expected to become husbands, fathers and providers. Enjoying and presiding over an idealised American family was considered by many young men to be their major ambition, rather than responsibility. However, for men this family life could coincide with professional aspirations or could be delayed until men had achieved professional success.

Drawing upon what Byron Holley wrote in the prologue to his autobiography, Holley already had plans for a medical career and marriage all worked out before he was

drafted in 1967. He recalled that during his internship at Baptist Memorial Hospital and he had met and fallen in love with a nurse from Arkansas named Sondra Dobbs. Holley remembered being convinced that they would marry as soon as he finished his internship, then he would spend his next three years of residency specializing in eye surgery. In contrast to those who aspired to the soldier model of masculinity, Holley described his horror when he received his draft notice, he wrote, ‘Well, it’s amazing how one letter from Uncle Sam can change your entire outlook on life!...Becoming a doctor has almost been a lifelong dream, and now it may become my death warrant.’ Holley remembered being anxious about the impact serving in Vietnam would have upon his life plans, he wondered whether Sondra would wait for him, and he questioned, ‘If I do survive the war, will I be physically and mentally competent to pursue my chosen field of eye surgery?’ Most of all, Holley was afraid that serving in a war would ruin his career and marriage ambitions, essentially denying him the breadwinner model of masculinity.  

It seems like aside from personal ambitions, some middle-class men were also subject to pressure to prove themselves by attaining a college education and fulfilling the ambitions their families held for them. Many white, middle-class parents believed that higher education was a means to achieve upward social mobility, and therefore pushed their children to apply to college. Robert Rankin remembered how his family had influenced his decision to pursue medical school:

No one in our family had finished college before. Dad and mother both started but dropped out for various reasons before they finished. So dad was just happy I was going to college. Mother died when I was seven so she had

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no influence directly on what I did professionally. But her sisters and brothers were all very strongly encouraging me to go to medical school and so I did.

In contrast, Byron Holley seemingly inherited his desire to become a doctor. His great-grandfather had been a well-regarded physician in Tampa, Florida. Holley recalled poring over his medical texts and dreaming of entering the field of his ancestors. These men’s accounts reflect the influence of both a pride in family history and the esteem with which American society regarded physicians.24

Some middle-class men were not actively encouraged to pursue careers as doctors, nor were their families always happy to bankroll their sons’ ambitions. Edward Feldman was born into a Jewish household in Manhattan, to a college-educated father who managed a textile company. Feldman mentioned that while his upbringing was modest, he and his elder brother both attended the College of Pharmacy in New York, and that he was able to study Pharmacy at college and save up to purchase his own car. Despite the evidently middle-class character of Feldman’s upbringing his parents were not keen on the idea of him applying for Medical School. According to Kenneth Heineman, some middle-class parents did consider sending their children to college a wasteful endeavour and even an indication that they were too lazy to work. However, Feldman attributed his parents’ concerns, in part, to the generational gap. His parents encouraged him to pursue a career which could quickly furnish him with a good salary, instead of the long, expensive, and uncertain training required to become a doctor, a reaction he rationalised in saying “Maybe that’s coming out of the depression era.” Unlike

24 Kenneth Heineman, *Campus Wars* p19
Interview with Robert Rankin, Veterans History Project, p3
Byron Holley, p2
Rankin’s family, Feldman’s were more concerned that he quickly start earning a decent living, than take years aiming for the sky, having witnessed the hardship and unemployment in Manhattan during the depression. His parents’ concerns reflected their desire for their son to be able to become a stable, breadwinner.25

1.3.2 Soldier Model

As outlined previously, young, often working-class, enlisted medics tended to be more receptive to the glorification of ‘real men’ fighting for their country, and the soldier model of masculinity. Post-war American culture encouraged men to exhibit soldierly characteristics presumed to be inherently masculine such as bravery, patriotism and a propensity towards violence. There is evidence to show that American boys were socially conditioned to meet certain situations and problems with violence and never to shy away from a fight. Feldman remembered his elder brother’s response when he confessed to him that he had run away from a bully, recalling that his brother “smacked me around for running from him.” Even amongst their peers boys were taught that avoiding violence was cowardly, and that cowardice was considered a punishable offence.26

Lois Bibbings has argued that this highly gendered attitude was rooted in the belief that men were predisposed to be violent if not by nature then by upbringing. Therefore, Bibbings claimed, men in the early twentieth century who were not willing to answer their country’s call to duty were seen as “having failed to demonstrate the sense of duty of patriotism expected of their gender.” Many Americans had been raised to express unquestioning loyalty and patriotism towards

25 Interview with Edward Feldman, pp1-26
Kenneth Heineman, p81
26 Interview with Edward Feldman, p28
their country. Douglas Anderson commented that he had been brought up to believe that the US Military were the ‘good guys’, and that one should be proud to fight for a country that had heroically helped to defeat the Axis powers. These young men had grown up in a time when they would have remembered American involvement in WWII as the ‘Good War’, a noble and virtuous cause. There had been virtually no opposition to WWII within the United States, and even the traditional anti-war constituencies of political radicals, religious ministers, and women’s reform groups all supported American intervention following the attack on Pearl Harbour. However, having defeated fascism in WWII, Communism was vilified as the greatest threat to the next generation of Americans. From the late 1940s on Americans accepted that fighting this new enemy allowed them to defend their “peaceful and peace-loving way of life...from the forces of subjugation and totalitarianism.” This was an attitude which led many of this generation to respond to the incident in the Gulf of Tonkin in 1964 with similar patriotic outrage to the Japanese attack on Pearl Harbour.  

In the wake 1950s McCarthyism, few Americans questioned American moral righteousness in the early to mid-1960s, and shirking one’s duty to fight for that country was deemed unpatriotic and unmanly. In 1966 in South Boston a group of draft-resisters who burned their Selective Service documents on the steps of the courthouse were attacked by a mob mostly consisting of high-school boys. This violent counter-response to the resisters’ peaceful protest was widely praised by

27 Lois, S. Bibbings, ‘Men refusing to be violent: Manliness and military conscientious objection, 1914 to the present day’ in (ed.) Ana Carden-Coyne Gender and Conflict (New York: Palgrave MacMillan, 2012) p44-45
Gary Gerstle, American Crucible: Race and Nation in the Twentieth Century, p189
Boston residents who wrote letters to their local newspapers, and state representative James F. Condon even gave a statement seemingly disowning the protestors, claiming that “this wouldn’t have happened if these were South Boston boys; our boys are patriotic.” Popular opinion was divided in reaction to the events in Boston, but the level of approval for the attack on the draft resisters by supposed patriots conveys the moral lens through which many Americans regarded male military service. Though extreme, publisher William Loeb went so far as to call the resisters ‘kooks’ who “spat in the face of patriotism”, implying that he believed those who opposed fighting to be unpatriotic and indeed un-American men.28

By linking commendable masculine traits with martial characteristics, American culture encouraged citizens to believe that real men were those best suited to careers in the military and that they should be ready and willing to take up arms if U.S. foreign policy commanded. In this respect men’s perspectives on US foreign policy and decision to serve in the military were also shaped by gendered narratives. Which encouraged young men to believe that they could both fulfil their duty to their country and prove themselves as men by joining the service. One soldier was told by his father “Oh, go, you’ll learn something. You’ll grow up to be a man.” Another claimed that when he enlisted “I was young and innocent and I was under the impression that enlisting was the All-American thing to do.” Raised on a diet of patriotic WWII movies, these veterans’ reflections reveal that

many Americans held the conviction that wartime experience was akin to a male rite of passage.\textsuperscript{29}

Philip Szmedra has argued that the young men of the Vietnam War era had been born into a time when military service was considered a male rite of passage, and an individual’s contribution to maintaining the bulwark of liberty and freedom. Historically, masculinity has always had connections to war and fighting, and the military was commonly perceived as an American institution that could ‘confer masculinity and created men out of boys.’ Melissa Brown pointed out that even in periods when military service was not a compulsory rite of passage for men, the military still tended to set the standard for masculinity. \textsuperscript{30}

Many of the young men in this sample remembered themselves, and their male friends, feeling this way when they were growing up. John Bennett wrote that for most high school seniors;

\begin{quote}
Turning eighteen in these United States means that it is time to register with the Selective Service System. In 1966 that meant registering for the draft...it was sort of symbolic of becoming a man and having the ability to lean your life for a couple of...years to your country if you’re needed.\textsuperscript{31}
\end{quote}

However, when analysing the decisions of young men to join the military during the Vietnam War era, it is imperative to consider the timing of their decision. For instance, in the early years of the Vietnam War many who joined the military were

\begin{footnotesize}
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\item \textsuperscript{29} Excerpts from Mark Baker Nam, in Stewart O’Nan The Vietnam Reader: the definitive collection of American fiction and nonfiction on the war (New York: Anchor Books, 1998) p313
\item \textsuperscript{30} Philip Szmedra ‘Vietnam and the Conscientious Objector Experience’ in (ed.) A. Weist, M.K. Barbier & G. Roberts America and the Vietnam War: Re-examining the Culture and History of a Generation p152
\item Melissa T. Brown Enlisting Masculinity: The Construction of the US Military, Recruiting, Advertising during the All-Volunteer Force (Oxford Scholarship Online: 2012)
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both unaware of the likelihood that they would be assigned to duty in the Vietnam, and the grim reality of fighting a guerrilla war in the jungles, mountains, and rice paddies of South Vietnam. James Callahan never planned to go to Vietnam as a medic when he joined the Army some time before his tour began in 1966. Callahan recalled imagining himself serving in the infantry, or in a tank, in Europe. In contrast, Stephen Bass had joined the army in 1966 because he aspired to go to war as a medic, a dream which preceded any decision to volunteer for duty in Vietnam. Nevertheless, Craig Roberts highlights that Bass’ motivations were unusual amongst his fellow enlisted medics, because many enlisted in the Medical Department to avoid being drafted and sent to war in a less desirable branch of the military. Bass’ explicit desire to be assigned to Vietnam is also unusual considering the fact that Bass fought to be reassigned from his relatively safe posting in Germany to Vietnam, even after the Tet Offensive had shocked the military and the American public in 1968. Many men enlisted in the Medical Department to avoid being assigned to infantry duty as the war became increasingly unpopular after the Tet Offensive. Andrew Weist refers to men, such as Michael Patrick Felker who enlisted as a Navy Hospital Corpsman in 1968 to avoid being drafted, as ‘forced volunteers.’

There had been a peacetime draft in the United States since WWII (p36 Foley), and the majority of men’s parents had made contributions to the war effort in WWII and Korea, and so many viewed military service in the Vietnam era as the younger generation taking their turn. In light of the general acceptance of the peacetime draft young men could be channelled into military training whether they

32 Interviews with James Callahan and Stephen Bass in Craig Roberts, Combat Medic-Vietnam p4, pp110-112
Interview with Michael Patrick Felker
Andrew Weist, Vietnam: A View from the Frontlines p15
volunteered or not. Even middle-class men already enrolled in college often had
to fulfil military training, and some men in this sample participated in Reserve
Officer Training Corps (ROTC) while at university. Robert Rankin recalled that he
was actually required to fulfil ROTC at the University of Arkansas where he was
attending medical school. Not all American men felt that they were obligated or
destined to take up arms to defend and serve their country. However
institutionalised attitudes towards martial character of men and male military
obligations persisted in the Vietnam War era.33

1.3.3 Economic Motivations

Between 1960 and 1972, the median family income nearly doubled and the GNP
advanced even more. For most of the Vietnam War years, national unemployment
was below five percent, with such growth one might expect working-class youth to
have better options in the civilian economy that in the military. However, as
Christian Appy has illustrated;

The working-class, however, did not share equally in the economic boom of
the 1960s...In 1965-70, unemployment among amles aged sixteen to nineteen
averaged 12.5 percent (12 percent among whites, 27 percent among blacks).
Poor and working-class youth - those most likely to be drafted- were least
able to secure stable, well-paying jobs...employers were reluctant to hire
draft-vulnerable men...For working-class draft-bait in search of non-military
labour, all but the most menial jobs were nearly impossible to land.’34

33 Michael S. Foley, Confronting the War Machine: Draft Resistance during the Vietnam War, p36, p25
Interview with Robert Rankin, p2
34 Christian G. Appy, Working-Class War: American Combat Soldiers and Vietnam (Chapel Hill: University of
North Carolina Press, 1993) p45
For some many working- and lower-middle class men who could not afford college tuition, lacked the skills to find a trade, and were unable or unwilling to become unskilled manual labourers, joining the military was their only alternative career option. Sam DeLoach had not made the grades to stay on in college after the first two years, and recalled thinking ‘well I didn’t wanna just go to work and be a labourer, and stay in Birmingham [Alabama].’ Lyle Wells joined the Naval Reserve because his father could not afford to send both Wells and his sister to college, and his sister was already enrolled, which he claimed left him but once place to go after high school: the service.35

Joining the military also offered an escape route for many young men from poor and working class communities who had few other options for career progression. In his study of white-working class veterans, John Helmer found that volunteers enlisted primarily because they felt they had no other alternative, Helmer concluded that they ‘did not regard military service as an opportunity so much as a necessity (nothing else to do, draft pressure, duty, job security) or an escape (to avoid trouble, get away, leave school). John Bennett remembered a lot of young men he knew growing up had joined the military just to escape from the deprived neighbourhoods they lived in. Geographic location was also a factor, as those in the South were more likely to come from working-class and even impoverished backgrounds, Douglas Anderson recognised that economic deprivation compelled many of his fellows to enlist. Anderson believed that both poor whites and blacks

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35 Interview with Sam DeLoach, Veterans History Project (American Folklife Centre, Library of Congress)
Interview with Lyle Wells in Craig Roberts, p86
found that the service was one of the few alternatives to the ‘miserable and dull’ economic opportunities in the American south.\textsuperscript{36}

For young black men growing up in the South, racial discrimination and segregation had led to poorer schooling, and subsequently a lack of business experience in the black community, which further restricted employment opportunities. Whilst racial discrimination was more discernible, and often more severe in the South, young black men had limited job prospects throughout the United States in the 1960s. Curtis Austin argued that few blacks felt their lives had materially changed after the passage of the Civil Rights Act in 1964, segregation remained intact in many places, North and South, almost no schools were integrated by 1965, and only a very small number of blacks attended college. Black communities were also plagued by high unemployment rates, a lack of access to healthcare, and poor quality housing. Christian Appy argued that black volunteers had no doubt hoped that military training and veterans’ benefits might someday bring them significant upward mobility, but even rudimentary economic security provided in the service was, for a considerable number, a marked improvement over civilian life. Thus, as chapter three discusses in greater detail, a military career offered many black men the opportunity to escape poverty and discrimination, and to seek professional advancement.\textsuperscript{37}

