

July 1st we admitted eight patients, and by the end of the month thirty-four patients had been admitted. We had two births during this month, one German and one Japanese.

During July three U. S. Public Health Service nurses were transferred here, which enabled us to cover for a twenty-four hour period.

At this time we had three Japanese and two German doctors, one Japanese dentist, and one registered pharmacist on our staff. I believe special mention should be made of our pharmacist. He operated a drug store of his own for years, has a son in our Army. At the present writing he has been on our staff two and one-half years. With the exception of one week's vacation (which we insisted he take) he has worked six days a week. He is always trying to figure out how we can save money on drugs. After one German repatriation, when bushels and bushels of drugs were returned to the hospital, he cut all prescriptions in half, including those of the Medical Officer in Charge, telling the patients, "Bring back the empty bottle, and I'll refill it." We use enormous quantities of Calomine lotion and heat powder. He would stand for hours and hours making it, because it was so much cheaper for us than to buy it. You would really think it was his money that is tied up in that drug room -- and no one could ever talk him out of any drugs without a written prescription. To date, we have filled approximately 30,000 prescriptions; this does not include medicine dispensed to the wards and clinics.

It always seemed strange that the majority of internees never believed, or refused to believe, how unavailable so many things were and how much effort it had taken to procure what we had. By August of 1943 we felt very fortunate in having secured all the supplies and equipment on hand at that time. During this month, one of the internee doctors made up a written report to the German and Japanese Spokesmen. In four type-written pages there was not one complimentary statement for the "authorities". The closing paragraph reads: "At present we are inclined to believe that the authorities feel justified by the prevailing health situation to pay only little attention to health problems. However we wish to make it quite clear that any complacency in this matter is entirely unwarranted as the situation is far from being under control, and danger is just around the corner." The only thing the "authorities" had done in six months was build, equip, and staff with officials, a seventy bed hospital with clinic facilities. Any treatment or diagnostic measures not available at the camp, because of a national shortage, were available through contract at the local hospital.

The eye-glass situation was one of our biggest headaches. The internees made an issue of it early. The officials tried to contact an optometrist locally but without success. Letters were written to the Officer in Charge, letters to the Swiss Legation, letters, letters. They sounded as if the American Government was deliberately trying to ruin the eyes of every internee. A contract was finally made in September 1943 with an optometrist about forty miles from camp, and ten internees were taken up at routine intervals. This was a most unsatisfactory arrangement, and there seemed no end to the list. At last, in March 1944, arrangements were made for an optometrist to come to camp twice a month. This proved very satisfactory and has continued up to the present date, but there is still a long waiting list, and I expect there will be up until the end, even though to date we have done over 1,400 refractions, and repairs far exceeding that number.

A large pressure cooker used in canning had been installed in one of the buildings in camp. We thought this might have possibilities as a sterilizer. The goods often came out damp, but, by careful handling, we felt we were observing some form of surgical technique with our obstetrical cases. This we used for about three months, until October, 1943, when our much longed for sterilizer arrived -- a combination autoclave, water and instrument. Such a small statement of fact, but how much work and persistence it had taken to obtain it! We could now do major surgery! And in November we received a portable dental X-ray machine. We were fortunate in that our Public Health Service dentist now how to operate it; so that we could have almost any kind of an X-ray we desired. The few he could not manage, we continued to send into town.

November brought tragedy to the Medical Division. We had our first death in camp, and it happened to be one of our internee staff members. He worked as a laboratory technician, was very conscientious. A comparatively young man, he was suddenly stricken with cerebral hemorrhage and died in a few hours. The entire hospital internee staff, German and Japanese, attended the funeral in uniform. They made rather a nice appearance marching off together all in white. Since it was a Nani ceremony, the official staff did not attend.

Some other divisions in camp may have had a problem, but to me it seemed every one was made medical. A shower is out of order -- only hot water runs. A committee comes in. "It is not maintenance but medical. If anyone is burned, wouldn't you have to take care of them?" The water in the swimming pool has not been changed for a month; the garbage cans around the area are not washed every day; all over the area faucets are left running, creating puddles which breed mosquitoes -- it is our responsibility to see that they are always turned off; grass is growing between the houses forming an ideal place for snakes and black widow spiders -- we must keep it cut short; we must also see that no scrap lumber is allowed to pile up, that no empty tin cans are found within 300 meters inside or outside the fence. We should not permit any climbing plants or vines to be grown on buildings. We must see that each family is supplied with a fly "catcher". The houses are too hot; we must see that they are insulated; they are too cold; we must see that they are heated properly and have rugs supplied for the floors. Pappa doesn't want to sleep with Mamma, because he is nervous (or vice versa); so wont we say they need single beds? Mamma has just had a baby and needs a girdle. She hasn't time to take any exercise. Mamma also thinks there is something wrong with Junior's feet, and he needs special shoes. If we do not recommend new shoes, Mamma is indignant and insists we are mistreating Junior. Mamma doesn't like to cook (and I expect Pappa doesn't like her cooking); they try for a medical recommendation but have no reason. However, Mamma has a wart on her hand and wishes it excised. The operation is scheduled. When she is in the operating room, she again brings up the mess hall question. The request is refused for such a minor operation -- Mamma then refuses the operation and walks out of the operating room. The hospital should furnish disinfectant for the barber shop. Diapers must always be birdseye or flannel (these were not available for a while). Nice, soft, clean, white flour sacks, of which we have plenty, just aren't good enough, and our government should be ashamed to try and force flour sacks on them. Pappa cannot tolerate heat; so wont we recommend an extra egg each day? Or he is incontinent, and couldn't

