

WOMEN VETERANS HISTORICAL PROJECT
ORAL HISTORY COLLECTION

INTERVIEWEE: Caroline Harrington Bradburn Bradford

INTERVIEWER: Beth Ann Koelsch

DATE: November 1, 2014

[Begin Interview]

BK: Hello, today is November 1, 2014. My name is Beth Ann Koelsch, and I'm here at the Sleep Inn in Smithfield, North Carolina to conduct an oral history interview for the Women Veterans Historical Collection at the University of North Carolina at Greensboro. I'm here with Ms. Caroline, so please state your name of how you'd like it on the collection.

CB: Caroline Harrington Bradburn Bradford.

BK: If you could tell me when and where you were born?

CB: I was born in Ridge, Maryland, on February 6, 1925, in my fraternal grandparent's bedroom. [chuckles]

BK: Wow, very specific, okay. And did you grow up there?

CB: I grew up there my teenage and my formative years. We moved from there to Washington, D.C. in 1940.

BK: Okay. So I'm just going to ask you a little bit about your upbringing, about your family and home life, what your parents did. Did you have any brothers and sisters?

CB: I had one sister who was six years younger than me, Mary, and my brother didn't come until I was sixteen.

BK: Oh.

CB: So I didn't live with him very long, because I—when I was seventeen I went to nursing school. My mother was a stay-at-home mother until World War II when she began to work at the Treasury Department [U.S. Department of the Treasury].

BK: Yes.

CB: My father was many things in his early life. He was a farmer; he was a page at the Senate for a very short time; and he worked for Pepco, the electric company in Washington, D.C. When the war came he was still the age that he was still a draft age, and when he knew that his number was imminent he enlisted in the navy because he didn't want to be in the army; he wanted to be on the water.

BK: Okay.

CB: He had been a waterman in Southern Maryland. So during the war he was in the navy in the South Pacific, and they assigned him to work in the engine room, so when he was discharged Pepco put him in a different department, with the power plants generating electricity. He worked there until he retired.

BK: Okay.

CB: And my mother stopped working when the war was over.

BK: Got it. Did you like school? Did you have a favorite subject?

[Speaking Simultaneously]

CB: Oh, I loved school.

BK: Yeah?

CB: I loved history. Well, I was the only non-Catholic in a Catholic school, and I was—in the morning when everyone had religion, I was allowed to read, so I learned to—I read every book they had in this little school.

BK: That's great. What was the name of the school?

CB: Saint Michael's Elementary School. It was a very small country school, and we had two grades in a room with one teacher. So I pretty much read every book they had, and I still do a lot of reading. Then in 1940 when we moved to Washington I was in a large school.

BK: Yes. What school?

CB: Central High School [now known as Cardozo Education Campus].

BK: In D.C. itself.

CB: In Washington, D.C.

BK: Okay.

CB: And I went the last two years there, graduated, and then my hospital was right across the street from Central High School. [chuckles]

BK: Wow, okay. What year did you graduate?

CB: I graduated in 1942.

BK: And how old were you again? It seems like you were very young.

CB: I was very young.

BK: Right.

CB: I was—We graduated in June, and then I had to have special permission to go into nursing school because I wasn't eighteen, which we arranged, and so I went into nursing school.

BK: Why did you decide to become a nurse?

CB: That's what I always wanted to be as a kid.

BK: Right.

CB: [chuckles]

BK: And what—were you thinking about nursing and World War II, or the war, or were you—

CB: The war had nothing to do with it, because I had wanted to be a nurse from day one.

BK: Did—A certain kind of nurse or—

CB: Bed—I wanted to give patient care.

BK: Yes.

CB: I didn't want the administrative part.

BK: Right.

CB: And so, I did. I did patient care for years. Even when my children were born I worked enough to keep my license current—you have to work X number of hours to keep your

license current—until my husband retired, and when he retired he was used [to] setting things up and doing things, and he started setting up my cabinets and so forth, and I said, "Good." [chuckles]

BK: That's great.

CB: "I've done this for thirty-plus years and now you can have it."

BK: That's great.

CB: "I'm going to work." So I went to work then—

BK: Just to clarify, so you knew you were going to go to the school right across from where you went to high school?

CB: Yes.

BK: Just because it was convenient or is that—

CB: Well, because my mother was born there—

BK: Yes.

CB: —and her sisters were born there, and my grandmother died there.

BK: Okay.

CB: So I had connection—mental connection—

BK: Sure.

CB: —with the hospital.

BK: And all nursing training were in hospitals back then.

CB: Right.

BK: Okay.

CB: And it was rated as one of the top hospitals—

BK: Oh, okay.

CB: —in the country, and it was one of the earliest hospitals. Matter of fact, it was one of the organizing hospitals for the American Nurses Association.

BK: Oh, wow. And the name again. I know you said it but just—

CB: Garfield Memorial Hospital.

BK: Garfield, okay, okay. Alright, so you started in 19—

CB: Forty-two.

BK: Forty-two, okay. Do you remember where you were when you heard about Pearl Harbor?

CB: Yes, I do. I was—My mother and I and my sister, my brother wasn't born yet—no, my brother was an infant, and we were walking to meet my mother's youngest sister, who had a baby also, and we met at a little park. It was between her house and our house, and we heard about it then. And then—I don't know whether it was Saturday or Sunday, but on Monday when we went to school, of course, the first thing they did, they had a big—everyone met at the auditorium and the principal talked to us and so forth.

BK: And that's when you heard or you heard the day before?

CB: No, I heard the day before.

BK: Yeah, on the radio or [people talking?].

CB: Yes, on the radio. There was a Redskins [Washington D.C. NFL team] ball game going on. [chuckles]

BK: Okay, that was interrupted, okay. Wow. And you said you met your husband after—

CB: In Topeka, Kansas—

BK: Kansas, okay.

CB: —at the [unclear]

BK: Okay, we will get to that. So you—In 1942 you went to the nursing program in the hospital, and you had to live there, too, right? Were there nursing quarters?

CB: Right, yes.

BK: Okay. And the training was—Because my mother was a nurse, I'm trying to remember what she told me. You want to talk a little bit about—Was it a two year training? I mean—

CB: No, it was three years.

BK: Three years, okay.

CB: Our training was not accelerated.

BK: Right.

CB: The ones who came into the program as new students only had to go two and a half years.

BK: Okay.

CB: But we were a three year program.

BK: Okay. So the Cadet Nurse Corps—I'm sorry. So you were in 1942, and the Cadet Nurse Corps was announced in 1943.

CB: Yes, I had been in from September of '42 until July of '43.

BK: Did all your classmates join or did some not join the Cadet Nurse Corps?

CB: So few did not join. We were all of age so we didn't have to have parents sign.

BK: Right.

