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Nursing Services  
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HISTORY OF NURSING SERVICE  
GILA PROJECT  
WAR RELOCATION AUTHORITY  
RIVERS, ARIZONA

EARLY HISTORY OF HEALTH WORK ON THE PROJECT IN RELATION TO  
THE NURSING SERVICE

Of the two camps which formed the project, Canal Camp and Butte Camp, the former was the first to open in the summer of 1942. The very early health work in that Camp was done chiefly in the open until the Canal Hospital was set up. Only clinic service was given at first, hospital cases being sent to the Indian Hospital at Sacaton. Butte Hospital, with a capacity of 200 beds, was opened officially November 22, 1942. Subsequently, Canal Hospital housed only a small number of chronic patients. This situation necessitated the provision of sufficient nursing personnel for twenty-four hour coverage of two hospitals for a population of approximately 12,000 persons.

The positions of nursing personnel as set up in the War Relocation Authority are as follows:

Chief Nurse  
Assistant Chief Nurse  
Supervising Nurse  
Senior Staff Nurse  
Junior Staff Nurse



Only appointed personnel could have Civil Service status, however evacuee graduate nurses were graded in the same manner as appointed nurses using Civil Service qualification standards in determining rating. This was done in order to give the evacuee registered nurse the satisfaction of a definite rating, and to give her the opportunity to prove whether or not she was capable of making good in her position. It also enabled her to advance from one position rating to another. Although salary advancement did not follow, there was the satisfaction of a certain amount of prestige inherent in the various advancements.

In March, 1943 there were:

- 11 Appointed Registered Nurses
- 6 Evacuee Registered Nurses
- 8 Evacuee Student Nurses
- 76 Evacuee Hospital Nurse's Aides
- 2 Evacuee Public Health Nurse's Aides
- 1 Evacuee Home Visiting Nurse's Aide

Most of the evacuee registered nurses relocated early, Miss Elsie Inoye and Miss Kimie Monden alone remained until 1945. All the student nurses relocated to complete their nursing education by September, 1943. As this trained personnel diminished it became increasingly difficult to staff both hospitals and



Canal Hospital was closed December 14, 1943.

APPOINTED PERSONNEL

All through the history of this nursing service there is evidence of unrest among the nursing personnel. Apparently one outstanding reason for this is the very frequent change of chief medical officer and the chief nurse. Constant change of administration left the nursing personnel, as well as the personnel of other departments of the hospital, at sea. In a three year period there were five different chief medical officers. The changes were even more frequent as Dr. Jack C. Sleath returned to the Project several times to fill in the interval between the outgoing and incoming medical officer.

The situation in relation to the chief nurse was about the same. Mrs. Nora L. Hurley was the first Chief Nurse who, because of illness, only stayed about three months and died shortly after leaving the Project. She was followed by Mrs. Elizabeth D. Nance, Acting Chief Nurse, who also served as Public Health Nurse. She resigned the latter part of March, 1943. Miss Augusta Peters took on these duties in June and left November 1st, 1943. Miss Josephine Rappaport came November 15th, 1943 and transferred to another project July, 1944. Miss Priscilla Parker assumed this task July 27th, 1944. Various nurses filled in the intervals between chief nurses. In view of the above, it is surprising that the nursing service



has held together and has done the good job which it has. Mrs. Bernice Stringer, Mrs. Agnes DeSomer and Mrs. Rose Williams came early in 1943. Each had the rating of Senior Staff Nurse. Mrs. Stringer and Mrs. DeSomer became Assistant Chief Nurses and Mrs. Williams, Supervising Nurse. Mrs. Stringer resigned in the spring of 1945 because of illness, Mrs. Williams stayed through the summer of 1945 and Mrs. DeSomer remained to assist with inventories of equipment after the closing of the hospital. These three nurses helped in stabilizing the nursing staff.

#### NURSE'S AIDES

Nurse's aides were recruited by Mrs. Nance in 1942 and had some teaching from the beginning. Under Miss Peters and Miss Rappaport the classes were well organized. The Medical Staff, as well as the Nursing Staff, participating in the teaching. The number of classes given to each group varied. The purpose of these classes was to give the aides sufficient theory and practical demonstrations to carry out simple nursing procedures under the supervision of a graduate nurse. However, it became necessary as time went on to depend more and more upon these aides. They gave medicines in the wards, scrubbed for both operations and deliveries, and in general carried much more responsibility than formerly was thought possible for



persons with such inadequate training. The excellent work which these aides have done testifies eloquently to the type of young women on the Project who took up this work. With few exceptions, they were the cream of the group - intelligent, capable young people with a sense of responsibility for the community. The Canal Camp has always furnished about seventy-five percent of the nurse's aides.