no had

he have an extra ration of toilet paper? With truth or fiction, almost every internee tried to obtain everything he desired. And thus it went, day after day: requests and complaints -- never an encouraging word from the internees, never a sign that they appreciated the efforts on our part.

During these days, that red, white, and blue flag up against the Texas sky became more beautiful than ever. All the arrogance, insults, discouragement directed at us really was directed against that flag; but she expected us to be diplomatic and kind to these people who hated her so, and perhaps in time they would hate her less.

Occasionally we would have a gathering for the hospital staff in the mess hall -- a birthday or some other special occasion. We would leave a skeleton group on duty. There was one party before Christmas in 1943, and I wondered then in how many places in the world German, Japanese, and American nationals sang Christmas carols together (and this may not be medical history except that some of our nurses aides were in the group, but it is History). Christmas Eve of 1943 -- interned Japanese and representatives of the government who had interned them sang Silent Night together. There was a big, well lighted, well guarded fence between them that meant nations at war -- in perhaps the most cruel war of history. We knew, and I think the Japanese did too, that if all the world could always have the Spirit of Christmas Eve in their hearts, there would be no war.

The majority of our internee employees have been loyal to us. We tried to convey, and to their credit, in most cases it was not necessary, that when you were ill, it did not matter whether you were Japanese, German, American, or Italian; you are all on common ground then. In the area, the Buddhists may object to the Christians, the Nazis to non-party members, but during their working hours in the hospital, that feeling is left behind. When one occasionally forgets that the hospital is neutral ground, either we or one of their own group points out how wrong that attitude is. Sometimes they work long and hard. In an emergency especially, it makes you very happy to see how they step in and do anything required. It also gives you quite a feeling of pride in people to be in an operating room and see Germans, Americans, and Japanese all working together to save a life, when at that moment in other parts of the world, relatives of these same people are trying with equal vigor to destroy each other.

All internees were vaccinated for smallpox. The German group objected to typhoid immunization, since it was not requested at repatriation time. The statement was made that it would be much better to have it done after they returned to Germany, since the quality of typhoid immunization used was much better there. We did not press the issue, such as we would have liked to send all repatriates back immunized for typhoid.

All Japanese, however, received typhoid immunization and kept current with boosting shots every year. It was interesting working in the typhoid line. Japanese children are, as a rule, well trained; even the babies seldom cried. There would be Peruvians, Japanese born, and American born in that line. Sometimes we would give as many as 500 shots a day. You did not know them all, but as they came down the line, you could pick the American-born

Japanese boy or girl every time. They had something in their manner, in the way they walked, talked, looked you straight in the eye, that the others did not have. Their smile seemed sincere - spontaneous. They had a confidence, coolness, independence that I suppose just goes to make an American.

Immunization for whooping cough and diphtheria was optional. The majority of parents, however, desired it for their children.

The small Japanese repatriation in September of 1943 did not affect the Medical Division to any great extent. We lost two of our internee doctors and two nurse's aides, but two other doctors were transferred here from other camps.

The German repatriation in February of 1944 was different. We lost the majority of our nurse's aids and orderlies -- a doctor also. The majority did not seem very happy about returning to Germany. The day they were to leave camp, they all hung around the hospital until the time arrived for them to be processed. Some had been born in the United States, others in South America. Very few really knew much about Germany but seemed certain they did not want to return. However, they knew they must go with their parents. Even some of the older ones seemed sad about returning. It was the younger ones, though, for whom your heart ached. Much as we hated to see our group broken up, the repatriation also relieved us of a number of "stinkers". As they were loaded on the buses, you watched them go and remembered the arrogance, the hatred, the insults you had taken day after day, and felt that the future months would not be so hard; I do not believe they were, either.

Up until this time, our staff was largely German. As we rebuilt, we took on more and more Japanese, so that the German repatriation in January of 1945 affected us very little. However, again we lost a lot of headaches.