\textsuperscript{36} Christian G. Appy, \textit{Working-Class War: American Combat Soldiers and Vietnam} p48
Spec. 5 John William Bennett US Army, \textit{Killed in Action – Struck by Lightning}. p1
Interview with Douglas Anderson in Al Santoli, \textit{Everything We Had: an oral history of the Vietnam War / by thirty-three American soldiers who fought it} p62

\textsuperscript{37} J.W. Rorabaugh, \textit{Kennedy and the Promise of the Sixties} p68
Christian G. Appy, \textit{Working-Class War}, p49
1.4 Conclusion

This chapter has determined that the career decisions which would eventually lead medical veterans to serve in the Medical Department in Vietnam, were influenced by a variety of interrelating personal and social motivations. Interestingly, the ways in which medical veterans have told their stories of have conveyed a sense of how these young American men and women interpreted gender roles, and gender-appropriate behaviour, in reflection. These veterans’ reflections also offered an insight into the factors which both motivated, and limited, their career opportunities. Therefore this chapter lays the foundations for chapter two, which analyses the dreams and ambitions of Vietnam-era medical personnel, and how the heroes and heroines they admired in their youth helped to inspire the career decisions which would lead them towards Vietnam. Having outlined some of the social, cultural, and economic pressures which constrained and shaped medics’ career choices, one can critically analyse what informed young boys’ and girls’ dreams and ambitions in the post-war era.
Chapter Two

Heroes and Heroines

This chapter builds upon chapter one, which focused on Vietnam era medics’ career decisions, and how their motivations and experiences were shaped by gender roles, as well as their class and racial-ethnic backgrounds. However, this chapter investigates the way that veterans have engaged with the images and figures that inspired them to become nurses or to join the military. Building on the argument of feminist oral historian, Joan Sangster, who has illustrated that in oral history interviews the perceptions of what was ‘proper’ work for young women is often revealed in the images, ideas, and examples upon which they constructed their ambition and work choices, this chapter argues that the same is true of male respondents in post-war American society.¹

Therefore this chapter analyses the examples of nurses and soldiers presented to young Americans in popular culture, and in their own lives, and how these figures shaped Vietnam era medical veterans’ childhood dreams and ambitions. This chapter will also consider the types of heroes and heroines that were available to young Americans when they were growing up, based upon the multiplicity of their own identities. In this sample it is clear that the figures in American popular culture which medics recalled idolizing, admiring, or aspiring to emulate when they were children, tended to adhere to certain models of masculinity and femininity. Drawing upon these examples, it is also clear that in the post-war era, these figures, or role models, tended to be portrayed as wartime heroes or heroines. Including fictional characters from popular culture, but also family

members who had served in World War II or Korea. Medical veterans often remembered feeling inspired by both fictional characters and family members, and have considered the influence of their childhood heroes and heroines, to have shaped their views on medical or military professions, and to have coloured their perception of serving one’s country.

2.1 Theoretical Issues

An initial point must be made about the theoretical issues related to analysing oral histories and autobiographies, particularly their references to heroes and heroines in popular culture. This chapter acknowledges that examining the references Vietnam medics have made to figures from mainstream American culture in oral history interviews and autobiographical accounts can prove problematic. On the one hand, the casual references to persons or characters does suggest that wartime stories enjoyed a broad and enduring appeal in the minds of Americans of that era. On the other hand, it is problematic to assume that if an individual used a popular cultural reference to a particular figure, that reference correlated to the figure having had a meaningful impact on the individual’s life.

For example, the sheer number of references to John Wayne demonstrated that his persona and characters had come to form part of a cultural dialogue about war. Vietnam veterans often described their initial shock to find that war was not like they had imagined by pointing out that it was nothing like a John Wayne film. As Mark Taylor pointed out, John Wayne was the most consistently popular actor in the United States from 1949-1974, and his screen presence had thus become a part of their lives. Crimean War nurse, Florence Nightingale, had a similar enduring impact of the language used by Vietnam era nurses. Jill Mishkel responded to a
question about why she chose to enlist in the army nurse, to which she replied, ‘partly it was the Florence Nightingale syndrome - you know, go over there and take care of the guys who are getting blown to bits.’ The frequency of references to Wayne and Florence Nightingale implied that their connections with war and nursing were strong enough to have infiltrated the vocabulary of an entire generation. Therefore, casual references to prominent figures in popular culture will not be considered as evidence of an individual having been inspired, or having admired the figure in question.²

2.2 Heroines

Whilst nurses’ career paths had been influenced and even constrained by their class and gender, many maintained that nursing had been one of their childhood dreams and that they considered it their true calling. Vietnam War era nurses often remembered how they began to dream of becoming nurses as children, and many in this sample had volunteered in children’s’ homes, homes for the elderly, or hospitals, from a very young age. Others recalled feeling that they were destined to become nurses based upon their experiences of caring for family members as children. Many also remembered reading literature about nurses as children, and some remembered admiring the fictional World War II combat nurse, Cherry Ames. This section explores why so many young American girls aspired to become nurses in the post-war era, and offers a critical insight into the way in which Vietnam era nurses have interpreted how their dreams became a reality.


Joan Sangster pointed out that in asking women to explain, rationalise and make sense of their past we gain an insight into the social and material framework within which they operated, the perceived choices and cultural patterns they faced, and the complex relationship between individual, consciousness and culture. The social and material framework of post-war America was shaped by the prevailing notion that women were natural caregivers. Elizabeth Norman commented that in this era ‘girls learned to view themselves in relation to others, as mothers, sisters, and friends- not as individuals,’ and that it was women’s responsibility to care for others. Thus according to Norman nursing provided women with the opportunity to fulfil this traditional role: ‘to care and feel needed.’ Evidently, Vietnam era nurses were socially conditioned to believe that caring was an essential component of womanhood and a marker of femininity.³

For example, in reflecting upon her decision to become a nurse, Rosemary Burke composed a narrative which led her from initially learning first aid, to volunteering, to training as a nurse before enlisting in the military. She recalled;

In terms of wanting to be a nurse, I guess by the time I was ten years old, I had decided that that’s what I wanted to do, and I was a Girl Scout... we had learned first aid, and just that initial first aid training really, I’m going to say, increased my interest in nursing...But also, I volunteered one day a week in the—it was a nursing home that was connected with a small community hospital and I was also a candy striper. I was fully, you know, determined that this was going to be what I want and what I was going to

achieve. When I first worked on the ward as a candy striper and was going around to the patients, I felt like I had arrived. This truly was what I was destined to be.

Burke’s interpretation of having been destined to become a nurse seems to have been shaped somewhat by some of the institutions she belonged to as a child, firstly the Girl Scouts, and subsequently the candy striper program, which further fostered a belief that girls should learn how to care for others.⁴

Saralee McGoran also volunteered with patients as a child. McGoran insisted that, despite having settled for training as a nurse rather than a doctor, she had always aspired to care for patients, rather than earn the title. She remembered how she had often visited a home for crippled children as a child, she read the children comic strips, and recalled how she was able to develop relationships with both doctors and nurses in the home, who allowed her access to the medical library. From these experiences McGoran deduced that nursing had been her ‘destiny’

Interestingly, Burke and McGoran both used the word ‘destiny’ to describe their career paths, which suggested on the one hand, that they might have felt comforted feeling that nursing was their true place and that they were best suited to such a job. However, on the other hand, such language implied that they might have felt fated to become nurses, as if they had little other choice in the matter. Nursing was certainly considered a gender appropriate career choice, and one that

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⁴ Interview with Rosemary Burke, The Vietnam Archive, Texas Tech University, p2
'Candy Stripper' referred to the uniforms worn by female hospital volunteers.
many nurses’ parents evidently steered them towards by either encouraging, or allowing them to volunteer in care homes and hospitals as children.  

As chapter one discussed, young American women from working- and lower-middle class backgrounds, particularly non-white women, had few alternative career options in the post-war era. Nevertheless, women who recalled dreaming of growing up to become a nurse, tended to offer little critical reflection on how those dreams had been shaped by a combination of external limitations. Charlotte Linde contended that, ‘The belief that one is not subject to external limits of opportunity imposed by gender, social class, race, or ethnicity appears to be common to middle-class Americans of the post-war generation.’ Yet many nurses in this sample, as discussed in chapter one, expressed their awareness of the interlocking constraints of gender and class, which limited them to career options like teaching or nursing. This suggested that these women have looked for other reasons why they might have become nurses retrospectively.  

It is possible that in constructing and retelling their life stories Vietnam nurses have found it more comfortable to simplify their nursing ambitions by drawing upon the post-war discourse on women’s natural propensity for work in the caring sector, and creating a chronological path of causality and continuity between their childhood experiences, ambitions, and their service in Vietnam as combat nurses. Vietnam nurses tended to construct their life-stories around the central theme of their wartime experience, and therefore many have sought to create a coherent life narrative which justified their decisions to participate in a controversial war. 

In this respect, by drawing upon their own caring nature, as well as the caring

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discourse surrounding their profession, some nurses have, perhaps inadvertently, emphasised their caring and noble intentions to help and serve others throughout their life-story. This intention, in appearing laudable, was easy to comprehend and was more problematic for their audience to criticise. This was a likely a common theme in the life-stories of Vietnam nurses, considering how many remembered how difficult it was for them to understand the way they were treated because of their association with the war, considering that they had acted as life-saving caregivers to the sick and wounded.

Having established that many Vietnam era nurses related their decision to become nurses to their childhood dreams, this section now considers whether so many girls aspired to become nurses because there were few other suitably feminine role models in American post-war popular culture. In contrast to the male medics in this sample, female nurses have rarely referred to female characters in popular culture as their ‘heroes’ or ‘heroines’. This is likely because during the post-war period in Hollywood, the World War II combat film dominated the heroic genre of films. Typically, the female characters in this genre fulfilled the roles of the ‘object of desire’ or simply potential victims. War films starring John Wayne, which had an enormous influence on boys’ understanding of war and soldiery, sustained the use of female characters as a plot device, depicting the treatment of women in order shape the audience’s views on the heroes and villains of the story. Rick Berg argued that ‘Wayne gives women strict roles in war. Either the allies protect them or the enemy rapes them. In either case, they signify not only enemy’s unnatural desires and natural inferiority, but also that war is always man’s work.’ Big-budget Hollywood productions in the 1950s and 1960s seemed to
offer no radical revision of the roles of female characters in war films, nor provide
a suitable wartime American heroine.\textsuperscript{7}

Literary heroines might have been a greater source of inspiration for girls in the
post-war United States. Whilst many future combat nurses had heard the stories of
Crimean War nurse Florence Nightingale, it was the fictitious and feisty WWII nurse
Cherry Ames that helped to inspire a new generation of nurses. Some American
nurses remembered reading and being inspired by the stories of Nurse Ames, who
was heroine of twenty-eight adventure novels in which she proved herself by
solving mysteries relating her nursing responsibilities. In this sample of Vietnam
nurses, however, only Leslie McClusky spoke about the Cherry Ames books
specifically, she recalled that she had wanted to become a nurse, ‘at first because
of the Cherry Ames books. I read all of them when I was a child. Later I became
aware of a real desire to help people.’\textsuperscript{8}

Over a million American girls read the Cherry Ames series, a series which ran from
the 1940s until 1966, because the publishers recognised the economic advantages
of selling nursing to girls aged twelve to eighteen years in the post-war era.
American journalist, Michelle Slatalla, in an article on the impact of the Ames
novels on her life, questioned, ‘Were there many girls of my generation who didn’t
admire Cherry’s crisp white uniforms, brave loyalty and rosy complexion?’
Therefore it is quite likely that other nurses, such as Lynda Van Devanter, who
described having read every book about nursing that she could find as a child,

\textsuperscript{7} Rick Berg, ‘Losing Vietnam: Covering the War in an Age of Technology’ in J.C. Rowe and R. Berg (ed.) \textit{The Vietnam War and American Culture} (New York: Columbia University Press, 1991) p130


Interview with Leslie McClusky in Kathryn Marshall, \textit{In the Combat Zone: vivid personal recollections of the Vietnam War from the women who served there}, p52
would have read the series. It is possible that the nurses in this sample simply did not consider the books they read as children to be of particular significance to their life-stories.⁹

Considering the purpose of the oral history and autobiographical sources in this sample was to communicate the life experiences of Vietnam nurses, it is unsurprising that nurses’ life stories are framed by the impact of their tour of duty in Vietnam, rather than their lives independent of their Vietnam experience. One must also consider the conscious selectivity employed by oral historians when conducting and editing interviews. It is highly unlikely that women being interviewed about their experiences of the Vietnam War would have considered it important to reflect upon the books they read as young girls.

Ames was also the embodiment of the idealized model of American femininity in the post-war period, she was caring, beautiful, often subservient, and white. The manipulation of her character was quite calculated. For instance, editors forbade author Helen Wells from ever fulfilling the promise of romance for her heroine, arguing that if she were to become engaged, it would mean the end of her nursing career. It is hard to ascertain whether examples of the adventurous unmarried woman of young women’s popular literature further convinced future combat nurses that they had to begrudgingly choose between career and family, or on the contrary provided them with an exciting alternative role model. Despite being presented as an inquisitive, independent thinker, Cherry Ames also observed the

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⁹Jacqueline Rose Hot, ‘Updating Cherry Ames’ pp.1580-1583
subservient role of the female nurse, respectfully rising when a male physician entered the room and always following orders.¹⁰

Cherry Ames was also described like a beacon of traditional American femininity. One description of Ames read, ‘Her given name was Charity, but because of her amazingly red cheeks and lips, she was called Cherry. Her twin brother, Charlie, was as masculine and handsome as she was feminine and pretty.’ Michelle Slatalla remembered Ame’s striking rosy complexion, and one scene in which Cherry was nearly accused of insolence when she could not remove what looked like the prohibited ‘rouge’ from her cheeks. The stories played up Cherry’s girlish beauty, as if to reassure young readers that a nurse could retain her femininity but can also be seen as evidence of the underlying attitude that physical attractiveness was woman’s most valuable asset and even seen as a measure of success and likeability. Such descriptions further emphasised what seems to have been a widely held belief at the time, that supposedly masculine and feminine characteristics were inherent and naturally paradoxical. The author’s emphasis on Ames’ stereotypically feminine traits was reflective of the portrayal of white women in mainstream popular culture in the 1950s and 1960s. Joanne Meyerowitz has illustrated that in magazines geared to white female readers, such as Coronet, a woman’s atypical public accomplishment was often contrasted with an emphasis on her femininity or domesticity. These women were often described as being ‘happily married’, ‘pretty’ and ‘charming,’ which Meyerowitz argued ‘served as

¹⁰ Jacqueline Rose Hot, pp.1580-1581
conservative reminders that all women, even publicly successful women, were to maintain traditional gender distinctions.'