CB: But some of the girls' parents did not want them to be in the service because they felt it wasn't—

BK: Ladylike?

CB: —[unclear], it wasn't a good thing to be.

BK: Right.

CB: And so, a few did not join. One girl in particular who was engaged when she came in to nursing school was planning to get married the day after she graduated so she didn't join, but most of us did.

BK: How did you find out about it? Did a recruiter come? How did you learn about the—

CB: I learned about it with that paper I showed you—

BK: Yes.

CB: —for students, and of course we discussed it among ourselves, and I talked to my mother and father, and they felt that if I wanted to I should.

BK: Yes.

CB: They pretty much let me make my own decisions, but they did support me.

BK: Okay.

CB: And my—The student who was my roommate when we went into nursing school was also a friend in high school, and her father objected but she said no, she's eighteen and she's going to sign up anyhow. [chuckles]

BK: Wow.

CB: And she did, but she did not go to the branch of the service for her last six months, she went to Indian service. [Cadet Nurse Corps assignment to Native American Reservations]

BK: Oh, okay.

CB: And she served six months in Arizona at the Indian reservation.

BK: Interesting.

CB: And that was more or less like public health service, and that became her field of practice; she was visiting nursing and public health nursing. So the Cadet Corps did shape the rest of her life.

BK: Sure, sure. So you took the pledge, and then who—so basically you were issued a uniform, you had rules you had to follow, they were—paid for the rest of your education, correct?

CB: It was all paid.

BK: It was all paid for. You had already paid for it?

CB: Yes.

BK: Okay, so that wasn't an issue. And the public health service was—and who—I've always wondered, who assigned—I mean, who assigned you? I mean, who was the one that was—was it a military organization that assigned—

CB: You mean—We were asked which—where we wanted to spend our last six months.

BK: Oh really? For the—

CB: And those who designated army were sent to—I guess Lucile Petry [Leone (RN)], who was in charge of the cadet program decided who went where.

BK: Yes.

CB: But they tried to send you to an army installation close to where you lived.

BK: Okay.

CB: So Martinsburg, West Virginia wasn't too far from Washington, D.C.

BK: So you wanted to be with—in the army?

CB: Yes, I chose the army, and none of my class was assigned to a navy hospital. Some of—Some members of the class ahead of me went to a navy hospital, but we went to the army hospital and to—several members went to the Indian reservation.

BK: They chose that?

CB: They chose that, and some chose to stay in D.C. and do public health service; visiting nursing and that stuff—

BK: Right, so you—

[Speaking Simultaneously]

CB: —right in D.C.

BK: So those were the—you could do civilian hospitals, Indian, or army or navy.

CB: Right.

BK: And so, you got to choose—

CB: Which branch.

BK: —which branch, but if you stayed in civilian you could choose to stay around there, or what if they needed nurses in Nebraska, did they—

CB: No.

BK: No.

CB: They didn't send you to another civilian hospital.

BK: Okay, so once you join the ar—the army branch, I guess, who was—who was in charge of—who was in charge of you, who assigned things to you?

CB: Captain—Colonel Cook was the head nurse at Newton D. Baker [Hospital, now The Veterans Administration Hospital].

BK: And what was her first name?

CB: I don't know.

BK: No, just Colonel Cook at Newton D. Baker, okay.

CB: It may be somewhere on these papers that I have her. But the Surgeon General's office is the one who sent our—arranged for our transportation from D.C. to Martinsburg, and they also authorized our transportation back to D.C. Colonel Cook was the charge nurse at the army hospital, so she was in charge.

BK: She did the assignments and—

CB: Right.

BK: Okay.

CB: And that hospital was specific—of course, most of the hospitals had orthopedic units because so many of the injuries were orthopedic. But there was extensive—

[Loud noise in background]

BK: Okay, actually I just want to pause. Okay, you said most of the hospitals [unclear] orthopedic unit.

CB: Yes, orthopedics and eyes, they specialized in eyes.

BK: Oh, eyes, okay.

CB: And of course, we had patients who were mostly getting physical therapy and training and that type of thing. And I believe there was one regular medical unit, but mostly they were orthopedic and soft tissue wounds to be treated.

BK: Yes. So this was during your last six months of training when you were assigned there?

CB: Yes.

BK: Okay. And then after—You stayed there the whole time the last six months, in Martinsburg?

CB: Yes.

BK: And then after that you were given—Did you have to pass a boards or what—

CB: I had to pass my national boards.

BK: Okay.

CB: Which I did.

BK: Okay, and then after—that was the next step; you finished your six months, you pass your boards, and now you're a full-fledged RN.

CB: Graduate nurse, I was not an RN until I was twenty-one.

Speaking Simultaneously]

BK: Graduate nurse, Okay.

CB: But I was a graduate nurse so I returned back to Washington. I had to make my own living arrangements.

BK: That must have been tricky in the war.

CB: Well, it wasn't too bad because I went home. [laughs]

BK: Oh, okay, okay, fair enough. That would be pretty easy then, good enough.

CB: I went back to the room I shared with my sister.

BK: Okay.

CB: And I returned to work at Garfield Hospital, and I worked there until February when I—that was from September until February.

BK: Of '44?

CB: Of '45.

BK: Of '45, okay.

CB: Well, February of '46, actually.

BK: Okay.

CB: September of '45 till February of '46.

BK: Okay. Just to jump back to Martinsburg. So it's—You're showing up, you're working in the army. Do you remember anything about your first day there? Were you working with other cadet nurses or—

CB: Well, our first day was like orientation, they took us around. Of course, it was huge. There's a picture of the hospital plan on the back of one of these pages.

[Speaking Simultaneously]

BK: Oh, okay, that's what that is.

CB: And they took us all around, and they showed us, "Now, over there is the—are the German prisoners who cook your meals and set up the pins in the bowling alley," if you went bowling. We were not allowed to go near there [the POW (Prisoners of War) compound—CB clarified later]. But there was a perimeter walk, and some of the patients—if I was off duty and—you would take a patient in a wheelchair and push them around, talk with them, and just generally get them outside for a little while, but you had to do that on your own time, and most of us did. You—It was really hard for these men, and so many of the orthopedic patients were in body casts back in those days, which went from [the auxiliary area—CB clarified later] to the buttocks. [There was no air-conditioning—CB added later].

BK: Right.

CB: And there was a little hole cut out around the naval, around the umbilicus. One GI, his wife had a hairdryer—a portable hairdryer—and she would bring it in and he'd blow it up[?]. [chuckles]

BK: Oh, wow, that's—

CB: Then they would pass it around.

BK: Yeah, it must have been very popular. Wow. Okay, so what was the housing situation there? You lived with other nurses, I guess?

CB: Yes.

BK: Other cadet nurses or army nurses?

CB: No, no, because the cadets have a separate building.

BK: Oh, they did, okay.