In July of 1944 we received a large movement from South America -- about five hundred. After they left New Orleans, an epidemic of measles broke out, which, of course, necessitated their isolation within the camp, and we made daily house to house rounds. There were seventy-three known cases of measles, numerous boils and skin diseases due largely to malnutrition. This was a newly constructed area - no shade of any kind - and the temperature hovered around 112°. It surely was a long hot walk around that section. After the first week, a couple living at about the half-way mark always had a pitcher of ice cold lemonade waiting for us. Where they acquired the lemons we never knew -- they were not issued that number -- but the lemonade was always there. They knew no English and we no Japanese, but we tried to convey our thanks and appreciation for their thoughtfulness. As soon as the quarantine was lifted, we immunized the entire group for typhoid. By this time a small area had been covered with canvas to give a little shade. Instead of having the group come to the hospital, we would take a couple of internee assistants from our staff and give the "shots" under this canvas covered spot. After we were finished, the women would serve iced tea flavored with vanilla. It was delicious. The women would serve, then, in accordance with Japanese custom, disappear, and only the man would remain.

In general, the health of the camp has been remarkably good. We have had the mild epidemics of influenza, strep throat, and diarrhea normal in any

community. We have had several stillbirths, two children who died by drowning, and one child who sustained a fatal injury when struck by a truck. Other than these, all deaths were due to a cause already present at the time of internment. This, I believe, is unusual for a town this size over a two and one-half year period.

V-E Day and V-J Day passed without any apparent change in the attitude of our staff. One incident occurred, however, which I believe is of interest. An intelligent Japanese had been with us for two and one-half years. He is loyal to Japan and proud of it, but when working with us, he was always extremely cooperative and of tremendous help. He was an excellent interpreter, often gave good advice, and would see that any assignment we gave was carried out. The day after V-J Day, he came into the office with more hatred on his face than I have ever seen on anyone. "I congratulate your country," he said, and, shaking his finger, "I congratulate your country, but I'll get your country yet!" He walked out of the office, and the next day he was back, just as pleasant, cooperative, and helpful as ever.

Since the opening of the hospital July 1, 1943, there has always been an official on duty, except for a twenty minute period, at which time the entire official staff attended a fifteen minute memorial service for the late Franklin D. Roosevelt. We simply told the internee staff where we were going and that they were to take over completely. When we returned, one sat near the telephone; another held a position in the hall which commanded a view of the front and back door; the remainder were doing their work as usual.

For those interested in statistics, the following is submitted as of July 1, 1945:

27,614 complaints were treated with
84,200 out patient treatments

1,770 patients have been hospitalized with
16,772 days relief at camp hospital

155 births with 22 deaths, including stillborn births

204 major operations

881 minor operations
9,225 immunizations
11,107 house calls
1,298 refractions

We still continue to send patients outside for special treatment or consultation. There have been approximately 800 such trips, including trips to Crystal City and San Antonio, Texas; New Orleans, Louisiana; Lexington, Kentucky; and Baltimore, Maryland. No matter what the cost, no patient ever went without the treatment recommended.

I'll mention only two of these special cases. One was a young man, twenty-one years of age, who gave a history of having infantile paralysis at the age of

two years, which resulted in a paralysis of the left leg muscles with instability of the ankle joint and partial paralysis of the thigh muscles, which also caused weakness of the knee joint. Our government fitted him with a hip length leg brace. While learning to use the brace, he, of course, used crutches, then a cane. Now when you see him, you would never guess from his actions or the way he walks that he has a useless leg. The only English he could say was "Thank you," but the smile on his face and the happiness in his eyes express his gratitude.

The other is a boy, now fourteen, who gives a history of having a fall at the age of three, which resulted in total loss of air conduction, and the child was therefore unable to learn to speak, since he could not comprehend sound. Examination disclosed that he had very excellent bone conduction, and that with a hearing aide he could readily perceive sound. Our government fitted this child with a hearing aide, and for the first time in his life he could not only appreciate sound, but also learn to talk as well. This was done by a country who had interned his family as enemy aliens in time of war.

Now hostilities have supposedly ceased. We who have worked with internees since the beginning of the war have done so under constant tension and criticism from them, criticism also from some of our fellow Americans who did not understand the wide scope and policy of our Country's program. As individuals we have liked many -- Germans, Japanese, Italians. We know we have done our part in the war effort, and we also hope that by trying to treat these internees fairly, kindly, and humanely, we have contributed to the preservation of peace in future years. The two youths mentioned above, for example, can never forget that it was an enemy government who opened a new and happier life for them. So long as we still produce the best fighters in the world, but at the same time remain the most kind and humane nation, America, God bless her, will always remain on top.

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