Ultimately, the tales of nurse Ames were carefully crafted to draw women towards the noble and gender appropriate nursing profession, and one book jacket for the series aptly described the idealised vision of nursing to the impressionable teenage reader, ‘It is every girls ambition at one time or another to wear the crisp uniform of a nurse. The many opportunities for service, for adventure, for romance, make a nurses career a glamorous one.’ Not only were these novels an advertisement for nursing, they also offered a generation of American girls a feminised glimpse into the overtly masculine world of warfare. The prevailing patriotic narrative in post-war American preached that war was a glorious, masculine experience, yet military service was also advertised to women through popular culture, albeit through the medium of a woman occupying a traditionally feminine role within the military. Cherry Ames seemed to reinvigorate the feminine identity of military women, modernising the image of Florence Nightingale, adding a dash of glamour, adventure and romance to engage its young female readership. The stories provided an alternative to the stereotypical image of the unfeminine military woman with low moral standards, allowing them to believe that they too could serve their country without forsaking femininity.

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11 Jacqueline Rose Hot, pp.1580-1581
Michelle Slatalla, ‘Cherry Ames, My Daughter Will See You Now’

12 Jacqueline Rose Hot, pp.1580-1581
The descriptions of Ames’ femininity and beauty would have made her relatable to some girls, but alienated others who wanted to pursue careers in nursing, because the descriptions were not racially neutral. Indeed, post-war concepts of womanhood were deeply imbued with racist assumptions, and mainstream popular culture provided the most blatant example, as women, such as Ames, were almost always pictured as white. Ruth Frankenberg has highlighted, that in an analytical context white people are often viewed, or have viewed themselves, as racially neutral, and that the racial specificity of white womanhood is often only obvious to those marginalized by the concept. In this case, Cherry Ames’ idealized, feminine beauty was characterized by her attractive Caucasian features, notably her rosy red cheeks. Such a description would have seemed perfectly normal for young, white girls like McClusky, but would have been a glaringly obvious symbol of exclusion for girls from marginalized non-white backgrounds.\textsuperscript{13}

To counter the predominant ‘whiteness’ of female role models in mainstream American culture, the burgeoning African-American press published articles focusing on successful black women as mothers, workers, activists, entertainers, and beauties. African-American women’s magazine \textit{Ebony} praised the achievements of black female leaders and entertainers who defied white prejudice, as well as ordinary black women who attained professional success against the odds. The glittering success stories of a select few, as touted in \textit{Ebony}, often reflected the aspirational, rather than the attainable. Yet, from the mid-1950s ordinary African-American women were the backbone of the civil rights movement, and became the heroines of their own communities. Their stories

might not have been as exciting as those lauded in *Ebony*, but the black female
domestic and service workers were the mainstay of the bus boycott in 1955, they
walked to their jobs in white households rather than be subjected to segregated
buses. The black community produced heroines who were in turn championed by
the African-American press, that posed a more radical challenge to their
prescribed gender and race roles in society, than mainstream press and popular
culture mainstream popular culture had done for white women in the 1950s and
1960s.\textsuperscript{14}

However, it is unclear whether any of the heroines available to young black women
actually inspired them to become nurses, or to join the military. None of the
interviews with black nurses in this sample included reflections on role models, or
what inspired them to become nurses. As mentioned previously, this could be a
result of the interviewer, oral historian Yvonne Latty’s, privileging of a race as an
analytical framework for interpreting black veterans’ experiences of military
service and warfare across the twentieth century. Therefore an examination of
the influence of black female role models in the post-war era specifically, was
unlikely to have been a research aim for Latty.\textsuperscript{15}

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\textsuperscript{14} Joanne Meyerowitz (ed.) *Not June Cleaver: Women and Gender in Post-war America 1945-1960* p9
\textsuperscript{15} Yvonne Latty (ed.) *We Were There: Voices of African-American Veterans from World War II to the War in Iraq* (Amistad, 2004)
\end{flushleft}
2.3 Heroes

For young men the archetype masculine hero was to be found on the silver screen rather than in literature. The majority of male medics in this sample recalled being very receptive to the glorified depictions of war and war heroes in film and television. Many discussed how they idolized the heroic, ‘tough guy’ soldier characters in WWII combat films such as Stryker in Sands of Iwo Jima, as portrayed by John Wayne. American popular culture in the post-war period and during the Vietnam War era, fed young boys glorified images of the soldier model of masculinity in action. This section will discuss the ways in which the Hollywood’s hugely successful World War II combat films informed the views of many American boys on what it was like to become a soldier and to go to war. Then subsequently how such glamorised portrayals of WWII hid the harsher realities of war and encouraged young men to pursue careers in the service, like their heroes.

Firstly, the classic WWII combat film was young Americans’ main point of reference on American warfare for much of the Cold War period. These films were glamorous in style and always painted a glorified portrait of American competence and ultimately victory over the axis powers, largely because they were produced retrospectively after the war. Consequently the balance between portrayals of the price of victory and the payoffs in these films was often seriously skewed. Film plots were largely built on the presumption that America’s superior moral and fighting strength would assure them victory in every battle. As Claudia Springer highlighted, this was a time of national solidarity and so filmmakers could adopt a confident style that presupposed that audiences shared their values and interpretations of the war. War films in this style informed how an entire
generation remembered their fathers’ ‘Good War’, as it was portrayed in the 1949 film *Sands of Iwo Jima*.16

For young men the actor John Wayne, who starred in scores of popular Westerns and WWII films, came to personify the soldier model of American masculinity, by defending his country on the frontier and in war. Loren Baritz was astonished by how often GIs in Vietnam approvingly referred to John Wayne, not as a movie star, but as a model and standard of American manhood. D.T. McGuff remembered that if John Wayne’s character was ever shot it was either a painless “flesh wound” or he died on the spot, he said ‘Maybe you’d get enough time to make a short statement about patriotism, God, or Mom.’ McGuff’s recollections echoed many boys’ at the time, Wayne’s unflinching courage in the face of mortal danger seemingly epitomized the soldier model of masculinity, the predominant model in post-war film. Wayne’s characters such as Stryker in *Sands of Iwo Jima* reflect this distinct masculine archetype and encouraged young American men to imagine themselves engaged in similarly noble warfare.17

Growing up watching Wayne led many young men to idolise soldiers and fantasize about going to war. One veteran claimed that he had been ‘seduced’ by the

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D.T. McGuff, *So that others may live - A medic’s battle to save lives* (Bloomington, Indiana: Author House, 2005) p7
glorification of WWII and John Wayne movies and that his childhood fantasy had been to command a battleship in a major sea battle. He believed that he had been victimized by such a romantic and uninformed view of war and the attitude of ‘this is what a man does with his life’, surrounding soldiery. Veterans Ron Kovic and Richie Castiglia saw *Sands of Iwo Jima* at their local cinema and remembered crying in their seats as Stryker died, one, said; ‘John Wayne in the Sands of Iwo Jima became one of my heroes.’ Ron Kovic recalled imagining himself in the starring role of Sands of Iwo Jima jumping atop of a flaming tank or charging up Mt. Surabachi, a painful memory for the now disabled Kovic who felt that in his ‘gullible’ boyhood he had believed a Hollywood lie about it being ‘sweet and fitting to die for one’s country.’

Male Vietnam veterans, like Ron Kovic, have tended to adopt a derisive tone when reflecting upon their admiration of fictional, patriotic, war heroes. The use of language in the aforementioned examples is telling, as using words such as ‘gullible’ and ‘seduced’ suggested that these men felt that patriotic war propaganda had exploited their naïve boyhood fascination with war. Male veterans often reflected upon their naïve past selves through the lens of Vietnam veterans who had since felt betrayed by the understanding of war, and soldiery, that popular culture had instilled in them as boys. Thus, male Vietnam veterans as a social group, often position themselves as the victims within the narrative of their life-stories.

Thomas Doherty, *Projections of War - Hollywood, American Culture and WWII* p235
It is understandable that boys admired Wayne’s characters, because even in the early years of the Vietnam War impressionable young minds were offered few alternative visions of the grizzled American hero of the WWII combat film, even as the conflict became more visible and ugly. Between 1965 and the Tet Offensive in January, 1968, the media coverage of the conflict remained limited but frequently positive. Unlike in previous conflicts, the government no longer provided public information services such as films or news reels in movie theatres, television news had appropriated the function of disseminating war-related information by the 1960s. Military propaganda films were no longer shown with the intention to rally civilian support either, and were shown almost exclusively to the troops. Other than the nightly news, networks avoided Vietnam-themed shows instead favouring programmes set in WWII, like The Rat Patrol, Combat and Garrison’s Gorillas alongside the usual fare of WWII combat films which were aired nightly. D.T. McGuff enjoyed watching Vic Morrow’s exploits on the television show Combat and believed the show to be a slightly more realistic depiction of combat than Wayne films. McGuff admitted that he had learned a lot of lessons about warfare from television shows in which the good guys dependably won and only the Germans, special guest stars or nameless extras ever faced death. The prospect of death and defeat of Americans in combat was neither entertaining nor inspiring, and thus reruns and nostalgic WWII programs were favoured. Rick Berg believed that film producers also avoided Vietnam themed content so as to avoid competing with the nightly news (Berg ref). Hollywood remained fixated on commercially viable WWII themed projects. Controversial screenplays with a Vietnam War theme, such as Groundswell, were rejected by almost every major film studio in Hollywood,
leading Variety magazine to conclude in 1965 simply that ‘the war in Vietnam is too hot for Hollywood.’

In this hushed political climate praise for the masculine and heroic characteristics of soldiers in Vietnam were emphasised over and above the morally and politically ambiguous cause they fought for. Edward Feldman admitted that he had been susceptible to the glorification of the US Marines in the media. While he was in medical school, he read stories about the Marines who were serving as military ‘advisers’ in Vietnam in the early 1960s, and he confessed that:

> Well I pictured these guys out in these jungled areas and cleared areas. I read one article where the guys were not carrying American weapons, they were carrying 22 Swedish sub-machine guns, which I came to find out was Swedish K’s. They were dressed in combat utilities, and it just seemed that that was such a… I hate to use the word a cool thing to do, but what a cool thing to do to go out there and do this stuff. My concern, I use the word patriotism and there was some of that, but it was also a personal sense of adventure… there was fascination. I think I was more fascinated by what they were doing than why they were doing it.

Considering that film studios and television networks offered neither critique nor comment on the war until 1968, the boys who had grown up watching John Wayne

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19 Rick Berg, ‘Losing Vietnam: Covering the War in an Age of Technology’ in J.C. Rowe and R. Berg (ed.) The Vietnam War and American Culture pp120-124
20 Interview with Edward Feldman, The Vietnam Archive. Texas Tech University, p32
defeat the axis powers and the Indians had little reason to question the honour of
soldiery in their own generation’s war. The men of the Special Forces were also
heralded in Vietnam era popular culture, with the publication of Robin Moore’s
novel *The Green Berets* in 1965. Moore’s book became the fifth bestselling in the
United States that year. It was one of the first books to discuss the American
experience in Vietnam and as Eric James Schroeder wrote ‘the American public
bought it like candy.’ The popularity of the novel and its admirable portrayal of
the Berets reportedly induced so many military enlistments that the Selective
Service was able to suspend draft calls for the first four months of 1966.  

Despite the demoralising effect that the Tet Offensive had on the American public
and media in 1968, popular culture remained resolutely positive in its portrayal of
American warfare. The critically reviled but commercially quite successful
adaptation of *The Green Berets* (1968), again starring John Wayne, was the sole
big budget film about the Vietnam War made during the conflict (p284 Doherty).
Whilst television news was convinced by Tet that the war effort was doomed *The
Green Berets* still took in over $9 million at the box office in the US and Canada
alone. The film itself echoed the style of classic Wayne WWII film *Sands of Iwo
Jima* which Simon Newman described as ‘both an updated Second World War
movies and a contemporary Western.’ Wayne himself agreed in an interview with
*Playboy* magazine that the film was propaganda. The film itself was critically torn
apart and considered ridiculous and even humorous by the soldiers to whom it was
screened in Vietnam, however the general public, specifically young men,
continued to lap it up. This was in part due to the continuing lack of alternative
depictions of the Vietnam experience, but also because Wayne had come to

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21 Mark Taylor, *The Vietnam War in History, Literature and Film*  pp33-40
personify the all-American hero. Audiences could feel comfortable in the knowledge that his character’s cause would be just and his victory inevitable, a belief which many extended to the actions of the U.S. military in Vietnam by association. As Rick Berg highlighted, *The Green Berets* did not take the glamour out of war, especially not for the budding young recruits still ignorant to the political context of American foreign policy in South-East Asia.\(^2^2\)

This particular soldier model of masculinity, as espoused by the all-American hero in popular cultural representations of war, was described by Loren Baritz as the ‘traditional American male’ who, ‘performs, delivers the goods, is a loner, has the equipment... beat the bad guys AND knows what he’s doing.’ However, this model was also a specifically white model of masculinity. Gary Gerstle argued with regards to the WWII combat film:

> Central to virtually all these dramas are images of Euro-American male fraternities acting with courage and resolve. Such representations are not self-consciously racist. Indeed, some evidence suggests that black as well as white youth of the 1950s and 1960s sought to emulate the models of male heroism and sacrifice they saw projected on the screen. But these images did communicate a radicalized image of America, of young white men, often led by John Wayne, doing the job that had to be done to save the nation. And the endless recycling, reconstitution, and re-enactment of these images, not just on the written pages, silver screen, or picture tube, but also in the imaginative play of a new generation of boys enthralled by war