CB: And it was a regular barracks, except that we did have rooms, and we were two to a room, and all you had was your foot locker. You didn't have a dresser, you had your foot locker, and the bed, and—

BK: There you go. And so, you worked in orthopedic unit and an army nurse was your supervisor, you said, right?

CB: Yes.

BK: And did you get a—What was the relationship with the—between the cadet nurses and the army nurses there?

CB: It was like they were the boss and we—nursing schools were really like military, and there was a caste order, and that's how it was then. Everyone was nice. I can't remember any problem with any of the supervisory nurses. We had been three years—two and a half years as the lower element and—

BK: So you're kind of used to being low person on the totem pole.

CB: Yes. So they would show us—demonstrate, actually, what we were supposed to do, as far as the dressings and so forth, and some things you learned you never forget. And it was—it was very positive.

BK: Okay. And so, none of the army nurses were graduate nurses there.

CB: They were all registered nurses. They were all registered nurses who had enlisted in the army.

BK: Right, and all the cadet nurses were graduate nurses there.

CB: No, all the cadet nurses were still students.

BK: Students, still students, right, the last six months. And how many other cadet nurses were there with—in that—in Martinsburg?

CB: I think there were fifty, and it says in here.

BK: Okay.

CB: I think there were fifty, and they were—we were from several different schools.

BK: Yes.

CB: I think Johns Hopkins [University] had the largest number of students. I don't see it right there.

BK: Okay.

CB: But you make friends—

BK: Sure.

CB: —and some of them you stay in contact with—

BK: Sure.

CB: —and some of them you don't.

BK: Okay.

CB: As a matter of fact, I got an email yesterday from the one—one girl from Hopkins that we became friends.

BK: That's great.

CB: And it was—I was amazed, I hadn't heard from her for more than a year. [chuckles]

BK: Wow. Are there any other stories from that experience that you want to mention before we move back to D.C.?

CB: Well, I can't think of anything specific. The—We did receive several survivors of the Bataan Death March—

[The Bataan Death March began on April 9, 1942 and was the forcible transfer of 60,000-80,000 Filipino and American prisoners of war from Saisai Pt. and Mariveles to Camp O'Donnell by the Imperial Japanese Army]

BK: Oh, gosh.

CB: —and some of them were very withdrawn, but some were very outgoing. [chuckles]

BK: Yes, wow.

CB: And of course, part of our duties were recreational, to—if you didn't have treatments to do them you could, like, play cards with the patients.

BK: And that wasn't your free time, that was part of your—

CB: That was duty time.

BK: —duty time, okay.

CB: If there was no actual treatment that you had to be doing, then you were to do recreational things with the soldiers, and it was very good.

BK: Okay, and just for—the type of duties you would do in the ward would be what?

CB: Of course, we'd pass medications, and we did passive exercises; patients in body casts, you would have to do range of motions of arms and legs, and that took a while—

BK: Sure.

CB: —because of the number of repetitions you had to do, and, like I said, play cards, checkers, or whatever they wanted to do.

BK: Right.

CB: And some of the patients you had to be careful with because they became—you felt like they were emotionally getting attached to you.

BK: Yes.

CB: And you had to create a distance, you had to keep—I don't know, I guess it was—

BK: I understand.

CB: But they were so generous, they would give us gifts.

BK: Oh wow.

CB: Like, "Oh, I've got some coins from Italy, and let me give you some," and I do, at home, have a couple that I was given. But besides the medications and the treatments and the passive exercises, we did whatever needed to be done; whatever the RN in charge told us to do, we did.

BK: So I guess, sort of, the—kind of maintain a professional distance; that was a skill you had to learn on the job, right?

CB: Right.

BK: Yeah. Okay.

CB: And the—See, I was going to say something, now it's gone.

BK: We were talking about the job responsibilities, I guess.

CB: Yeah. I'm sorry.

BK: That's okay.

CB: [chuckles]

BK: I do that all the time. Okay, so after six months you passed your boards and you moved back to the hospital in D.C., and can you talk a little bit about that, or—and you lived there—you lived at home.

CB: I was living at home—

BK: Right.

CB: —which was across town—across the city.

BK: How'd you get around? Was it bus or—

CB: I used street cars.

BK: Street car, okay.

CB: And I mostly worked—I chose to work night duty because I knew that that was from 11:00 [p.m.] to 7:00 [a.m.].

BK: Yes.

CB: I didn't like the days with the split hours, where you would be off for a while [unclear], and then you couldn't go across town to go home. It was different when you were living in the nurses—nurses residence. But I chose to work night duty, and I would leave home at little before 10:00 and I'd get back home a little after 8:00.

BK: Wow.

CB: And that was using street car and bus and foot power. [chuckles]

BK: Sure, and when did you sleep? That must have—

CB: I slept in the daytime, and they assigned me to the OR [operating room].

BK: Oh, okay.

CB: Of course, you only had one RN in the OR at night time.

BK: Yes.

CB: OR was not my favorite place to work, so I was reassigned to obstetric unit.

BK: Oh, very different. How long were you in the—you were the RN in the OR.

CB: Right.

BK: Did they have a lot of operations at night?

CB: Not a whole lot, not a whole lot.

BK: So you just, sort of, didn't have anything to do or—

CB: Oh, no, you had all—

[Speaking Simultaneously]

BK: Oh, no, I'm sure there was, I just couldn't figure out what it would be.

CB: —all the rooms to set up, and you had all the equipment to steri—put in the autoclaves, and get all the rooms ready for the first surgery, and sometimes the—particularly the urologist would schedule—often times they would schedule cystoscopies for, like, 6:00 in the morning, or 6:30 in the morning, and of course, we'd have to take care of those.

BK: Okay.

CB: And it would be our duty to have the patients who needed to be there at seven o'clock, to have them there and ready for the surgery, but—

BK: This was a civilian hospital, right?

CB: Yes.

BK: Okay. Yeah, I can see for someone who wants to—one on one patient care, I can see why setting up the OR was not—

CB: Yeah.

BK: Did you ask to be transferred or you just—

CB: From the OR to—

BK: Yes.

CB: Yes, I did.

BK: Okay, so you're now in obstetrics.

CB: Obstetrics.

BK: And what year are you in, 1945?

CB: This was the end of '45.

BK: End of '45, okay, so the war is already over.

CB: Yes, the war was over.

BK: Okay, and you were—Okay, so you were still—Where were you—Where were you stationed at V—during VE and—at VE [Victory in Europe] and VJ [Victory over Japan] Day?

CB: I was at Martinsburg.

BK: Okay.

CB: [Newton] D. Baker [Army Hospital—CB clarified later].

BK: Wow, that must have—what was it like?

CB: Oh, it was like bedlam.

BK: Yeah?

CB: It was—

BK: Were you on duty then?