1. Difficulties of Recruitment

The difficulties in keeping sufficient aides included the fact that there was more real physical labor connected with this job than with other jobs for this age group; that aides had to take their turn on the evening and night shifts, but the outstanding factor was because they had to care for tuberculosis patients. Tuberculosis patients have always made up one-third to one-half of the hospital census.

Because of extreme fear of this disease by the Japanese people, especially of the Issie group, the care of these patients has often been inadequate. It was almost impossible to get evacuee graduate nurses, or nurse's aides, to give service in these wards. This fear was held also to a more limited



extent by the appointed nursing group. The condition was so acute that Miss Rappaport instituted rotation of nurse's aides when she came in November, 1943. By this system each aide served in the different services of the hospital - rotating every six weeks. No aide was employed who would not promise to serve in the tuberculosis wards. Any aide who refused to serve when her turn came was immediately terminated. Many excellent aides were terminated for this reason. Although they were willing to serve themselves, their parents objected when their turn came.

2. Suggestions and Attempts to Solve the Problem

It was recommended by the Chief Medical Officer that nurse's aides be given educational advantages in order to keep them. Also that student nurses be given credit for their work on the Project. The Chief Nurse did not approve the last recommendation as equipment and qualified teaching personnel were not available. Also being temporary, the course here could not be approved by the State. Miss Peters felt that the recommendation was not feasible.



It was suggested at about this same time that the wives of appointed personnel come into the hospital and help out on a pay basis. This idea also did not seem practical to the Chief Nurse.

Another suggestion related to the "Mary-Knoll" Sisters, a Roman Catholic Sisterhood working exclusively with the Japanese. At this time, in 1943, members of the "Mary-Knoll" Priesthood were working on this Project. It was suggested that the Sisterhood take over the tuberculosis wards either in the capacity of graduate nurses or as practical nurses, under supervision, as the case might be. It was recommended by the Chief Medical Officer that these persons be paid if possible. This idea seemed plausible to Miss Rappaport. However, it did not materialize. About this time Father Morris, the "Mary-Knoll" Priest, severed his connections with the Project.

Miss Pearl Wilson who was working in the wards and doing part-time public health work in the spring of 1943, felt that trained public health aides might help to relieve the acute nurse's aide shortage by giving first aid to persons within the blocks and assisting with clinics in the hospital. Since doctors



stopped making home visits in Butte in April, because of diminishing personnel, it was felt by the Community Council that these aides would give the populace a feeling of security.

The Block Health Advisers, commonly called "Block Nurses", came into being in March, 1943. They received thirty-four hours of class work, including Red Cross first aid work and ward practice. The Block Manager's Office was their headquarters. These advisers were married women, usually of the Issie group, many of whom spoke little or only fair English. The duties of these women were:-

1. Giving of simple treatments.
2. Responsible for attendance at:-
  - (a) Pre-natal clinic
  - (b) Post-natal clinic
  - (c) Well babies clinic
  - (d) Immunization clinic
3. Health teaching.
4. Giving advice.
5. Helping to maintain a clean healthy environment.

These women entered into the work with enthusiasm and gave conscientious service. They made simple reports on what they did, and discussed their work with Miss Wilson.



The following excerpts of their questions and reports seemed interesting:-

1. What shall I do for a constipated baby?
  2. Where can I get calomine lotion for skin rash?
  3. I dressed a burn in the Mess Hall.
  4. Where do I go to get a milk permit for a baby?
  5. How can I get an ice permit?
  6. I have a patient with eye trouble. I took her to the clinic.
  7. One of our ladies is having a new baby. May I go with her to the hospital and watch the delivery?
  8. We have a case of chicken pox. I had a card made and put it up. The family is willing.
  9. A patient had a bad stomachache. We called the ambulance.
  10. I dressed a cut finger.
  11. I helped a father care for his children, including a six weeks old baby, while his wife was in the hospital having an operation.
- The "Block Advisers" helped to interpret the hospital to the people. Some of them acted as inter-



preters in the clinics. Since these women were Issie they tended to have the confidence and good will of the community.

Miss Wilson felt that there was unlimited opportunity for development along these lines, however, she resigned May 31st, 1943. After this the "Advisers" did not have adequate supervision. Some of the inherent dangers of this plan were:-

1. A false sense of security on the part of the community.
2. Too much responsibility taken by the individual "adviser".

They died a natural death early in 1944.

3. Partial Solution of the Nurse's Aide Problem

In August, 1944, relocation was progressing rapidly. Nurse's aides also were terminating to go back to high school. The community was complaining bitterly about the rotation of young aides through the tuberculosis wards. The medical staff felt that if the girls did not have to work in these wards the nurse's aide problem would be solved.