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\(^2^2\) Mark Taylor, pp49-50  
Simon Newman, p2  
Rick Berg, ‘Losing Vietnam: Covering the War in an Age of Technology’ p130
stories, helped to invigorate a tacit assumption that whites were better than blacks, especially when the nation’s survival hung in the balance.\textsuperscript{23}

Conversely, many African-American men were less receptive to the heroic soldier narrative than their white counterparts in this sample. None of the black men in this sample mentioned admiring John Wayne, or WWII combat films, as having had any impact on their views on masculinity, soldiery, or war. Perhaps because the hero was white, but also because in the context of the classic John Wayne film, the enemy was predominantly non-white, whether they were the “red” American Indians in Westerns, or the “yellow” Japanese in \textit{Sands of Iwo Jima}, and later the Vietcong and North Vietnamese in \textit{The Green Berets}. By the mid-1960s members of the civil rights movement and the New Left led an attack on US ambitions in Vietnam, which was informed by their attacks on the treatment of African-Americans at home. Many anti-war radicals, both black and white, viewed the efforts of the military to prevent the “yellow” Vietcong and North Vietnamese from determining their own future as an extension of American denial of civil rights to African-Americans at home.\textsuperscript{24}

As the war in Vietnam escalated many African-American men began to rally around opposition figures within their own communities, those who spoke out against the enlistment and conscription of blacks in the US Military. Curtis Austin argued that the Vietnam War was a crucial turning point in how many blacks viewed themselves and the world around them, transforming many from ‘apolitical country bumpkins…and city slickers, into fighters in the struggle for black

\textsuperscript{23} Loren Baritz, \textit{Backfire: a history of how American culture led us into Vietnam and made us fight the way we did} p51


\textsuperscript{24} Gary Gerstle, \textit{American Crucible: Race and Nation in the Twentieth Century}, p317
freedom. For many young black men, influential figures in the civil rights movement such as Malcolm X, Martin Luther King, and even Muhammad Ali embodied the spirit of black heroism, as opposed to fictional, patriotic, soldiering types. Malcolm X admonished serving blacks who he claimed would only ‘bleed for the white man,’ effectively demonising those who joined the military as subservient slaves to the white war machine and tearing apart the argument for patriotic duty as American citizens. One survey in 1970 found that black GIs in Vietnam gave the most radical black leaders at home (Eldridge Cleaver, Malcolm X, and Muhammad Ali) approval ratings reaching and exceeding seventy percent, which suggested their growing popularity towards the end of the 1960s.25

These black leaders might have influenced the views of many young black men, especially in the later 1960s, however the black male medics in this sample said little about figures they admired. Nevertheless, their opinions on Muhammad Ali, who was lauded by many anti-war blacks for refusing his induction into the military in 1967, were mixed. Douglas Anderson mentioned no specific personal role model before he went to Vietnam, but he recalled that many blacks in his unit had been radicalized before they were drafted. Anderson remembered that when Muhammad Ali refused induction he became a hero in the African-American community. However, combat medic Wayne Smith did not agree with Ali’s refusal to serve, Smith remembered thinking about Ali’s public opposition to blacks serving in the US Military and questioning ‘What did he know about it?’ Rather than align himself with the anti-war movement like his sister, Smith felt proud, rather

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Mitchell K. Hall, *Crossroads*, p103
Gary Gerstle, p324
than exploited, to serve his country, and certainly did not agree with or admire Ali and the black nationalists.\(^{26}\)

### 2.4 Family Legacy

Young Americans also found dutiful figures to admire and emulate in their own lives. One soldier remembered how he idolised his father who had been a Marine in the South Pacific during WWII and treasured his father’s web belt and Marine Corps insignia. Their own cultural lineage was steeped in ‘just’ warfare, as sacrifices of the WWII generation became a part of family lore. Subsequently, many men and women were impelled to join the service by the responsibilities they felt they inherited, or were inspired by veterans in their own families. Christine McGinley Schneider reflected, ‘My Mom had been a Navy nurse in World War II, and I think that had a lot of impact on my decision.’ Mary Lu Brunner, Diane Carlson Evans and Bobby Smith were likely inspired by the fact that they all had aunts who had also volunteered for military service during WWII.\(^{27}\)

However men’s decisions were often made out of a sense of duty rather than having been inspired to help others. Douglas Wean felt he inherited his family’s naval legacy as his father had served in the U.S. Navy in the South Pacific during WWII, and his brother had already enlisted. One veteran said that, ‘in every generation when there was a war, some male in the family on my father’s side


\(^{27}\) Stewart O’Nan (ed.) *The Vietnam Reader*, p303

Kim Heikkila, *Sisterhood of War* p26


Kim Heikkila, p26
went to it.’ To many of them their parents’ experiences of war had set a precedent of what it meant to be an American citizen. Their motivations seem to reflect family tradition, pride and an apolitical sense of ‘duty’ related to the debt they owed to their parents’ generation, rather than a specific inclination to serve in Vietnam.28

However, sometimes a family’s encouragement and pride in their children’s decisions to join the service was only extended to their sons, as a military career was still considered an inherently male pursuit. Leslie McClusky said that after telling her parents she had joined the military she was bombarded with a wholly negative reaction. Whereas Jill Mishkel said that while her mother wanted her to join the service, she had wanted her daughter to serve in Germany where she could meet a doctor. Mishkel’s mother was like many of her generation in that her main concern was that her daughter found a suitable husband, preferably a well-paid doctor. Such an aspiration for her daughter implied that women in the service were not honoured in the same way as fighting men.29

Many nurses’ remembered their parents’ concerns that the military would in fact have a negative impact on their daughters’ femininity and morality. Ann Powlas had felt bored in nursing school and so when ANC recruiters had taken her for dinner in 1969 she was excited about the prospect of joining the service, but her parents were less enthusiastic. In Powlas’s parents’ memory, the nurses who had served in WWII were considered to be bad people, she said ‘they just knew I was

29 Interviews with Leslie McClusky and Jill Mishkel, in Kathryn Marshall, p52, p137
going to come out a whore.’ This image of the licentious military woman resonated with the WWII generation and worried many a mother and father.\textsuperscript{30}

Mary Stout’s father was also sceptical about his daughter joining the service, but Stout felt reassured by the Army recruiter, she said:

The first thing that struck me when she came to talk to our class was that she was a perfect lady. Which is what I was brought up to be. You know, we had the nuns. When I was in high school we even had to curtsy to them. So being a lady was, you know, very serious. And I think seeing the nurse recruiter really changed my father’s idea.

The reassurance of Stout’s father by a proper lady in the Army shows just how valuable many American parents felt it was for their daughters to comply with a more socially conservative model of femininity. Valerie Buchan also mentioned being aware of a wider belief that military women were ‘immoral’, ‘sexually loose’ or defeminized by their exposure to the use of bad language. Such attitudes reflected continued beliefs in American society that women were to be gracious, well-mannered and generally a better moral example than their male fellows and that masculine spaces such as the military barracks would corrupt their behaviour.\textsuperscript{31}

Military recruitment policy was also paternalistic attitude towards young women in post-war America. Ann Powlas was nineteen years old in 1969 and thus she was required to have her parents’ signed permission for her to enlist in the Army. This was a time when parents still clung to the idea of the “dependent daughter” who

\textsuperscript{30} Interview with Ann Powlas in Kathryn Marshall, pp116-117  
\textsuperscript{31} Interview with Mary Stout in Kathryn Marshall, p84  
Kim Heikkila, p16
relied on her parents’ emotional support and guidance, there was no precedent for sending your daughter to war. Requiring parental consent suggests firstly that women were still considered by American institutions to be under the jurisdiction of their fathers until they wed, and secondly, that it was that some parents would object to their daughters enlisting. This was ironic considering that seventeen year old boys were easily admitted and later conscripted with few questions asked.  

Vietnam nurses also faced accusations of sexual immorality when they returned home. Lynda Van Devanter told a Washington Post reporter in 1981, ‘Every Vietnam vet was told he was a fool, a real sucker, for going over there, but for women it’s been even worse...people figure you were either a hooker or a lesbian if you were a women in the [US] army in Vietnam. Why else would a woman want to be with 500,000 men unless she was servicing them?’ This was perhaps yet another reason why many Vietnam nurses have emphasized that their decisions to volunteer for duty in Vietnam, came from recognising that they were natural carers, or that they had been inspired by, or felt indebted to their parents’ generation who had fought in WWII. Such intentions would have seemed incompatible with the brazen desires to be amongst men that female veterans accused of.  

2.5 Self-Sacrificing Narrative

Medical personnel also remembered having childhood heroes and heroines who did not necessarily fit the predominant models of masculinity and femininity in the context of wartime. Kathleen Canning argued that, while it is possible to imagine

32 Ann Powlas, p116
Elizabeth Norman, Women at War p11
that discursive dominance might be greater in the social and political setting of a war, it is unlikely that absolute conformity between the way that people think and the discourse would ever be achieved. With respect to this sample then, young American men and women in the 1950s and 1960s would have been able to be critically selective of the models of masculinity and femininity, and indeed the heroic figures, which they chose to admire, or emulate, despite the hegemony of the nurse and soldier models in popular culture. Lynda Van Devanter and Stephen Bass both reflected upon alternative types of role models from their childhoods, and interestingly both of their heroes were those who had exhibited self-sacrificing behaviour, and had fulfilled a certain duty. This section argues that the theme which suffuses the life histories of Devanter and Bass, the ‘script’ around which they have shaped the presentation of their lives, also revealed more about the nature of the collective script of Vietnam veterans as a social group.34

Lynda Van Devanter avowed that the Catholic martyr, Catherine of Sienna, had been her childhood heroine, and that she had fantasized about becoming a martyr. She mused that Catherine was ‘the Catholic girl’s equivalent to Babe Ruth,’ and that ‘while good Catholic boys usually fantasize about becoming major league baseball players..., good Catholic girls usually harbour, at least once in their lives, a secret desire to become martyrs...the martyrs were the real heroes.’ Devanter also linked her devout Catholic upbringing to the development of her desire to serve others, which eventually led her to serve in Vietnam.35

34 Kathleen Canning referenced by Penny Summerfield in Reconstructing women’s wartime lives: Discourse and subjectivity in oral histories of the Second World War (Manchester: Manchester University Press, 1998) p13
Joan Sangster referencing Ronald Greve, p90
35 Lynda Van Devanter, pp26-28
Georges Gusdorf reasoned that one writes their life-story ‘in order to transmit to others the worldview that one carries in oneself,’ and that writings one’s life story is an attempt by the individual to reassemble themselves at a certain moment of history, and to create a coherent and complete expression of one’s entire destiny. In this context, Devanter’s writing of her autobiography in the early 1980s, a time when her Vietnam experience was still raw and when the American public scorned the very memory of the war, and its suffering veterans. From this particular moment in Devanter’s history, her worldview was that the resentment and negativity she was met with, regardless of her role as a nurse, by her association with the Vietnam War was unjust. Devanter was also struggling to come to terms with the painful and traumatic year she spent stationed in Pleiku, Vietnam from 1969 to 1970. Therefore in linking her admiration of a martyr, and her description of herself as a natural caregiver, Devanter’s narrative emphasized her noble intentions, and that she was willing to put her own life on the line for her country, as Catherine did for her faith. Devanter engaged with her childhood heroine in a way that justified her participation in the Vietnam War, to herself and her audience, as a noble, selfless act, in spite of the negative public discourse surrounding Vietnam veterans, especially women veterans.36

Stephen Bass, on the other hand, described his admiration for his hero in an oral history interview as opposed to in an autobiographical account. However, Lynn Abrams has pointed out that life stories are also a complex and revealing narrative performance which can offer an insight into the relationship between identity formation and larger historical forces. Evidently, when Bass was interviewed in the

early 1980s, his interpretation of his own identity was very much entangled with his experiences as a combat medic in Vietnam. Bass remembered how he had always dreamed of growing up to become a marine, but how his dream changed when he read a book about a combat medic from WWII. Bass was deeply impressed by this story about a conscientious objector who had become a medic so that he could serve his country, but would never have to carry a weapon.37

This facet of the story separated Bass’s role model from the archetype soldier model of masculinity. The central character was constantly ridiculed, and his masculinity questioned, as a ‘cowardly non-combatant,’ until one day, armed only with his medical bag, the medic saved the lives of several wounded soldiers in his platoon. Bass recalled thinking that the medic was ‘a brave man who did his duty and helped his buddies...He didn’t have to kill people to be a hero. I was impressed by that story and wanted to be just like him’. The medic thus earned the respect of his platoon, and an impressionable young reader. The memory of that story was powerful enough to have convinced Stephen Bass to enlist as a combat medic, rather than a soldier.38

Bass’s account is valuable because it revealed something of his personal narrative, and that of male Vietnam veterans as a social group. Firstly, his choice of hero proved that even white, working-class boys who grew up in the post-war era were able to consciously select their heroes, rather than being slaves to the prevailing discourse on heroic martial masculinity. Bass was able to admire a man who broke this mould because he refused to be violent, and served his country without being a soldier. However, similarly to Devanter, Bass privileged his noble intentions for

37 Interview with Stephen Bass in Craig Roberts, p110
38 Interview with Stephen Bass, pp110-111
volunteering for duty in Vietnam, over and above the fact that as a working-class, high school drop-out his opportunities for alternative employment were limited.\textsuperscript{39}

As Christian Appy argued, ‘the fact that working-class boys were far more likely to fight in Vietnam is not an indication that they, above all others, were seduced by Hollywood war stories. Rather, I argue, the fundamental factors moving people into the military were economic and institutional,’ but Appy then concluded that adolescent fantasies of war were crucial to men trying to reconcile themselves to a largely unavoidable and uncertain fate. Therefore the emphasis many male Vietnam veterans have placed upon John Wayne’s influence on their views of war and soldiery, is perhaps more reflective of the type of narrative commonly espoused by male Vietnam veterans as a social group. There is a purpose or meaning inferred by the way that individuals tell their life-stories. In this case, that purpose, whether conscious or not, was likely to communicate their sense of injustice to their audience. To position themselves as the victims whose idealistic notions had been betrayed, as opposed to the demonized image of Vietnam veteran in public opinion and popular culture after the war.\textsuperscript{40}

2.4 Conclusion

This chapter concludes that the whilst medical veterans were able to select their own role models, ones which were reflective of their own multiple, overlapping identities, the majority in this sample have only engaged with a select few types of hero or heroine. Indeed, the predominant images of both the American nurse, particularly the combat nurse, as well as the heroic American soldier in popular

\textsuperscript{39} Stephen Bass, p110

culture proved powerful, at the time and since. Young Americans also seem to have been conditioned to admire patriotic figures whom American society deemed to have made a contribution to their country. However, this chapter also recognises that heroes and heroines in American post-war popular cultural representations of war rarely, if ever, diverged from the preponderant gender roles: the caring, nurturing combat nurse or the brave, patriotic soldier.