CB: I was on duty, I was on duty, and—

BK: For both VE and VJ?

CB: Yes.

BK: Okay, so you couldn't completely cut loose, right?

CB: Right, yeah. But it was amazing, the jubilation.

BK: Sure.

CB: And the happiness, and it wasn't long, though, after the war that the hospitals were turned over to the VA [Veterans Administration].

BK: Right.

CB: And that's—When I couldn't join the army after my graduation I applied for the VA.

BK: Okay, so you wanted to join the army?

CB: Yes, I planned to join the army.

BK: And when was that, and what happened?

CB: Well, at—when I went into the Cadet [Nurse] Corps my plan was to go into the army when I graduated.

BK: Sure, okay.

CB: But the war was over—

BK: Right, and they didn't—

CB: —and they didn't want us.

BK: Oh, okay.

CB: So I put an application into the VA because I knew that they would need me.

BK: Right.

CB: And I was assigned to Topeka, Kansas.

BK: Okay, so just to clarify—I'm sorry, I keep going back. When you took your pledge for the Cadet Nurse Corps, what was the—was there a time limit, like, when you join the military—

CB: For the duration.

BK: For the duration plus six months, is what—

CB: No, just for the duration.

[Speaking Simultaneously]

BK: For the duration.

CB: Yes.

BK: Okay. So in theory, you could have just walked away after VJ Day?

CB: Well, you couldn't if you wanted to be an RN, you had—

BK: Right, I understand that.

CB: —you had to finish your training. They did keep us there until the end of our affiliation, which was the fifteenth of September. Only the last ten days—I think it was about ten days—was leave.

BK: Okay, and that's—

[Speaking Simultaneously]

CB: I actually came home the first week of September, and I was home, and then my first day as a graduate nurse was the sixteenth of September.

BK: Okay, and you're still in the Cadet Nurse Corps then, or the Cadet Nurse Corps—

CB: No.

BK: Okay, so the Cadet Nurse Corps ended in September—

CB: Yes.

BK: —of '45, okay.

CB: The fifteenth.

[CB sent correction: The Cadet Nurse Corps Program continued until 1948. CB's class of 1945 ended as planned in September 1945.]

BK: I will have that—Sorry, September 15, I'll get this by the end. Okay. Okay, so you were in D.C. and you applied to the VA hospital and they send you to Topeka, you said.

CB: Yes.

BK: And what was the name of the hospital there?

CB: Winter General [Army Hospital].

BK: Was it an army hospital during the war?

CB: It had been an army hospital. It was laid out very similar to the one in Martinsburg and, of course, it had been constructed after the war began and the—we had nurses' quarters, but we did have private rooms. [chuckles]

BK: Oh, a set up there.

CB: So we had a dresser and a desk.

BK: So there was not—it was not a mili—there weren't army nurses, for example, working there?

CB: No, no, we were—

BK: Was it a specialty hospital or a general VA hospital?

CB: It was a lot of psychiatric patients, and [Dr.] Karl Mediker—Menninger and his brother William, who were noted psycho—psychiatrists, were directors of the hospital, so we were given the opportunity to take post graduate courses for credit; they would offer them to the staff.

BK: Did you take them, avail[?] yourself?

CB: I took—Yes, I attended several, and I did go to Washburn University for one summer session, but after that I was too busy with my husband. [chuckling]

BK: Got it, okay.

CB: Or my boyfriend, at that time.

BK: And that's where you met, okay. I realize we didn't really talk about the obstetrics in D.C. Is there anything you wanted to talk about that, and you were there for—

CB: I was just there for two or three months.

BK: Months, okay, and then—and then you're looking around for a job, or is there something specific about Topeka that you liked?

CB: No, no. When I applied to the VA—

BK: Yes, that's where they sent—

CB: —I didn't specify where I wanted to go, and that's where they needed me.

BK: Okay.

CB: And one of the other cadets from my school went also, so we went together.

BK: How did your family feel about that? I mean, you—they're getting used to having you nearby and then suddenly you're in Kansas.

CB: Well, I guess like any parents, you—they wanted, and they encouraged, me to be independent.

BK: That's great.

CB: And they supported me, but they missed me.

BK: Sure, sure.

CB: [chuckles]

BK: Okay, so you're off to Topeka in—when again?

CB: In—I left in February.

BK: February of 194—

CB: The end of February.

BK: End of February '46?

CB: Yes.

BK: Okay, so you get to Topeka, you're in the nursing quarters. Was it—I mean, it just—psychiatric cases, for me that might be a little, kind of, intimidating at first. Did you feel that?

CB: Not really, because I had some experience, and working for the VA is different from a general hospital somehow.

BK: Can you talk about that, or do you know?

CB: Actually, the—I guess the caste order, and the VA had more nursing assistants than civilian hospitals did. Civilian—I think we had—civilian hospitals had more RNs and students, whereas there were no students at the VA hospital, and they had more assistants.

BK: You were in a higher caste then—

CB: Yes.

BK: —by the time you got there. Were you in charge of assistants?

CB: Well, at one point I was in charge of three units at night. Somehow I always got the night shift.

BK: Okay. Are you still a night owl or have you adjusted back to daytime hours yet?

CB: Oh on, I do daytime.

BK: Okay.

CB: But each RN would have two or three units to supervise, and there would be a charge attendant on each unit. But the RNs gave all the medications and wrote all the charts and checked all the patients at certain intervals and so forth. Psychiatric patients don't always sleep at nighttime. [chuckles]

BK: Oh, okay, right. I'm sure.

CB: So sometimes there were great challenges, but it was—it was a good job.

BK: Do you remember any particular patients that have stayed with you?

CB: Not really.

BK: Not really, okay.

CB: It's been a long time.

BK: How long were you there, in your single room?

CB: Actually, I left in November.

BK: Okay.

CB: So I wasn't there too long.

BK: Okay, and that's because you met your husband?

CB: Well, I had met him shortly after we got there. It was weird because they held an employee's dance.

BK: And so, he—Kenneth worked in the hospital?

CB: Yes.

BK: What was—Was he—

CB: He was a charge attendant on one of the psychiatric units.

BK: So you were his boss?

CB: Not really, we never worked on the same unit.

BK: But you would have been his boss.

CB: [chuckling] Yes.

BK: Okay, alright, so you met him—Sorry. Tell—Start again, I interrupted you.

CB: My friend Alice and I, who had gone there together from Garfield, went to this get acquainted dance they had, and during the evening we really didn't know anyone yet. During the evening they announced, "Would Brad come forward?"

BK: Yes.

CB: Brad was my nickname for Bradburn. Well, my husband's nickname was Brad for Bradford.

BK: Oh wow.

CB: So I went up and these two men were talking, and so I waited patiently, and finally they turned and said, "Can I help you?"