Since the care to the tuberculosis patients had improved with the rotation of aides, the Chief Nurse was willing to consider only plans which would



not lessen the care of these patients.

Mr. John Fukushima was the Chairman of the Executive Council at this time and was greatly interested in this problem. Through his efforts the following plan was worked out and executed:-

1. One member of the family of each tuberculosis patient was to serve in these wards, or they were to provide a substitute.
2. They were to be trained in a regular class in the hospital.
3. They were to be on the payroll.
4. They were to serve on any shift.
5. They were to care for all patients, not just for the member of their family.

The class was organized in September, 1944. It was taught by Miss Elsie Inoye in Japanese. The lesson sheets were mimeographed in Japanese and given to the students.

The difficulties presented were the following:-

1. Many of the tuberculosis patients were bachelors without any relatives.
2. There was no way to compel persons to serve. Social pressure was not enough in some cases.



3. Many members of the families were doing valuable work in other departments of the Project. It was difficult, and not advisable in some cases, to obtain a release for them. For this reason several families sent persons to serve who were between sixty and seventy years of age.

It was a constant struggle to keep up the number required since the worker could be immediately released when the ill member of their family left the hospital.

In spite of the above difficulties the plan worked. The results included:-

1. A more constant number of workers in these wards.
2. Better morale among the tuberculosis patients.
3. Terminations of nurse's aides for reasons other than relocation practically stopped.

Miss Elizabeth Watkins, a teacher, was detailed to the hospital for nurse's aide work in June, 1945. She was a Red Cross Nurse's Aide and spoke Japanese fluently, having lived in Japan for twelve years. She worked in the tuberculosis wards until November 15th, 1945. She proved to be a valuable member of the nursing personnel and her work was appreciated.



4. Quarters for Nurse's Aides.

For some time it was felt by members of the community, the medical staff and some of the nurse's aides, that there should be quarters provided in the hospital where aides on night duty could have a quiet place to sleep. Such quarters were provided in August, 1944, with the understanding that these rooms were to be used for sleeping purposes only and not for recreation. At first these quarters were seldom occupied, the aides had to be persuaded to use them. Later they learned by experience that they withstood night duty much better when they slept in a quiet room away from crying babies. Close supervision was required over these rooms as advantages were taken of the privileges. However, the plan worked fairly well and stopped complaints from the community on the subject.

5. Nurse's Aide Organization

Two separate organizations of nurse's aides were formed early in 1943. The Nurse's Aide Organization of Canal and the Nurse's Aide Organization of Butte. The aides in Canal had a small club room where they held parties. The aides in Butte wished one also but owing to difficulty concerning its location, it was not before February, 1945 that a nice large club



room was finally opened. Both of these organizations elected their advisers from among the graduate nursing staff. Mrs. Stringer was the Adviser to the Canal group. Miss Fowler and Miss Monden to the Butte group.

Money for the girls' various activities came from the Community Chest, gifts from patients and from activities of the girls themselves. This money was spent for educational purposes such as anatomical charts, fixing up the club rooms, parties, and Christmas gifts for the children and tuberculosis patients.

In March, 1945 the two organizations joined and became the "Nurse's Aide Organization of Rivers". All the girls then used the Butte Club House. This organization elected Miss Fowler as its Adviser. The organization served a useful purpose in promoting good morale. The club house provided an attractive place for wholesome recreation.

6. Relocation as Related to Nursing Education

Some of the nurse's aides became interested in following nursing as a profession. As many schools of nursing did not accept Japanese American students, the selection of a school was difficult for them. "The Japanese Student Relocation Council", 1201 Chestnut Street, Philadelphia, has given this Center valuable



assistance by contacting schools of nursing and by compiling lists of schools which would accept these students.

The "National Nursing Council for War Service", Washington, D. C., has also been helpful.

The first Rivers student to be admitted to the United States Cadet Nurse Corps was Miss Anne Watanabe. She was a student nurse at San Joaquin General Hospital before evacuation. She completed her work at Hamline University, St. Paul, Minnesota.

Approximately twenty nurse's aides have entered schools of nursing in different parts of the country. St. Mary's Hospital, Rochester, Minnesota has accepted many young women of Japanese heritage and has been well pleased with their work.

#### PUBLIC HEALTH NURSING ACTIVITIES

The actual public health nursing activities on this Project have been sporadic. Mrs. Nance carried some of these activities along with her work as Chief Nurse, Miss Pearl Wilson worked both in the hospital wards and on the Project, in the schools and homes. It was not until December, 1943 that Miss Lena Bierdeman assumed the duties of a full time Public Health Nurse. She remained until November 1st, 1945.