A gendered pattern has also emerged in the way that Vietnam medical veterans have engaged with how role models in popular culture, and in their own lives, influenced their decisions to pursue nursing and, or join the military. For medical personnel in particular, the experience of returning from Vietnam was extremely painful and confusing, not least because of the disparity between the treatment of WWII veterans and Vietnam veterans in American society and popular culture. The effect this experience has had on veterans’ worldviews and life-stories is discernible. Male and female medical veterans in this chapter have positioned themselves as victims in their narratives, and drawn upon their childhood dreams and ambitions to justify having served in Vietnam. Nevertheless, fewer nurses were critical of the dreams of their past selves. This is possibly because, in contrast to many male medics in this sample, very few nurses retrospectively regretted becoming nurses, or serving in Vietnam, nor did they tend to recall being lured towards the profession under false pretences. Examining the influence of the heroes and heroines of Vietnam era medical veterans is valuable. Nevertheless, a closer theoretical analysis of veterans’ interpretation of that influence provides a deeper, more nuanced understanding of their worldview.
Chapter Three

Duty, Politics and Vietnam

This chapter examines the development of Vietnam era medical veterans’ understanding, and opinions on military service, US foreign policy, and the Vietnam War, prior to their assignment to serve in Vietnam, and for some prior to any inclination that they would serve in the military or the combat zone. Firstly it focuses on how medical veterans have reflected upon their views of military service, and what motivated them to enlist. However, unlike the previous two chapters, this chapter analyses the testimonies of nurses, followed by black medical personnel, examining the how gender and racial-ethnic background have influenced the ways that medical veterans have shaped their accounts. It also considers the extent to which their motivations were shaped by the sense of national duty instilled by President John F. Kennedy’s (JFK) inaugural speech in January 1961. Subsequently, this chapter examines how medical personnel’s interpretation of Kennedy’s message about national duty linked to their understanding of US foreign policy, and the prevailing anti-communist discourse.

As a group, medical veterans do not tend to have been particularly aware or engaged with the politics of the escalating war in Vietnam before they decided to enlist in the military. This chapter argues that many of the nurses and enlisted medical soldiers in this sample were too young before they enlisted to have had the opportunity to develop nuanced political views on the war. The nursing schools, colleges, and medical schools that the majority of nurses and doctors in
this sample attended also seemed to have played a role in inhibiting the politicization of their students.

Timing is also a significant factor in the context of 1960s America, as the politically turbulent year of 1968 was said to have caused the American public to split into two distinct groups: the ‘doves’ who opposed the war and embraced social and political changes, and the ‘hawks’ who supported the war and traditional values. This chapter concludes by analysing how medical veterans have remembered and retold how they came to be either in support or opposition to American involvement in Vietnam, before they were assigned to active duty.¹

3.1 Military Service

3.1.1 The JFK Effect

Chapters one and two have detailed the ways in which both limited economic opportunities, and the glorified soldier model of masculinity influenced young working- and lower middle-class American men to volunteer for military service. However, in this sample many nurses remembered the impact that President Kennedy’s inaugural speech had on their decisions to join the military. However, many nurses’ explanations for why they decided to join the Nurse Corps focused upon more practical considerations, for example, many nurses benefited from the financial aid offered by the Army Student Nurse Program. Some women also highlighted that the Army’s offer of travel and adventure had been very appealing to them. Yet, the majority of nurses’ personal testimonies privileged their desire to ‘contribute’, to answer Kennedy’s call to duty, and to serve their country, over and above these other considerations. Therefore, in a similar vein to chapter two’s

analysis of nurses’ inspirations to nurse, this section analyses the emphasis on the influence of Kennedy’s inaugural address within Vietnam nurses’ life stories.

As one would expect from those who lived through the early sixties, many nurses discussed having strong memories of watching JFK’s inaugural address on television on the 20th of January, 1961. Their interpretation of Kennedy’s message about citizenship and duty to one’s country has proved pivotal to many of their self-narratives about their trajectory towards Vietnam. In those climactic words; ‘Ask not what your country can do for you – ask what you can do for your country,’ Kennedy encouraged this generation to believe that they owed their country a service, in return for the civil liberties which the United States supposedly offered to all of its citizens.

Lily Adams said that she was truly inspired by Kennedy, and that she believed nursing would allow her to ‘fill the needs that I wanted to fill for John F. Kennedy.’ Lynda Van Devanter recalled that Kennedy’s pledge to defend liberty had made her feel as though she must have been a part of a just and honourable nation, one that was deserving of her personal contribution. Many nurses, like Adams and Devanter, had interpreted Kennedy’s message as a call to civic duty which they could answer, by serving the American people as nurses. Some had interpreted this duty as a national one, which they could fulfil by joining the Army Nurse Corps (ANC). That way, they could apply their medical skills to support the American mission abroad, as espoused by Kennedy. J Holley Watts directly attributed the influence of JFK to her decision to join the ANC, she said that
wanted to be a part of it, to help spread American ideals of freedom and democracy around the world.²

Yet one must be analyse respondents’ memories of pivotal historical events with the knowledge that memories are informed not only by personal experience, but by a host of public representations of that particular era, in this case the early 1960s. Alistair Thomson urges oral historians to recognise that there is a relationship between individual memory and collective memory, and that we ‘compose’ our memories using public language and meanings in our culture.

Kennedy’s inaugural address was likely most memorable and influential rhetoric for the Vietnam generation and so the fact that so many veterans explicitly refer to the inspiring effect that Kennedy had on them is hardly surprising.³

However and one could speculate that many veterans have drawn upon the discourse of civic duty in order to achieve a sense of coherence between their past and present lives. J.W. Rorabaugh argued that the early 1960s are so intrinsically linked with Kennedy that, ‘in public memory, the man and the age are entwined and inseparable,’ however, Rorabaugh also concluded that ‘in democratic societies, where custom, institutions, and public opinion shape both compel certain directions and inhibit others, leaders shape their times less than they, or we, like to admit.’ Kennedy was certainly an incredibly inspiring, and unifying public figure, but to simply accept the power of public discourse in shaping the

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motivations and memory of Vietnam era nurse, would be to belittle these women’s agency and personal motivations for serving. Therefore this section seeks to analyse the reasons why Vietnam-era nurses might have emphasized the influence of Kennedy, over and above, their own personal motivations, and political opinions, regarding joining the military.\textsuperscript{4}

Lynn Abrams has highlighted that in the telling of a life story coherence is generally achieved by adherence to principles of causality and continuity, by chronologically linking life events and experiences, but also by including discourses, which may be used to make an account coherent or easily understandable to an audience. This process of seeking coherence is evident in the ways that Vietnam era nurses have engaged with the influence of Kennedy on their decisions to serve in the military.\textsuperscript{5}

There are three possible reasons that nurses have drawn upon the Kennedy and the discourse of civic and national duty: 1. Medical veterans’ experiences in Vietnam were particularly traumatic, and many later felt strong moral opposition to the war and the draft. Therefore drawing upon the public discourse of answering Kennedy’s call to civic duty would offer medical veterans a more straightforward explanation, and one that would be both easy for their audience to understand, and difficult for them to refute, for why they joined the military and went to Vietnam. 2. For women, as discussed in chapter two, military service still had negative connotations and was not considered a gender appropriate career move by many nurses’ families. Therefore nurses may have justified this decision at the time, and in reflection, by drawing on the discourse of duty in the same way that

\textsuperscript{4} J.W. Rorabaugh, \textit{Kennedy and the Promise of the Sixties}, (Cambridge: Cambridge University Press, 2002) p1
\textsuperscript{5} Lynn Abrams, \textit{Oral History Theory} p42
many married registered nurses (R.N.s) had done to justify returning to work in the 1950s. 3. Many nurses had in fact enlisted in the military because of the financial incentives the ANC offered such as help with tuition costs and the provision of an Army private’s salary. Considering the how unpopular the war was after 1968, and the overwhelmingly negative response Vietnam veterans received from the American public, one can speculate that some nurses have emphasised their noble intentions for joining the military, over and above, some of their practical, economic and personal motivations. 6

Several nurses firstly described having felt inspired by Kennedy to join the military, then subsequently mentioned other factors which motivated their decision, such as the financial incentives the military offered, or the desire to find adventure. In analysing nurses’ accounts of what inspired them to serve it is crucial to consider the form and purpose of a life story. The life story itself is creative and fluid construct, which also has another purpose, ‘it tells the listener what kind of person the narrator wants to be seen as, and this is done through the telling of the story (the way that it is constructed) rather than via the events or the facts included.’ The way that Lily Adams explained her reasons for joining the military is exemplified the process of the construction of a life story. Adams recalled;

I felt when they [sick and wounded Vietnam veterans] came back from Nam I could take care of them. Then there was Kennedy: “What can you do for

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6 Susan Leigh Rimbry offers examples of justifications given by R.N.s, which often included references to performing a greater public service, or a civic duty to their community, for leaving their children to go back to work, in the American Journal of Nursing in the 1950s in ‘An “Obligation to Participate”: Married Nurses’ Labour Force Participation in the 1950s’ in Joanne Meyerowitz (ed.) Not June Cleaver: Women and Gender in Post-war America 1945-1960 (Philadelphia:Temple University Press, Philadelphia, 2004)
"your country?" I was part of that era, of that generation, and I thought “This is perfect. I can serve my country, I can express my feelings about the war, I can get out of New York,...So I thought “What the heck.” I signed up.

Adams’ testimony revealed that her decision to enlist was more complex than having been inspired by Kennedy to serve her country’s sick wounded soldiers. While she was influenced by the cohesive sense of being part of a new generation with an obligation to contribute, Adams also wanted to escape her every-day life in New York, which suggested that she viewed joining the Army as an opportunity for travel, adventure, and perhaps professional advancement. She recalled that joining the Army Nurse Corps, ‘was the answer to a lot of my needs. Financial, for one,’ which suggested that Adams had a multitude of reasons for joining the military that were more personal and practical than patriotic.

Nurses often enlisted in the Nurse Corps because of the financial incentives, as well as the opportunities for travel and career advancement the military offered them. The army instituted the Army Student Nurse Program in 1956, which paid for the last years of nursing education in return for military service and provided the salary of an army private, in an effort to lure student nurses to enlist. As Kathryn Marshall pointed out, for a student nurse from a working-class background, a monthly cheque from the Army meant that she did not have to take out loans, or find a supplementary job to cover her tuition fees and expenses. The fact that accepting the program’s financial assistance also committed them to active duty, and a possible tour of Vietnam, seemed to be of little concern in comparison to nurses’ financial needs. Mary Fran Meyer Brown was supported by the Army.

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7 Lynn Abrams, p41
Student Nurse Program, as were twenty of the fifty nurses in Elizabeth Norman’s study. Judith Peteiski recalled when she first became aware of the financial aid the Army could offer her:

The Army certainly was one of the opportunities that I started learning about. Then when I learned that I could enter into a student nurse program and essentially have an income my last year in nursing school it became even more appealing….I made application my second year in nursing school because by that point, I mean, it just sounded like a good deal. I knew I was going to work somewhere for two years after I graduated. That was as long as the commitment was for agreeing—basically for being on active duty as a private, first class, my last year in nursing school I had absolutely no Army responsibilities at all.

Peteiski’s accounts does not suggest that she wanted a life-long career in the military, or that she was drawn in by a sense of patriotic duty, but rather, the Army had practical and economic appeal.⁸

On the other hand, Kennedy’s address was so well-received and culturally pervasive for American youth that some historians attribute the fact that the Women’s Army Corps (WAC) experienced a record 1052 recruits in one month during 1961, to the ‘surge of patriotism following the inauguration. (p83 Stur 2) It would therefore be safe to assume that when respondents discussed ideas of civic duty and democratic idealism, that Kennedy had influenced their viewpoint to a

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Kathryn Marshall, *In the Combat Zone*, p6
Interview with Mary Fran Meyer Brown, Veterans History Project (American Folklife Centre, Library of Congress)
Interview with Judith Peteiski, The Vietnam Archive, Texas Tech University, p5
certain extent, even if subliminally. Christine McGinley Schneider, for example, recalled feeling affected by the overwhelming desire to serve others as a nurse regardless of whether she served in a military or civilian organization, she said:

> When you come out of school, you kind of feel like you want to do something to save or help the world. When I got out of school it wasn’t “Should I or shouldn’t I?” - I really wanted to go...I looked into the Red Cross and civilian organizations and none of them was sending nurses at that time. The Navy said that I would have to stay stateside eighteen months before they would consider my request for over there [Vietnam]. The Air Force said the same thing, but when I went to the Army they promised me that I could go over immediately...So I joined the Army.⁹

Whilst Schneider did not directly reference the impact of the inaugural speech, or Kennedy, in shaping her desire to serve overseas, her interpretation of serving her country was supported by her belief in the supposedly virtuous American objective to ‘light the world,’ as Kennedy had phrased it. Schneider’s connection between her desire to serve in the military and her desire to help spread American ideals throughout the world, offered an insight into her understanding of US foreign policy during the Cold War. This was a connection which many Vietnam veterans made prior to their enlistment, and shall be discussed further in this chapter.

### 3.1.2 Race and Military Service

The African American medical personnel in this sample appeared to have been inspired, or motivated to join the military for different reasons than white personnel, which suggested that their interpretation of military service had been

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⁹ Interview with Christine McGinley Scheider in Keith Walker, *A Piece of my Heart*, p43
somewhat shaped by their racial-ethnic background. Black men and women were not the only racial-ethnic minorities who served in the Medical Department, which was predominantly white, nor were black Americans the exclusive recipients of racial discrimination in the United States before they served. Nevertheless, African-Americans were the largest minority group within the Army Medical Department in the Vietnam War era. There is also a tangible relationship between black medical veterans’ views on military service and the practice of drafting disproportionately large numbers of young black men to serve in the infantry in Vietnam, and the changing discourse on military service in the black community.