I said, "You said for Brad to come up."

"Well, this is Brad."

I said, "No, I'm Brad." [both chuckle]

BK: "And I have rank on him"; that must have been surprising. That's—

CB: So anyhow, later on he asked me to dance and that was it.

BK: That's great. So you guys were immediately together, and then—how long after that did you get married?

CB: We started dating, and then in October my mother fell and broke her arm and I was homesick, and we decided that we would relocate in Washington so—

BK: You and Kenneth?

CB: Yes. So we both resigned—rather transferred to—he transferred to the VA in Washington. I didn't—

[Speaking Simultaneously]

BK: Is that Walter Reed [Army Medical Center]?

CB: No, it was—

BK: Right, that wouldn't be VA, sorry.

CB: —Mount Alto [Veterans Administration Hospital] was the name of the veterans hospital.

BK: Mount Alto, okay.

CB: And he had his work transferred, but I resigned because I figured I'd work at Garfield. And we came to Washington and got our marriage application and were married the next week. [chuckles]

BK: Are we still in '46 or are we in '47?

CB: We're still in '46.

BK: Wow, a lot happened to you in a few years, okay.

CB: Right.

BK: Wow.

CB: Because Washington was a hard place to find a place to live.

BK: Sure, sure, definitely, even after [unclear].

CB: Yeah.

BK: So what did you find out? How did you find one?

CB: We found a room and then—and it was a back room on the third floor, and then a front room became vacant on the second floor so we moved. [chuckles]

BK: Wow.

CB: And then there really was no place to live in Washington—

BK: Sure.

CB: —so we shared an apartment with a middle-aged couple for about six or seven months, and then by that time we found an apartment for just us, so we moved there, and by that time I was expecting my first child. We had applied for veteran's housing, and that finally came through when my baby was, like—about nine months old.

BK: And that was through your husband, right—

CB: Yes.

BK: —not you because you're Cadet Nurse Corps inconsiderate[?]. And so, he was an attendant in—What branch? —army?

CB: No, he was in—working for the VA at that time.

BK: Okay.

CB: He was discharged from the army in December.

BK: And what was his job in the army? What was his—

CB: His first job was working on the Alaskan Highway.

[The Alaska Highway was constructed during World War II for the purpose of connecting the contiguous United States to Alaska through Canada]

BK: Oh, wow.

CB: The ALCAN Highway. And then when they got that so it was passable, they transferred him to [United States Penitentiary,] Leavenworth to the disciplinary barracks—

BK: Wow.

CB: —and he transported prisoners, and took care of the prisoners at Leavenworth and so forth until the end of the war when he was discharged.

BK: And then he worked at the VA?

CB: He transferred to the VA.

BK: He must have had some stories.

CB: Yes, but he didn't share much.

BK: No? Okay.

CB: [chuckling]

BK: A typical man of that generation, right. So were you paid the same as army nurses or did you have a different pay rate?

CB: No, we were paid the thirty dollars a month at [unclear].

BK: Yes.

CB: And nurses weren't paid very much. My first job in the—

BK: I know.

CB: —at the VA was less than three thousand dollars a year. I think it says on this telegram how much the pay was.

BK: I was just wondering how that compared. I mean, I know that the cadet nurse were better than civilian nurse and—

CB: It was—The VA offered me two thousand three hundred and twenty dollars per annum.

BK: Oh my.

CB: Travel at your own expense.

BK: Wow.

CB: And that was a lot more than I was making at Garfield, at the civilian hospital.

BK: Do you know if you were—the cadet nurses were paid the same as army nurses, or no?

CB: No, cadet nurses were only paid—they were paid twenty dollars during their second year, a month, and thirty dollars during their last year; all cadets; that's most any cadet got.

BK: Wow. So did you want to join the army—just better pay and patriotic reasons, or did you want to—

CB: Well, I wanted to join the army because we needed to win the war.

BK: Sure.

CB: And the guys needed treatment, so that's what I was planning to do. No, I didn't plan to make career—army career.

BK: Okay. Do you want—The part—What was, like, the hardest thing that you remember that you had to do, physically or emotionally, while you were in there?

CB: In what?

BK: In any of your career—time in Virginia or D.C. or Kansas.

CB: I never thought about that. I remember one incident where the ER [emergency room]—when I was working in obstetrics—

BK: Yes.

CB: —the ER called up—the emergency room called up to the obstetrics unit and said to get the incubator plugged in and warmed up because there would be a baby coming, and so I did, that was my job, and I got the incubator—got everything ready to receive the baby, and they brought this child, it was—weighted under two pounds.

BK: Oh my gosh.

CB: Premature baby that was delivered in the emergency room, and that baby was so—it just captivated everybody's heart. And he was still there when I left to go to Topeka. You

really get attached to a baby like that, and so I had to follow up to be sure he was doing okay, and he did survive.

BK: Good for him.

CB: Of course, I don't know what—they didn't have all the treatments that they have now, but we called him Little Peanut. [both chuckle]

BK: Oh, that's great, that's great.

CB: And a lot of times you just had to remove yourself—

BK: Sure.

CB: —physically to treat a patient. You had to view this not as a person but as something you had to do, because otherwise you—your emotions, you wouldn't be able to cope with all this.

BK: Sure.

CB: And you do learn how to do that so that you can do what you have to do when you have to do it without thinking about me, it's what you're doing.

BK: Right, right.

CB: And I think all nurse[s] do that.

BK: Sure. Okay. Did you think that people during the war—did they—were cadet nurses known, did they know about the program? Did they—When you walked down the street in your uniform did they—did people know what that meant?

CB: I think a lot of them didn't. We, on our days off, would go to the USO [United Service Organizations] places in D.C., and some of the GIs didn't know what we did, or why we did it. The patients that we took care of at the army hospital knew what we did and appreciated it.

BK: Sure. Sure. Wow. Did you like your uniform?

CB: We—Almost all of us received a uniform that was about a size and a half too big.

BK: Okay.

CB: And we said that the person who measured us—they came and measured us individually, and measured their hand. [both chuckle]

BK: Right, or maybe just had a defective tape measure.

CB: But anyhow, my mother knew how to sew and she took my skirts up so they wouldn't fall off, and I coped with the other.

BK: That's great.

CB: Our class was—We already in the corps and we didn't get all the parts of the uniform that the class coming in got.

BK: Really?

CB: I never got a top coat and I never got a summer hat; I got one hat. Those were the two things that—And I didn't get the patches to go on my striped—my duty uniform. Some of the schools did. I don't know why our school didn't get those for us, if there was—I don't know why it didn't happen. But anyhow, we had the basic suit, and I had the winter hat, and we just—

[Speaking Simultaneously]

BK: The grey beret, right?

CB: Yeah, and I don't know what happened to that. I think my mother got rid of it when she moved. [chuckles]

BK: Got it.