One would expect the concept of American citizens having a duty to serve their country to be a more contentious issue for black medical veterans, considering the continued practice of racial segregation and discrimination in the United States in the 1960s. However, in this sample, black medical veterans tended to have interpreted military service as an honourable and sensible professional decision before they served. By the 1960s the military was functionally the most democratic and integrated major institution in the United States. It was certainly the only place in American society where one could find whites, blacks, Latinos, Asians, and Native Americans all living and working together. During the Vietnam War era blacks were also fully fruitfully employed in leadership roles in the military for the first time. Thus for many young African-Americans serving in the military was considered both an opportunity for professional advancement, and a career which would make their families and communities proud. A survey of military volunteers in 1964 found that almost twice as many blacks as whites gave self-advancement as their primary motive for enlisting. Combat medic Wayne Smith said:
My family was proud of me. The African American community was very divided about the war. There were some certainly who came out against the war like Dr. King, but there was also still a belief that we should go into the military to show the nation that African Americans could make an equal contribution to the cause of freedom and equality...The Muslims [The Nation of Islam] were always a little strange to me anyway. I wanted to fight for this country, and believe in it, and have hope in it, and contribute to it.

Smith acknowledged that the issue of military service was a source of conflict within his own community, but he had faith in the military as an institution. Smith viewed military service through the lens of both a black man aiming for career progression, and the lens of a young man of his generation fulfilling his need to contribute to his country.10

The US military offered young black men and women far greater career opportunities, and chances for promotion, than the discriminatory civilian workplace. Army nurse Marie Rodgers recalled the advantages of having joined the military as a black woman:

The Army system of promotion really helped. In other situations, as a black nurse, I wouldn’t have gotten the kind of jobs I had. In the Army they always had to give you the job you were trained for, and with that, the rank. No matter what they thought of me, they had to put me in the operating room. My sister was in telephone repair; they would hire a white

Interview with Wayne Smith in Christian G. Appy, Vietnam: the definitive oral history told from all sides p363
man and she’d teach him everything she knew and next thing you know, he would be her boss.

Rodgers expressed her gratitude towards the military in retrospect, and she also described how proud it had made her father when she was presented with a Bronze Star by President Johnson for her service in Vietnam. Rodgers’ father told everyone they knew in Birmingham, Alabama to watch his daughter receive her medal on television. Rodgers attributed to the significance of her medal to her family to the fact that ‘southern blacks wanted so much for their children, and they were stepped on all the way.’ In hindsight, Rodgers concluded that the military had been the best career option for herself, as an individual whose options would have been constrained by her working-class background, as her family could not afford to pay for college, as well as gender and racial discrimination in the American workplace in the early 1960s.\footnote{Interview with Marie Rodgers in Yvonne Latty (ed.) \textit{We Were There : Voices of African-American Veterans from World War II to the War in Iraq} (Amistad, 2004) p131}

Nevertheless, it is important to note that many black Americans’ opinions regarding military service changed in the later 1960s. This shift in opinion was influenced by the disproportionate drafting of black men into infantry units in Vietnam, and Martin Luther King’s decision to speak out against the war in Vietnam in 1967. King delivered his ‘Beyond Vietnam’ speech in April of 1967, in which he was highly critical of American involvement in Vietnam, referring to it as a ‘disgraceful commitment’. However such views were still minority position before 1968, and none of the black medical veterans in this sample remembered having shared King’s sentiments on the war before they served. Dr King’s speech was labelled ‘demagogic slander’ by \textit{Life} magazine, and King had expressed concerns
about delivering the speech at a time when the nation was still avidly pro-war, afraid that speaking out could hinder his campaign for civil rights. Wallace Terry reported in Time magazine in May of 1967 that most of the black soldiers in Vietnam at that time were generally supportive of the war effort. Prior to the politically explosive year of 1968 many black servicemen and medical personnel retained the view of military service as both their patriotic duty, and a means for professional advancement.12

On the other hand, Army nurse Elizabeth Allen’s recollection of her motivations to enlist reflected a different interpretation of her duty as a nurse and an American citizen. Allen recalled:

I knew that African-Americans were most likely to end up in battle units, in the death units, and I really wanted to do something. It had nothing to do with whether I agreed with the war or not. Folks talk about the love of God and country, but that never factored into my decision. What did factor in was that there was someone in need. My three brothers were also in the Navy at the time and I truly believe that every person who claims to be American has military obligations. I don’t believe women should be exempt.13

Allen dismissed any notion that her decision was a motivated by a sense of patriotic duty, however, she did believe that all Americans had military obligations, regardless of their race or gender. Allen’s testimony suggested that she also prioritised her obligation to serve her own family and the black

13 Wallace Terry, Bloods: An Oral History of the Vietnam War by Black Veterans, pxvi
13 Interview with Elizabeth Allen in Yvonne Latty (ed.) We Were There, p93
community, over and above her country. Thus, Allen did value the argument for military service as a duty, but her sense of duty was narrower and more specific to her racial-ethnic community. Whereas white medical personnel, particularly female nurses, had tended to interpret their duty as having civic and national dimensions, an interpretation Kennedy had helped to foster. Evidently, the factors which motivated black Vietnam era medics, and their interpretations of military service as a duty, were partly shaped by their racial-ethnic background, and often differed to that of white medical personnel.

3.2 US Foreign Policy

This section examines how medics’ perceptions of military service were connected to the way that they interpreted the American mission abroad during the Cold War. For example, J. Holley Watts recalled enlisting in the ANC because she had been inspired by Kennedy, but her motivation intersected with her interpretation of the style of US foreign policy Kennedy described in his inaugural address. Watts enlisted because she ‘wanted to be a part of it, to help spread American ideals of freedom and democracy.’ Watts’ interpretation was indicative of the way that many young Americans viewed the aims of US foreign policy in the Cold War era. Loren Baritz argued that the Vietnam generation were raised to believe in the myth that Americans were the chosen people to lead the word in public morality and to instruct the people in political virtue. Having defeated fascism in World War II, public discourse on US foreign policy in the post-war period encouraged young Americans to believe that the spirit and values of the American people would result in the strength to destroy the opponents of virtue and freedom.14

14 Heather Marie Stur, Beyond Combat, p72
This idea had been bolstered in the early 1960s when Kennedy assured Americans that ‘The energy, the faith, the devotion which we bring to this endeavour will light our country and all who serve it - and the glow from that fire can truly light the world.’ Kennedy conveyed his confidence in the American spirit, and more implicitly, his faith in US military superiority. His message encouraged a new generation of Americans to believe that US foreign policy was designed with the purpose of, and was capable of changing the world for the better.

However, rather than the Axis powers, this generation had been raised to believe that the greatest enemy of the United States, and the ideals that it stood for, was Communism. Gary Gerstle argued that:

The Cold War also continued, even intensified, fears of American vulnerability...The focus of those fears, of course, shifted from Japan and Germany to the Soviet Union and its allies in Europe and the Third World. Policy makers were obsessed with “national security,” and constantly invoked the phrase to justify large government expenditures on a variety of projects including the maintenance of a huge military establishment...National security too, meant going to war in Korea, Vietnam, and other countries in which Communist subversion threatened; at home, it meant identifying and ostracizing those individuals and groups who seemed sympathetic to communism and thus treasonous to the United States. ¹⁵

The American public, as well as its policy-makers, had come to view the American international mission, and indeed the American way of life, as being inherently

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opposed to Communism. The United States’ official commitment to halt the spread of Communism internationally was set forth in the Truman Doctrine in 1947. By the end of the following decade fear and hatred of communism had become so entrenched that many young Americans believed that being opposed to communism was a prerequisite of being a ‘true’ American. One nurse recalled thinking that ‘fearing, even hating communism seemed as American as apple pie and baseball,’ which implied that she, like many Americans, viewed communism as a threat to the entire American way of life.\textsuperscript{16}

Army nurse Lynn Hampton reflected on the development of her views of the communism in her autobiography, particularly the threat that loomed just ninety miles from the coast of her home state of Florida: Fidel Castro’s Cuba. Hampton’s account of her understanding of the situation in Cuba revealed that in hindsight, she thought that US policy on communism in the Cold War era was oversimplified, and sometimes hypocritical. Whilst at school in Tampa, Florida, she recalled having heard blood-curdling tales of Batista’s atrocities from her Cuban classmates, and therefore she had thought that the communist politician and revolutionary, Fidel Castro, was a hero when he helped to oust Batista in 1959. However, Hampton also insisted that this was because she had not known that he was a communist at the time, which implied that had she known of his political persuasion he would have been a villain in her mind, regardless of his role in overthrowing the cruel Batista regime. Another interesting aspect of her narrative is that she recalled a ‘half-conscious’ memory of being aware that the US was partly responsible for driving Cuba into Castro’s clutches, because of its support of

the corrupt Batista regime. Evidently, Hampton’s views on this matter developed and changed over time, as within the narrative she moved between the voice of her past and present self, correcting and offering retrospective analysis on her opinion of Castro and the US foreign policy.\footnote{Lynn Hampton, \textit{The Fighting Strength: Memoirs of a combat nurse in Vietnam} (New York: Warner Books, 1990) pp3–4}

Charlotte Linde pointed out that ‘the constant revisioning and retelling of a life story is a means by which we align our interior self with the exterior world.’ Hampton revised her story to reflect the dominant anti-communist discourse, and again from the perspective of her present self, a Vietnam veteran writing an autobiography towards then end of the Cold War in the late 1980s.\footnote{Lynn Hampton’s autobiography was published in 1990.} Through the process of constructing her life-story, Hampton had retrospectively cast a shadow of doubt in the mind of her past self about the morality, and inherent hypocrisy, of US policy towards communism and the Cuba during the 1950s and 1960s. This version of her past self, one which did not wholly accept the black and white image of communism as presented by the predominant Cold War discourse, was likely more aligned with her present self and so provided Hampton the opportunity to construct a more coherent life narrative regarding the development of her political views.\footnote{\textit{Lynne Hampton, The Fighting Strength: Memoirs of a Combat Nurse in Vietnam}}

American political leaders could easily drum up public support for US foreign policy and interventions abroad by drawing upon anti-communist discourse, including military intervention in Vietnam after the Gulf of Tonkin Resolution in 1964. Wallace Terry reported that in May, 1967, black soldiers in the combat zone truly believed that the American mission in Vietnam was guaranteeing the sovereignty of
a nation and halting the spread of communism. This was a political climate in which anti-communist propaganda was persuasive enough to cause Lynn Hampton to revise her memory of the Cuban Revolution in 1959, and alter her perception of Fidel Castro as a heroic freedom fighter. There for it is not surprising that, as Christian Appy argued: ‘When Presidents Kennedy and Johnson claimed that the enemy in Vietnam was not indigenous, revolutionary nationalism but Soviet and Chinese-dominated communism – part of a global threat that had to be contained – most Americans were slow to ask questions.’

However, medical veterans such as corpsman Luther Benton, who remembered feeling supportive of US foreign policy before he went to Vietnam, have often adopted a critical tone when reflecting on their views on the connection between the war and Vietnam and the global threat of communism. Benton recalled thinking ‘We have to stop communism before it gets to America,’ but in hindsight he thought, ‘I was just like all the other dummies.’ His tone suggested that Benton he had also revised and retold his life story, from the perspective of his present self, a Vietnam veteran who had concluded that a united, communist Vietnam did not threaten global security, nor the freedom and democracy of the United States. Lynne Hampton also adopted a fairly derisive tone when describing the high spirits at Medical Field Service School in 1966, she recalled, ‘we were all a little dumb, patriotic, cooperative and native!’ Both Hampton and Benton seemed to regret not having critically engaged with the intentions of US foreign policy, nor the potential implications of the American commitment to contain the spread of communism internationally. However, it is important to point out that Benton and Hampton

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20 Wallace Terry, pxvi
were already in the military by 1967, and thus it was unlikely that they had been exposed to any public discourse which had challenged US foreign policy in general, or in Vietnam specifically, before their tours began.  

3.3 The Vietnam War

This section will discuss medical personnel’s opinions on the war before they were assigned to active duty in Vietnam. Firstly, it shall establish some of the limitations of using autobiographical and interview sources to gauge medics’ understanding of, and opinions on, the Vietnam War before their tours of duty. Then it shall analyse the factors, such as, medics’ ages and educational backgrounds, and the impact of the events of 1968 on American public opinion, which helped to either foster or inhibit medics’ level political awareness and engagement with the war. Concluding with an examination of how gender roles in American society, and racial-ethnic background influenced whether individuals supported or opposed the war, and how such factors also shaped the ways that medics’ have remembered and reported their opinions on the war at this time.

3.3.1 Theoretical Issues

One cannot rely on being able to anchor one’s interpretation of veterans’ oral history and autobiographical accounts in the historical context of social and political protest in 1960s. Some narrators might not have wanted, or were not able to anchor their pre-Vietnam War life in national history, or public discourse. The 1960s are a decade commonly associated with hippies, hedonism, rock festivals,

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21 Interview with Luther Benton in Wallace Terry, Bloods, p66
Lynn Hampton, p11
and the rise of the New Left. Rebecca Klatch has highlighted that while thousands of young Americans joined protests on the left, including the anti-war movement, thousands of others mobilized in the political organisations of the New Right during college. However, medical veterans did not tend to have identify with the stereotypical image of the ‘feel-good generation’, and very few any of them identified themselves with either the politics of New Left, or the New Right.22

In this sample, most medical veterans either confessed that they were not very politically engaged, or did not discuss their political opinions before they joined the military. However, omitting to mention political views does not mean to say that medical veterans could not remember how they understood foreign policy, and the politics of the war in Vietnam at the time. One cannot simply assume that if a respondent did not mention being anti-war, that they must have been pro-war, or vice versa.

Oral history interviews are a collaborative process, in which the perceived political sympathies, ideologies and indeed the research prerogative of the interviewer also shapes the interview. Some oral history respondents might have downplayed their sympathies or support for the war in their youth, because they suspected the interviewer had anti-war sympathies. The respondent might have also been vague about their political views on the war because of their own internal struggle to reconcile the views of their past and present selves, as the majority of medical veterans considered the war to be wrong in hindsight. Many oral historians of the Vietnam War era tend to focus on the respondents’ wartime experience, and that of being a Vietnam veteran. Two of the edited collections drawn upon for this

22 Lynn Abrams, p47
Rebecca Klatch, A generation divided : the New Left, the New Right, and the 1960s (Berkeley: University of California Press, 1999) p1
thesis, Keith Walker’s *A Piece of My Heart* and Al Santoli’s *Everything We Had*, are known for their focus on the gap between the veteran and American society after the war. The interviewer’s research prerogative can therefore shape the thematic and chronological focus of the interview. This has meant that in-depth questioning on respondents’ views pre-Vietnam have often been edited out, or overlooked.\(^{23}\)

The narrative structure of Vietnam veterans’ life-stories also tend to follow a specific pattern, one known as ‘Bildungsroman’, which roughly translates to an educational story. Many veterans tell their life-stories according to the structure of a young person’s journey ‘from innocence to experience through a trying event,’ in other words, their stories are about telling their audience what they have learned. Thus, considering the fact that many medical veterans in this sample have interpreted their wartime experience as the catalyst to their politicization, it is hardly surprising that their previous political beliefs are perhaps not deemed of value to their life-story by their present self.\(^{24}\)

In light of this oft-replicated narrative structure, Vietnam veterans’ reflections on the opinions of their past selves towards the war, are shaped by two intersecting forces. As discussed previously, veterans might have considered their pre-war opinions, and by extension any form of anti-war activity they had participated in, to have been ill-informed and naïve in hindsight, and therefore irrelevant to their pre-Vietnam narrative. Some of their narratives were also constructed in relation to the dominant cultural images of the anti-war movement. As Kenneth Heineman has pointed out, the visually stunning images of anti-war protests at elite


\[^{24}\] Steward O’Nan (ed.), pp300-301
universities, and the infamous photograph of the teenage girl crouched next to the body of a Kent State University student who had been shot by a member of the National Guard, have become both the dominant cultural images of anti-war protest. The dominance of these images in public discourse on the anti-war movement might have affected Michael Patrick Felker’s perceptions of his own political views. Felker described his political views on the Vietnam War as ‘nothing real strong,’ and yet he later recalled his participation in a candlelit peace vigil outside of City Hall in Philadelphia in 1966, which suggested that he had supported the campaign for a peaceful resolution to the war. Perhaps Felker did not consider his small peace vigil to have been a significant event, in comparison to the large-scale anti-war demonstrations on university campuses, or as memorable as the peaceful protest which was violently quashed at Kent State.25

3.3.2 Age and Educational Factors

This section argues that many of the enlisted medics and nurses were still in their teens when they enlisted, and so the development of their political conscience had been interrupted by their induction the military. It also illustrates how, unlike the students on liberal college campuses across the nation, those training to become nurses and doctors were subject to intensive educational programs, and often lived on-site in hospitals, where they endured long hours were long and rigid discipline. Thus this section argues that medical veterans were unlikely to be politically engaged with the war, or have identified as ‘anti-war’ prior to joining the military.

Interview with Michael Patrick Felker, Veterans History Project, (American Folklife Centre, Library of Congress)
Developmental psychologist Karl Mannheim’s research indicated that youth is a crucial time period for the development of critical thinking, the formation of moral beliefs, and the resolution of identity crisis, conditions necessary for the formation of political ideology. Whilst many middle-class Americans were experiencing a prolongation of their adolescence, between high school and their first job or marriage. Mannheim contended that this period of adolescence was a time free from the pressures and commitments of adulthood, and therefore a particularly fertile time for intellectual and political growth. However for many Vietnam War medics’ this period of adolescence was interrupted by their assignment to serve in the combat zone.  

In this sample, many enlisted medics were still teenagers when they began their tours of duty as corpsmen and field medics. The majority of nurses were, on average, a few years older than soldiers, they were mostly in their early twenties and barely out of their intensive nursing school programs when they enlisted. For the most part, enlisted medics and nurses had not been able to enjoy the time and space to nurture and expand their political thinking, as many young Americans did during their years in college.

The structure of nursing programs in the late 1950s and early 1960s also inhibited opportunities for women nurses in training to become politicized. For those studying for a diploma in nursing, practical on-the-job training was a crucial element of their educational experience and often required the nurses to take up residence in the hospital for the duration of their training. As Elizabeth Norman conveyed in her study of fifty Vietnam nurses, student nurses had very little time

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26 Rebecca Klatch, A generation divided : the New Left, the New Right, and the 1960s, p4
27 Michael Patrick Felker, John Bennett and D.T. McGuff were teenagers when they went to Vietnam.
to think about questioning government policy whilst they were enrolled in hospital schools. Judith Peteiski described the rules she lived by in the Lutheran Hospital School, Milwaukee from 1964 to 1967:

Oh, yes. Yes, there was a nurses’ dormitory. This was the ’60s, but my life was certainly not the wild life of a lot of people in the ’60s because we had very strict hours. We had a dorm mother and the door was locked at a certain hour on weeknights and a half hour later on weekends. If you missed curfew and I don’t remember exactly what happened, but it was pretty bad. You were grounded for the next, I don’t know, week or whatever. So, yeah, it was pretty strict.28

Lynda Van Devanter was also enrolled in an intensive, live-in, nursing program at Mercy Hospital in Washington D.C., she wrote, ‘Mercy was a completely isolated environment where the only thing that mattered was nursing. There was little time for other concerns.’ Like Lynda, Lily Adams said ‘I was never involved in peace or protest movements because when I was in high school that wasn’t the “in” thing to do. The peace stuff didn’t get popular till I hit nursing school, and in nursing school I was working too hard to pay attention to what was going on outside.’29

Nursing school was an environment far removed from Ivy League and state college campuses, known to be hotbeds of student activism and protest from the mid-1960s. Judith Rose Peteiski commented on the political climate in Milwaukee while she was training there:

28 Elizabeth Norman, Women at War, p10
Interview with Judith Rose Peteiski, The Vietnam Archive, Texas Tech University pp4-5
Lynda Van Devanter, Home Before Morning, p38
29 Interview with Lily Adams in Kathryn Marshall p206
Well, it certainly was on the radar. There was a lot of other tension in Milwaukee at the time...Within the city of Milwaukee, I mean, we had Marquette University and the University of Wisconsin, Milwaukee and lots of—and Madison down the road, which was and still is a hotbed of very liberal thought. So, yeah, I mean, we were very well aware of what was going on, but we were in a very cloistered kind of immediate circumstance...I don’t know that you could ever separate domestic issues, situations, from what was happening overseas or whether one fed off the other... A friend of mine attempted to express her negative opinion of what was happening in Vietnam by doing a door decoration with newspaper articles about Vietnam and soldiers lost. It was a very dark and depressing Christmas, certainly not what one would expect to see as a Christmas door decoration. She got in trouble for doing that. It was absolutely true, everything that she stated and attempted to express was true, but in the little tiny context of my dormitory that was not appreciated.  

Peteiski was certainly aware of the turbulent political climate in Milwaukee in the mid-1960s, however, unlike on the university campuses nearby, anti-war sentiment was quashed within the walls of her nursing school. Nurses did not have the time, nor were they encouraged to engage with politics and the anti-war movement whilst in training.

American institutions of higher education had their own political agendas, and many were supportive of US foreign policy, and by extension, the Vietnam War. Kenneth Heinemann highlighted that in 1968, a year marked by mounting anti-war demonstrations, American universities spent $3 billion annually on research and

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30 Interview with Judith Rose Peteiski, p7
development projects, and seventy per cent of that money came from the federal government, much of it from defence-related agencies. Thus many universities, colleges and nursing schools advocated a more conservative political ideology and actively discouraged the student body from participating in the anti-war movement, because it was in their interests to quash anti-war activity. In 1968 eighty per cent of American university trustees in favour of the expulsion or suspension of students involved in political activism, a policy which undoubtedly suppressed political activity on many campuses.31

Doctor Edward Feldman partly attributed his lack of political engagement with the war in Vietnam, to the ‘ultraconservative’ environment at the Columbia University College of Pharmacy in the early 1960s. He recalled the comparison between his college, which did not permit students to have facial hair, and dictated that male students had to wear a tie to class, and other colleges in New York which allowed students to wear jeans, combat boots and fatigues, and to let their hair grow long, a look associated with ‘hippies’ and anti-war protesters. He recalled:

They just had this very conservative notion of, “Keep your mouth shut, don’t ever cheat on an exam, and don’t ever talk politics.” So coming from this rather rigid environment where my college had been without the opportunity for any creativity or elective education, it was very regimented. Medical school was a little bit more of the same and I didn’t know any other way.

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31 Kenneth Heineman, Campus Wars, p13
Heineman pointed out that universities, like Feldman’s, in which the majority of the student body was either pro-war or apathetic offered more accurate reflection of American society in the Vietnam War era.  

3.3.3 The Impact of 1968

The events of 1968 tore at the social and cultural fabric of the post-war United States, and caused a crisis in American self-confidence. Many Americans had believed victory in Vietnam to be inevitable until the Vietcong launched a massive countrywide attack, known as the Tet Offensive, between January and February of 1968. Whilst Tet was a crushing defeat for the Vietcong, it stunned the public, the majority of whom had still favoured a “tougher” policy in Vietnam up to that point. As a result of Tet, and America’s ‘most reliable journalistic personality,’ CBS news anchor Walter Cronkite, broke the unspoken gag rule on criticizing the war, and publically condemned continued American involvement in Vietnam. That year President Johnson’s approval ratings plummeted, as did public support for the war. Therefore, one might presume that individuals who began their tours of duty after 1968 were more likely to identify as anti-war, because they had been exposed to a more negative public discourse on the war. In this sample, almost all of the men and women who expressed having been sent to Vietnam against their will, enlisted or received orders for duty in Vietnam either after the developments of early 1968.  

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32 Interview with Edward Feldman, The Vietnam Archive, Texas Tech University, p33
33 Stewart O’Nan, p8
Mitchell Hall argued that the unrelenting television coverage of the horrors occurring in Vietnam in 1968, from self-immolating monks to Vietnamese children with horrific napalm burns, had contributed to American war weariness and led many to question presidential war policies. This was compounded by Walter Cronkite’s special broadcast from Vietnam in February expressing his disappointment with American leaders and concluded that the only rational way out of Vietnam was to negotiate, ‘not as victors, but as an honourable people who lived up to their pledge to defend democracy.’ Cronkite appealed to apathetic and pro-war Americans, who had believed the US was fulfilling Kennedy’s pledge to defend freedom and democracy in Vietnam, to reconsider their logic. 34

Nevertheless, it is doubtful that all who served after 1968 interpreted the events and the impact of that year in the same way. The political climate of 1968 was not so straightforward, there was a concerted conservative backlash by the white middle-classes. Republican candidate Richard Nixon also won the Presidential election in 1968, and polling data indicated that the third party candidate, Alabama Governor George Wallace, who was openly anti-government, anti-civil rights, and pro-war, had polled best among voters under thirty years old. 35

Many medical veterans had remained supportive, or apathetic about the war, because they could not relate to the college students who were the most visible representatives of the anti-war movement. Those participating in the large-scale anti-war demonstrations throughout the Vietnam War era tended to be affluent, white, university students, from Northern states, who were most often the

Gregory Allen Olson, (ed.) Landmark Speeches on the Vietnam War pp124-125
35 Kenneth Heineman, p5
children of liberals and old Leftists. Overall, the majority of members of both the anti-war Students for a Democratic Society (SDS) and the pro-war, New Right organisation Young Americans for Freedom (YAF) came from privileged backgrounds, and both parents of over half of all activists in Rebecca Klatch’s study had completed at least part of a college degree.\(^{36}\)

Parental influence was evidently one of the decisive factors in shaping the feelings of medics towards the war. The majority of activists in Klatch’s study fell on the same side of the political divide as their parents, which she argued confirmed the lineage of political ideology from parents to children in this era. Some felt that their political upbringings would alienate them from the student demonstrators, regardless of their class status. One respondent in Mark Baker’s *Nam* admitted that he secretly identified with Students for a Democratic Society (SDS) protestors on his college campus, and yet he felt that because he had been brought up as a conservative Republican that the organisation would never accept someone like him.\(^{37}\)

Lynn Hudson also attributed her lack of involvement in anti-war protest to the influence of her family and political upbringing, she said, ‘because I was a child of a military family... I had a lot of pride in the fact that to serve the country and serve in the military force,’ and when asked what her parents had thought of her joining the Army Nurse Corps she remembered, ‘I think that they were proud. My father actually swore me in so I have all these wonderful pictures of my dad, a naval officer, swearing me in.’ The most important men in Hudson’s life, her

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\(^{36}\) Gary Gerstle, *American Crucible*, p315  
Rebecca Klatch, p38  
\(^{37}\) Rebecca Klatch, pp42-43  
Stewart O’Nan, p313
father and her husband, were both in the military, which made it highly improbable that she would have spoken out against the American military mission in Vietnam, even after the Tet Offensive.\textsuperscript{38}

However, Christian Appy has argued that the association of the college-educated, middle-class as ‘dovish’ as opposed to the presumption that working-class, white Americans were ‘hawkish,’ was a ‘grossly misleading stereotype.’ Appy blamed the mass media for this distorted stereotype, because, ‘Rather than documenting the class inequalities of military service and the complex feelings soldiers and their families had about their society and the war in Vietnam, the media more commonly contributed to the construction of an image of workers as the war’s strongest supporters, as super patriotic hawks.’ In this sample alone, it was a middle-class, college educated surgeon, David Smith, who identified himself as an ‘absolute hawk’ when he went to Vietnam in 1968, he was so committed to Johnson’s Vietnam policy that he almost brawled with a man in a restaurant after he criticized the war. Whereas Jill Mishkel, who went to Vietnam in 1970, came from a working-class family in New York, had identified herself as a ‘hippie’ who, ‘Smoked pot. Hated Nixon. Thought the war was wrong,’\textsuperscript{39}

The effect of class background on medics’ opinions on the war was more nuanced than the division of ‘doves’ and ‘hawks’ along class lines. The majority of medics in this sample came from lower-middle and working-class backgrounds, and such families tended to encourage their children to focus on their studies, rather than protesting, partly because they were afraid that participation in political activism

\textsuperscript{38} Interview with Lynne Hudson, The Vietnam Archive, pp5-6
\textsuperscript{39} Christian G. Appy, \textit{Working-Class War}, p38
Interview with David Smith in Christian G. Appy, \textit{Vietnam}, p168
Interview with Jill Mishkel in Kathryn Marshall, p136
would damage their employability. For example, Lynda Van Deaverter’s lower-middle class, Catholic parents were extremely concerned by their daughter’s participation in civil rights activism during high school. Devanter retrospectively considered why her parents were so opposed to her participation in civil rights organizations in her autobiography:

As a high school junior and senior, I became involved in the Congress on Racial Equality and the Student Nonviolent Coordinating Committee. It wasn’t that Dad objected to racial equality. He was concerned that by belonging to organizations that were led by people like Stokeley Carmichael and H. Rap Brown, I would jeopardize my future. He had lived in Washington during the McCarthy era and didn’t want to see his daughter hurt by good faith participation in groups that might be viewed as communist fronts.