CB: Because I had left it behind.

BK: And you had a duty hat, the white—

CB: Yeah, I had my white duty cap, and that was a hospital cap.

BK: Right, each—yeah. Okay. Just a few questions about the cultural climate. What do you think the mood of the—How did you feel the mood of the country, or the area you—the D.C. area, that would be interesting. Did you feel people—Was it generally fearful, confident—

CB: Do you mean regarding the war?

BK: Yes.

CB: I never met anybody who wasn't supportive of the United States, and almost everybody had somebody in the service, and I don't know of any derisive comments, I don't remember anything of that sort, and I know for a fact that my extended family was all in the service— [U.S.] Army, [U.S.] Navy, [U.S.] Merchant Marines—and I had a lot of cousins. My father had seven brothers and sisters, and most of them had several children, and all the men—I think I was the only female grandchild, paternal grandmother, who was in the service, but all the boys were.

BK: Did people feel that that—the allies—confident the allies were going to prevail or—

CB: Oh, yes.

BK: Okay.

CB: Whipped their butts. [chuckles]

BK: Got it. Watch out, the Yanks are coming. Okay. What did you think of the Roosevelts [Franklin Delano and Eleanor Roosevelt]?

CB: I really didn't think about it.

BK: Okay

CB: We didn't even get newspapers at the hospital.

BK: Wow.

CB: At the nurses residence.

BK: Really?

CB: Sometimes patients would have newspapers, and of course, there was no TV.

BK: Sure.

CB: We had radios, and most of the news was in the—in the theater, in the movies—at the movies.

BK: Sure.

CB: They would give the news about the different battles and so forth, and that was how we got most of our news.

BK: Okay. Did you have any thoughts—What were your feelings about [Harry S.] Truman after the war?

CB: He was our president and I was brought up that you support your leaders and you didn't—we didn't—I never thought to question. [chuckles]

BK: Sure, okay. Did you have any personal heroes or heroines, either nationally famous or people closer to you?

CB: No, not really, no.

BK: Okay. Did you have any favorite songs or movies from that time?

CB: Oh, I saw all the movies.

BK: Yeah?

CB: All movies, and the—but I didn't really identify with many of them. I don't know why I didn't, but I was preoccupied with what I was doing.

BK: Sure, you're very busy. Did you—So when you started having your children you were not working as a nurse, or you were doing both? I can't remember.

CB: I was working as a nurse during my pregnancy—my first pregnancy—

BK: Right.

CB: —and then I didn't work after Kenny was born. I took care of him, and by that time we had gotten veteran's housing, which was a reconditioned barracks that they had moved from an army base.

BK: Like a Quonset hut or—

CB: No, it was a barracks.

BK: It was a barracks.

CB: A regular barracks, and they divided the barracks into eight apartments. There were two stories, and there was one door went to a hallway and there were four apartments, and then the other door there were four, so there were eight apartments in each barracks.

BK: And this was outside of D.C.?

CB: No, it was in D.C.

BK: In D.C., okay.

CB: Yes. Yeah, it was in D.C. And of course, everybody there was—had been in the service.

BK: Sure.

CB: And we all had children. It was—It was nice. [chuckles] We were friends with everybody, and we lived there for, I guess, about a year, year and a half, and during that time I did go back to work to save money for a down payment for a house. We bought a house in the suburbs of Washington near Andrews Field [the airfield portion of Joint Base Andrews] and moved there, and then I got pregnant again and my second son was born, and after that I worked, like, weekends, or I would—I worked through the nurses' registry. So I could pick up the phone and [unclear] and say I would like to work three days, or I would like to work five days, and I worked in any hospital in Washington, D.C. I guess the only hospital I didn't work at was Georgetown, but I took cases in any hospital. And they didn't have ICUs [Intensive Care Units] and CCUs [Coronary Care Units] so the sickest patients would have special nurses, and that was me—that's what I did. So I was able to work when it was convenient, when my children would be home with my husband and I could work. During those years I worked enough to keep my license current.

BK: Because you just—you wanted to be a nurse, you were a nurse.

CB: I wanted to keep my license current and I wanted to do patient care and that's what I did until my husband retired.

BK: You're still outside of D.C., and when did he retire?

CB: He retire—He retired in 1976 and—let's see—I guess it was about two months after he retired, I went to my family doctor for my annual checkup and he needed a nurse, and he asked me would I like to work for him and I said yes. [chuckles]

BK: Okay, that's great.

CB: Because he had asked me a number of times over the years and I refused. So anyhow, it was nice. I was, like, two miles from home, as far as commuting to work, and we worked four and a half days, and all holidays and weekends off. And so, I worked there for twenty years.

BK: Wow.

CB: And retired.

BK: That would be—

CB: And that was family—family practitioner.

BK: Okay, so that was through the late nineties?

CB: Yeah.

BK: Okay. And then—Are you still in the same house that you—

CB: No, we moved—my husband had Parkinson's, and we lived in the little house that was built in 1951. We had three bedrooms and a dining room and a living room and a kitchen—big kitchen—but one bathroom.

BK: Oh wow, yes.

CB: The Parkinson's was getting to the point—we knew he was going to be in a wheelchair so we decided on a house plan and we had a house built in St. Mary's County [Maryland] and moved there. That was in 2001, and he passed away in 2005, and I was able to take care of him at home—

BK: That's great.

CB: —all the time, because everything—no hallways—

BK: Right, you were set up.

CB: —and wide doors, and enough room in the bathroom for the wheelchair, and so—

BK: So you were—I'm sorry.

[Speaking Simultaneously]

CB: And I'm still there.

BK: You came down for the interview to be with your daughter who lives in Smithfield?

CB: She lives in Clayton.

BK: Clayton, okay.

CB: Yes.

BK: Okay.

CB: I come to visit her several times a year.

BK: Got it. Just serendipity. Okay, I have just a few more questions. I know we've been doing this for a while here. Do you consider yourself an independent person? Did your—

CB: Oh yes.

BK: Even before you joined the Cadet Nurse Corps? Did you feel that made you more independent or just—not necessarily?

CB: I was the oldest child—

BK: Right.

CB: —and the oldest child tends to be more independent—

BK: Got it.

CB: —I think [chuckles], have more responsibilities and—no, I've always been my own person.

BK: Okay. One of our questions is, many consider women who did service during World War II to be trailblazers. Do you feel that way, and do you have any connection to the ideas of the women's liberation movement?

CB: Well, I always felt that a woman could do whatever they wanted to if they wanted to, and my mother encouraged that. She was not outgoing particularly. I mean, she was a housewife, except during the war when so many housewives took jobs. But no, I don't know that the Cadet Nurse Corps made me a different—it changed the way I looked—I view things. I don't know exactly how to put that, but I think that being a nurse made me the way I am now.

BK: Got it. Have any of your—were any of your children in the military or nursing, and would you encourage them to join the military or nursing?

CB: No, no.

BK: You wouldn't encourage them or they just weren't?

CB: They—I let them decide for themselves, and I only had one daughter, as far as going into nursing, and she was always her own person and I let her be.

BK: Sounds like a trait of women in your family.

CB: [chuckles] Yes.

BK: Okay. What was the most rewarding thing to you about your time during the Cadet Nurse Corps?

CB: I think just being able to contribute to make the soldiers more comfortable.

BK: Okay.

CB: And to help make them more relaxed and happier. We helped them write letters. We did a lot of little things like that, besides the dressings and medications and treatments and so forth.

BK: Okay.

CB: And I was glad I had a chance to do that.

BK: What does patriotism mean to you?

CB: It means supporting your country no matter what, and it means supporting your leaders who have been elected, whether you voted for them or not. It means not talking bad about your own country. It just irritates me when I see criticism—that type of criticism about the country. I enjoy going to my great-grandchildren's school programs, and I take them to flag ceremonies—Flag Day ceremonies, and make sure that they see all these things and know about the country. And that's about it.

BK: Okay. Is there anything particular you would want a civilian to know or understand [about] what it was like to serve that they might not understand or appreciate?

CB: I think that—I don't know how to put that. [chuckles] I think that so many people do not know about the Cadet Nurse Corps. They learned about the WACs and the WAVES [Women Accepted for Volunteer Emergency Service] and the WASPS [Women Airforce Service Pilots], who finally got some recognition. And we have been trying to get recognition for years, and I was not aware of it, but you see, the nursing students were from different hospitals and even the city did not have a central registry of the alumni of all the hospitals in that city, so there was no way to dispense information. The—It was very difficult to—when activities started to get veterans recognition for nurses—cadet nurses, it was difficult to let all the nurses know, and I would not have known if Clara had not encouraged me to get a computer, and I went to the library—to the senior center and learned how to use it. And so, then one day I Googled Cadet Nurse Corps and I found all this activity going on.

BK: Right.

CB: So right away I got in touch with them and began to write letters to senators and representatives and the newspapers, and attended a joint—a House [of Representatives]

meeting, trying to get the bill passed, so that if there had been a central way of contacting—

BK: Right.

CB: There are still cadets who don't know that anything is going on, as far as getting recognition. And I think at this point the idea is to possibly get a Congressional Gold Medal.

[The Congressional Gold Medal is one of the highest civilian awards, awarded to persons "who have performed an achievement that has an impact on American history and culture that is likely to be recognized as a major achievement in the recipient's field long after the achievement."]

BK: Right, like the WASPS.

CB: Yes, and it would not be individually, it would be just one gold medal.

BK: For the corps.

CB: Yeah, recognition for the Cadet [Nurse] Corps.

BK: How long have you been working on this?

CB: Since 2008.

BK: Are there any particular representatives or senators who are supportive.

CB: I haven't been able to get Maryland senators to do anything. Senator [Steny Hamilton] Hoyer was Speaker of the House [correction: Hoyer is a congressional representative and served as House Majority Leader from 2007-2011] and he—as Speaker he didn't sanction bills and now that the Democrats are not Speakers—they're not the majority party—he's not Speaker but he still hasn't supported—he still hasn't signed on to co-sponsor the bill. Senator—No, Representative Nita Lowey from New York introduces a resolution every year—every session—every session—to recognize the Cadet [Nurse] Corps, and—but it never gets enough sponsors. It only got to a committee one time.

BK: Why do you think it doesn't get support?

CB: Because not enough nurses know about it and push to—because the Senate and House tend to act on what—

BK: Is the loudest?

CB: Yeah. The squeaky wheel gets the oil.

BK: Yeah

CB: And we're not squeaking loud enough. [chuckles]

BK: Got it. Is there—That's, kind of, the end of my formal questions. Is there anything that you would like to add or say for the record that I haven't—we haven't talked about yet?

CB: Just that I appreciate your interest.

BK: Yeah, I appreciate your—

[Speaking Simultaneously]

CB: And I am so glad that some information is being put away for the future.

BK: Okay, well, thank you. I don't know if you have ti—Do you want to take a break? I would love for you to read that. I don't know if you have time.

[CB's daughter]: We have time. [unclear]

CB: I think I have to have a drink of water.

BK: Sure, sure. I'll just pause it.

[Recording Paused]

BK: Let's get started again here. Okay, good to go. So Caroline is going to read some information that she read to the DAR [Daughters of the American Revolution] meeting we were just at.

CB: *About the Cadet Nurse Corps. The United States Cadet Nurse Corps was created by congress to remedy the shortage of nurses during World War II. In exchange for tuition, partial room and board, books, uniforms, and a small monthly stipend cadet nurses pledge to actively serve in essential civilian, military, or government hospitals, or other federal services, for the duration of the war. They were part of the United States public health service, and served under Surgeon General Thomas Parran [JR.] and Lucile Petry [Leone], who was the director of nursing education. Serial Numbers were issued, as well as off duty and on duty uniforms. The insignia was designed to include the public health official insignia, and only authorized persons could legally wear the uniform.*

When the U.S. Cadet Corps was formed in 1943, the student nurses who were already one or two years in their training were recruited and signed up, as well as new graduates of accredited high schools. Nurses were educated in hospital nursing schools, and a simultaneous ceremony was held using radio air waves. Keep in mind, there were hundreds of schools of nursing in our country, and each one participated separately.

The cadets lived in dormitories, usually two to a room, with a bathroom down the hall. A few lived in suites, which consisted of two bedrooms and a bath. We had cot-sized beds and used to joke that we had to get out of bed to turn over so we wouldn't roll out of bed.

There were many military-like rules. We wore uniforms on and off duty and had curfews. On weekdays we had to be in our rooms at 7:00 p.m., quiet and studying from 7:30 to 9:30. Lights out at 10:00. On weekends we had one 10:00 p.m. pass, one midnight pass, and once a month we could have an overnight pass with parental consent. A housemother did a room check at 7:00 p.m., and walked the halls after 10:00 p.m. to ensure our compliance with rules. We could not get married for the duration. We were welcomed at the various USO locations about the city. We felt like we were military and we were treated like we were military.

I speak now from personal experience. Many cadets had similar assignments. The last six months of my training was spent at Newton D. Baker Army Hospital in Martinsburg, West Virginia, where we were treated as officers, having privileges at the Officers' Club and Post Exchange. We were drilled and had calisthenics. While there, we functioned as army nurses, again, making us feel military.

At the present time the United States Cadet Nurse Corps Equity Act H.R. 1522 is before the Veterans Affairs Committee.