Deaverter’s political participation was restricted because her parents expressively forbid any further participation in civil rights, or any other type of political demonstration or activity. As a lower-middle class family with four children, Deaverter’s parents felt they could not allow their daughter to damage her chances of gaining a well-paid government job in the future, as Deaverter had few employment options as a lower-middle class woman without a college education.40

**African-American Opinion and 1968**

In April, 1968, civil rights leader Martin Luther King was assassinated, sparking race riots across the country. By 1968, anti-war sentiment had spread to the angry, disillusioned veterans of the civil rights struggle, who challenged America’s claim to stand for freedom and democracy at home and in Vietnam, whilst repressing

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40 Kenneth Heineman, p81
Lynda Van Deaverter, p37
African-Americans. Wallace Terry argued that by the beginning of 1969, a new type of black soldier had emerged, and unlike the career driven black soldiers which preceded them, these young black draftees were filled with a new sense of black pride and purpose.41

However, the evidence collected for this study is not sufficient to offer a critical analysis of the impact of 1968 on the opinions of black medical personnel. Firstly, only Wayne Smith began his tour of duty after both the Tet Offensive and the King assassination. Secondly, it is problematic to apply Terry’s argument to this sample group, partly because the racial framework of his research has its limitations. Specifically, Terry’s sample did not focus on medical personnel, and completely excluded female veterans. Therefore this section cannot adequately assess the role of racial-ethnic background in determining medical veterans' interpretation of the events of 1968.

Evidently, the medical personnel in this sample were not simply swayed by the changing public discourse on the war which resulted in the aftermath of the Tet Offensive, but rather their opinions on the war were shaped by a multitude of factors. However, this section’s analysis of the impact of 1968 revealed that the majority of medical veterans were relatively unengaged with the politics of the war, regardless of whether they served prior to, or post-1968.

3.3.4 On the Vietnam War

This section analyses the ways in which Vietnam era medical personnel have interpreted their awareness and opinions on the war before they served. Many of the enlisted medics and doctors in this sample were vulnerable to the draft, and

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41 Gary Gerstle, p315
Wallace Terry, pp.xvi
six were drafted, including doctors James Evans, Robert Rankin and Byron Holley. Whereas the women in this sample were not vulnerable to the Selective Service System. However, more women recalled being opposed to the war, and yet wanted to volunteer for military duty simultaneously. With this gendered pattern in mind, this section argues that medical veterans’ opinions on the war were shaped by how they had perceived their likelihood of being sent.

**Male Testimony**

Byron Holley did not remember knowing much about the war, other than what he had read in the newspaper, or seen on television, when he was working as a doctor in Memphis in 1967. Although he did admit that he felt comfortable knowing that Vietnam was on other side of the world. Holley had given neither the war, nor the possibility of being drafted, much thought, even after he had heard that a classmate from Medical School had been drafted. Doctor James Evans described what he and his fellow medical students knew about the escalation of the war in Vietnam, and if he worried about being sent to war:

> Well certainly in the background for all of us, but there was like ’67 Israeli War and then you know we were concerned that medical education might be accelerated to get us out and to get us into the Armed Forces, something else had developed from that. All these things were brewing... Well you know when they said about Vietnam I mean we all laughed. We didn’t talk about it, because it was going to be over. It wasn’t going to get us.

Neither young doctor seemed particularly fazed by the war in Vietnam, which perhaps reflected that, as medical students, they had felt little reason to engage with the war personally. Holley and Evans had thus far been protected from the
draft by student deferments, and so perhaps believed that by the time they were fully qualified doctors and susceptible to the doctor draft, the war would be over. It is also possible that they felt their profession, and the non-combatant status of medical staff, would have offered them relative safety if they were to be sent to Vietnam.\footnote{Byron E. Holley, *Vietnam 1968 - 1969: A Battalion Surgeon’s Journal* (New York: Ivy Books, 1993) p1 Interview with James Evans, The Vietnam Archive, Texas Tech University p14}

On the other hand, infantry medic David Ross enlisted aged nineteen, because, he recalled thinking, ‘when your country needs you, you go. You don’t ask a lot of questions, because the country’s always right. This time it didn’t turn out that way.’ Ross’ feelings about not asking questions link in with the point previously made about young Americans’ belief in the inherent virtue of their foreign policy. For Ross this faith in US foreign policy translated into the assumption that he need not question the motives behind the war in Vietnam, nor find out about it for himself, a decision he seemed to have regretted retrospectively.\footnote{Interview with David Ross in Al Santoli, *Everything we had: an oral history of the Vietnam War / by thirty-three American soldiers who fought it* (New York: Ballantine Books, 1982) p44}

Whereas, eighteen year old Michael Patrick Felker was terrified of being drafted in 1968. He recalled that his view was informed by, ‘Basically watching the news at night, Walter Cronkite, seeing the footage…I mean I didn’t know that much about the war but I didn’t think it was right. I didn’t see that it served a whole lot of purpose. I mean I was still formulating things in my mind.’ His description was vague, and he mumbled this sentence, which was largely hinged on aspects of public discourse, notably the influence of Walter Cronkite. His speech suggested that he might have struggled to construct a narrative about this difficult episode in his life. Felker also downplayed his participation in a peace vigil, and here
belittled his identification as a Conscientious Objector during the War. This might have been because Felker felt unconfident in his own opinions, and perhaps regretted in hindsight being too afraid to risk resisting the draft.  

On the other hand, teenagers Michael Patrick Felker and David Ross might simply have been too young before they enlisted to have been confident in the value of their own judgements on the war. Christian Appy highlighted that many young men found themselves accepting induction to the military, because confronted with the power of state they worried that they lack the ‘expertise’ about the ‘specifics of the conflict’ to be critical of state policy. Many likely offered little retrospective analysis of their pre-Vietnam opinions, as those opinions were often far removed from their views on the war after their tour of duty.

Female Testimony

Nurses often confessed to having known little about the politics of the war before they were assigned to active duty in Vietnam. Lynne Hudson admitted:

I was woefully ignorant about the political environment that created Vietnam and I was probably a good American citizen, but not studying the history. I did not know, really, why we were there. It just was kind of blindly knew that the United States had engaged in an involvement with a country in Southeast Asia because of that sort of domino theory and the fear of communism but I didn’t really understand the political borders or the history of the country.

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44 Interview with Michael Patrick Felker, Veterans History Project
45 Christian G. Appy, *Working-Class War* p52
46 Interview with Lynn Hudson, p5
Interestingly, nurses who served after 1968, and even those who identified themselves as anti-war, still seemed to be relatively unengaged with the politics of the war, or their potential role in the war effort. Marsha Jordan recalled that in 1968:

Like probably most people, I was hearing some of the things about Vietnam. You know, the casualties. So I knew the war was going on, but for some reason, I never paid much attention to it. At that point, it just wasn’t something that I was listening to. Even when I was coming in the military, it just didn’t hit home.  

Lily Adams also served from 1969, but she was not particularly concerned about finding out about the war for herself, she remembered that:

I was going steady with a boy...and he and a number of other friends were really scared about getting drafted and going to Vietnam...I was always getting information from girls that were dating guys in college - information for my boyfriend...I had to help him deal with the decisions on what he was going to do...I felt very guilty that a lot of guys I knew got drafted and that girls didn’t.

Rather than concerning herself with the political and moral reasoning behind American involvement in Vietnam, or about how the war was being fought, Adams was worried about the ramifications of the draft for her boyfriend. Adams’ account suggested that even though she had committed herself to two years active service through the Army Student Nurse Program, she did not think her service would entail a tour of Vietnam.

47 Interview with Marsha Jordan in Kathryn Marshall, p158
48 Interview with Lily Adams in Kathryn Marshall, p206
Nurses might have considered their opinions on the war irrelevant to their decisions to enlist in the military. Party, because Nurse Corps recruiters had assured potential recruits that they would only be sent to Vietnam if the volunteered for active duty in the combat zone. This was also possibly an extension of the way that young women had been taught to view their profession. The Nurse Corps’ recruitment strategy had always emphasised that a nurse’s duty was beyond reproach. Wartime nurses were portrayed as ‘angels of mercy and emissaries of good will.’ As Kara Dixon Vuic argued, Vietnam-era nurses did not tend to interpret their contribution to the war effort in Vietnam to have been a political commitment, before or after they served.49

However as the war dragged on and the anti-war movement gained strength it became harder to separate nursing and the war, but many did exactly that. Nurses have often reflected upon their desire to combat the devastating effects of the war, by treating the suffering soldiers and civilians in Vietnam. As mentioned previously, Elizabeth Allen said that whether the war was right or wrong had nothing to do with her decision to enlist, the fact that American men were in need was enough to convince her that she too was needed. Army nurse Gayle Smith remembered that she had felt opposed to the war long before she decided to enlist in 1970, she recalled, ‘I objected to the war and I got the idea into my head of going there to bring people back . I started thinking about it in 1966 and knew that I would eventually go when I felt I was prepared enough.’

49 Kim Heikkila, p28
50 Kim Heikkila, p28
Interview with Elizabeth Allen in Yvonne Latty, p93
Interview with Gayle Smith in Al Santoli, Everything We Had, p125
Both Allen and Smith drew upon the public discourse of duty in correlation with the caring narrative. Smith was potentially resolving an internal struggle in her narrative, and might have been trying to convince herself in retrospect that her opposition to the war and her desire to serve the sick and wounded, were not inherently paradoxical. The caring narrative, drawn on by many in this sample who described feeling an emotional pull towards Vietnam, also implied that nurses still believed, and perhaps felt the need to reinforce, that nursing was distinguishable from the politics of the war itself.

3.4 Conclusion

This chapter has analysed the influence of a variety of overlapping factors, including gender, racial-ethnic background and social class in shaping medical veterans’ and understanding of military service, US foreign policy and subsequently, the Vietnam War. However, in general, medical personnel did not recall identifying with the burgeoning protest movements of the 1960s, or the politics of the anti-war movement. Nevertheless, the ways in which medical veterans’ have either engaged with their political apathy, or their naïve faith in the virtue of the United States and its intentions abroad, revealed a narrative pattern specific to medical veterans as a social group.

In a similar fashion to chapters one and two, this chapter has discovered that medical veterans’ tended to emphasise their naïve faith in the military, notions of civic duty, the virtue of US foreign policy and by extension, the war in Vietnam. Yet, the evidence in this sample suggested that medical veterans were also susceptible to influences other than the patriotic, anti-communist discourse. Therefore, this chapter argues that as a social group, medical veterans have often
reflected upon their political naivety before going to Vietnam, and their belief that enlisting in the military was an honourable way to serve one’s country. This perhaps heightened the sense of tragedy in their life stories, because as Vietnam veterans they had been both disappointed and betrayed by the country whose ideals they had pledged to defend.
Conclusion

This thesis set out to answer questions pertaining to why this particular group of young Americans wanted to join the military, specifically the US Army Medical Department, and by extension what made them decide to go to war. Whether they intended to serve in the Vietnam War, or not, is beyond the scope of this thesis. However, the findings of this thesis have provided an essential the framework of understanding, which will help to shape the direction of further research into the life narratives of Vietnam era medical veterans.

Having conducted a critical analysis of the personal testimonies of medical veterans in oral history and autobiographical sources, which considered the intersectionalism of their individual identities, this thesis concludes that these men and women were not part of a discernible social group before they served in Vietnam. Their recollections of their pre-Vietnam ambitions, educational experiences, social backgrounds and political beliefs have indicated that this was a diverse group of young Americans. There was certainly evidence of common themes in their reflections on why they had enlisted in the military. Yet, many of the common themes referred to, such as, male personnel remembering how they longed to emulate John Wayne’s character Sgt. Stryker in *Sands of Iwo Jima*, or nurses who claimed to have been inspired to enlist by JFK’s inaugural address, were also hallmarks of American public memory in the 1950s and early 1960s.

As Penny Summerfield has argued, individuals do no draw upon public memory, or discourse, indiscriminately in the production of personal memory. The story told is always the one preferred amongst other possible versions because it allows the narrator to produce a coherent life narrative and achieve subjective composure.
This thesis has found that the ways in which Vietnam-era medical veterans have created coherence and have achieved composure in their life stories, suggested an element collective experience and sense of shared narrative purpose to their personal testimonies.¹

Therefore this thesis concludes that the professional experience of serving as a nurse, doctor, surgeon or enlisted medic in Vietnam was so distinct, traumatic and life-changing experience, that its impact on the creation of medical veterans' life stories has often transcended the boundaries of gender, class, and racial-ethnic difference, and produced a narrative pattern distinct to Vietnam-era medical veterans.

Their shared experience of serving in Vietnam confounded medical veterans’ expectations of war, and any idealised view of their professional role in the war zone. It was the shared experience of serving in the Medical Department in Vietnam which moulded them into a social group with a common history, grievances and unfortunately, emotional and psychological problems. Of the estimated 2.8 million Americans who served in Vietnam, nearly 800,000 have suffered from some sort of emotional problem.²

However, psychological studies on the impact of the Vietnam War still tend to focus on the combat soldiers, and therefore such studies have privileged the male, combatant experience of Vietnam, and continued to overlook the experiences of all military women and non-combatant. Therefore further research into the experiences of both the war and of coming home from the perspective of medical

¹ Penny Summerfield, Reconstructing women’s wartime lives: Discourse and subjectivity in oral histories of the Second World War (Manchester: Manchester University Press, 1998) p17
veterans is necessary to the development of a full, rich and representative account of the American experience of the Vietnam War.
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