Actually, that's the house resolution number from 2008. There is a different number—house resolution number on the floor now. [H.R. 1718]

The Cadet Nurses are the only uniformed service of World War II that did not get recognized at the end of the war. President Harry S. Truman's executive order recognized service of the commissioned officers of the Public Health Service during World War II. Congresswoman Nita Lowey of New York proposes a house resolution at each session for more than twenty years to rectify the longstanding oversight. Cadet Nurses answered the call to serve their country and did so with patriotic commitment. They delivered our nation's health system intact at the end of the war. It is long past time for our nation to deliver them recognition and gratitude. We feel that we certainly are military as other groups of uniformed women corps who received veteran status.

BK: Thank you.

CB: And now I have a story: *About Me: Before, During, and After the Cadet Nurse Corps. I was born in my fraternal grandparent's bedroom, the first child of teenaged parents, on February 6, 1925, in rural St. Mary's County. My sister came six years later and my brother was born when I was sixteen. I attended St. Michael's Elementary School and went on to Great Mills High School for two years. Then my family moved to Washington, D.C., as many families did when jobs became available during the pre-war years. I graduated in the upper 10% of my class of over 325 students from Central High School in*

June 1942. On September 16, 1942 I entered the nursing school at Garfield Memorial Hospital, 10th and Florida Avenue, Northwest Washington, D.C. My lifelong dream of becoming a nurse was beginning to come true.

When the Cadet Nurse Corps was established in 1943, my class was invited to join. Out tuition had already been paid, but we would get a monthly stipend of twenty dollars by joining, and most of us planned to go into the military after graduation anyhow, so we did sign up. The promise of a monthly allowance was very enticing. Only a few who had marriage plans for after graduation did not join. Cadets could not marry for the duration.

My studies continued, both in the classroom and onwards. We worked night hour shifts, 3:00 p.m. to 11:00 p.m., 11:00 p.m. to 7:00 a.m., or days, which meant any eight hours between 7:00 a.m. and 7:00 p.m. When working days we usually went on duty at 7:00 a.m. for breakfast and bath assignments, and then were off for a few hours and came back for afternoon care and to feed the patients, for a total of eight hours daily. Our classes and studies were over and above our eight hour assignments on the floors. On the evening and night shifts, students were usually the only nurse on that particular unit, with the help of a female aide. Of course, there was one supervisory RN, and a male orderly on duty at all times for the whole hospital, and we called for advice or assistance when needed. Cadet Nurses were responsible for patient care throughout the hospital. The hospitals were understaffed in every department. I remember taking washers and a screwdriver on duty one evening because a patient was complaining of a dripping faucet keeping him awake for several nights. There was nobody available for such trivial repair. I changed the washer in addition to my nursing duties. During the 1940s, nurses learned much more than how to pour medications. We learned whole patient care, which covered the environment, as well as the actual physical condition of the patient. We were taught to be resourceful, compassionate, and competent.

During the spring of 1944, I was sent to Children's Hospital in Philadelphia for three months. Children's Hospital was a participant in the early research of penicillin. So early that the medicine came to us as a yellow powder in chemist's flasks with cotton plugs and a paper top. An intern had to dissolve it in sterile water before we, the cadets, could administer it intramuscularly. The Cadet Nurses helped with the development of a medicine that saved so many lives.

That same year, during the summer, I was sent to St. Elizabeth's Hospital for three months to study psychiatry. This was a federally owned hospital in Washington, D.C. After this affiliation, I returned to Garfield Memorial Hospital in March of 1945. Then it was off to Newton D. Baker Army Hospital in Martinsburg, West Virginia, where I worked until September and the end of my training.

While at the army hospital we were treated as other army personnel. In the beginning we had calisthenics and drill instructions. I guess we were rather bad at both of these facets of training, as they were very perfunctory and a short duration. We had privileges at the Officers' Club, as well as at the PX [Post Exchange]. We wore our uniforms, either duty or dress, at all times. This was a time of many changes for everyone in our nation, the last few months of The War, as we called it. VE Day and VJ Day brought tremendous joy to the injured soldiers, and I will never forget those particular days on duty, on a unit with ninety injured soldiers. While there, we did all the things that

the army nurses did. We did personal care, medications, passive exercises of the arms and legs of men in body casts, but most of all we listened to the men and laughed with them. Because we were younger and not yet commissioned officers we seemed to have a different rapport with the enlisted GIs. This experience had a definite influence on my whole life; the way I look at things and the way I interact with people.

August 1945 was a month of state boards exams. It was the first year that Washington, D.C. gave national board exams, and I passed [unclear], but I couldn't get my license until I reached my twenty-first birthday. I continued to work at Garfield after leaving the army hospital in September. Then, at age twenty-one, I moved on to my position as RN at Winter General Hospital in Topeka, Kansas. Winter General had been converted from the army to the Veteran's Administration in December 1945. My assignment there was pretty routine until I met the love of my life. We were married on November 26, 1946 in Washington, D.C., where we both found jobs. In 1950 we bought a house in Forestville [Maryland], raised two sons and a daughter, and a stepson, and I did the usual mommy things: PTA, Boys Club, Girl Scout leader, church affairs, bake sales, and so forth. During these years I worked part time as a [unclear] nurse, through the official registry of the American Nurses Association. My husband was a supervisory deputy U.S. Marshal, and when he retired in 1976, he had nothing to supervise but our household, which I was glad to turn over to him or anyone else who wanted it. I took a job as a nurse in the office of our longtime family practitioner. During this time we helped our middle son raise his daughter, so I was again involved in the mommy things. I retired from my paid nursing position in 1997 to care for my husband. He had survived cancer of the larynx, seven-way coronary bypass surgery, and cancer of the bladder, only to finally contract Parkinson's Disease. In 2001 we moved from Forestville to Mechanicsville where we had a handicap accessible house built to allow me to care for him, until his departure to a better place in September of 2005. We had enjoyed fifty-eight years and ten months of marriage.

Since then I have lived very quietly. I have three grandchildren, six great-grandchildren, and I enjoy them very much. My eldest son lives a few miles away. My daughter lives in North Carolina but we visit each other frequently. I lost my middle son to the late life complications of polio, which he had contracted at age eight, even though he had been immunized against it. The early polio vaccines were not very effective against bulbar polio. I attend some activities at the Senior Center, where I learned to use my new computer. So life goes on. I have many fond memories and such a wonderful extended family who keep me on my toes. I am anticipating the many activities we have planned. I am very much into finding my ancestors and visiting the places they lived, and finding out what they did so I can document it for my family. All good things need a good foundation. I gained mine in my childhood years and my Cadet Nurse training.

BK: Wow, thank you very much, Caroline.

CB: Thank you.

BK: I'm going to turn it off unless there's anything else you wanted to add.

CB: That's it.

BK: Okay, thank you very much.

[End of Interview]