The work of the Public Health Nurse was roughly divided into three parts:-

1. Hospital clinics in Canal
2. Public Health Work in schools
3. Home visiting

1. Clinics

After the closing of the hospital in Canal the clinics remained and were felt to be very important by the people there. The Public Health Nurse had charge of the clinics under supervision of the medical staff. The clinics in both Camps included:-

1. General medicine and surgical clinics
2. Venereal disease
3. Pre-natal and post-natal
4. Well babies
5. Immunization

Dr. Grace Lawson, Dietitian, who came to the Project in August, 1943, supervised the diets in both Camps. The Public Health Nurse referred all dietary cases to her.

2. Public Health Work in Schools

Miss Wilson did some comprehensive work in the schools. She felt that if the teachers were



taught to do careful class room inspections that most of the work could be handled by them. She felt that they could refer any children with symptoms of disease to the hospital clinic. She also felt that a full time public health nurse was not needed on the Project. The Nursing Consultant for the War Relocation Authority has felt that a well trained person in this position was essential.

During the past two years there has been a clinic in each school staffed by a nurse's aide who has had training in the observance of the outstanding symptoms of contagious diseases, taking of temperatures and the doing of simple dressings. She worked under the supervision of the Public Health Nurse.

### 3. Home Visiting

Bedside nursing was limited to teaching the family how to care for the patient, ill with a chronic disease. Most of the visits were in relation to contagious diseases. When a case was reported the nurse would make a visit, usually accompanied by a public health aide as interpreter. If she thought the patient had a contagious disease



a doctor would visit the patient for verification. It was the nurse's duty to instruct the family in isolation technique. The Block Manager was visited to acquaint him with the disease in his block and to secure his cooperation. Isolation in a barrack is difficult and it takes the understanding of the family and community to make it effective.

When a patient was admitted to the hospital with tuberculosis the family was visited and the members of the family asked to report to the chest clinic for examination. These cases, however, were not followed-up closely for periodic check ups.

Allocation of the time of the public health nurse was not in accordance with the best standards. Too much time was spent in hospital clinics and not enough time was devoted to the follow-up work on cases. It was a complex situation which involved many difficulties. But in spite of the difficulties good work was accomplished.

#### CARE OF AGED MEN

Since many men of the Issie group did not marry, the infirm single men became a problem of the Center. As early as October, 1942 there was discussion concerning old men's convalescent homes. But it was not until June, 1944 that a barrack in Canal, called



the "Wayside Inn", finally opened its doors. An untrained evacuee woman lived at the home and took care of the men. She was under the supervision of the Public Health Nurse who was in turn responsible to the Chief Nurse. This barrack housed eight to ten men comfortably.

In March, 1945 the "Convalescent Home" was opened in Butte. It was hoped that it would be used for convalescent as well as the aged as the hospital was very full at that time and the nursing aide situation difficult. It was especially arranged for its purpose, each patient having a separate cubicle. It was a very comfortable, homey place and the men liked it. There was room for fourteen patients.

Because of the increasing difficulty of feeding the patients in the "Wayside Inn", due to relocation of workers, it was closed in June. Four patients were sent to the "Convalescent Home" the rest had to be placed in one of the hospital wards.

Finally due to the closing of certain wards, the increase in number of old men, all were housed in one hospital ward and the Convalescent Home was closed in August, 1945. At this time there were twenty men who had to be cared for. They remained there until arrangements were made by Miss Gertrude Smith, Medical Social Worker, for their relocation.



COMMUNITY PUBLIC HEALTH PROGRAM

Three months after the Project opened, the professional hospital personnel and the Community Council were interested in a Health Education program. Motion pictures and lantern slides on health subjects were shown in the open air movie theater in October, 1942. The doctors and Chief Nurse gave many talks on health subjects to various groups on the Project.

In response to the desires of the community, Miss Catherine Yamaguchi, a graduate nurse employed by the American Red Cross, gave the Standard Course in Red Cross Home Nursing under the auspices of the Butte Unit of the American Red Cross. Sixty students completed this course satisfactorily. There was a great deal of enthusiasm on the Project concerning this course. Many mothers and daughters took it together. Miss Yamaguchi spoke both English and Japanese fluently and was an excellent teacher.

In the late fall of 1944 the new Chief Nurse, like all new people, was greatly concerned over the intense fear shown by the evacuee group toward tuberculosis. This fear hindered diagnosis and treatment. The situation was discussed with Dr. George P. Young of the Educational Department who was much interested in this particular fear. A Health Committee was formed which included members from the Educational Department, Medical and Nursing Departments. Dr. Young was Chairman



of the Committee. The Committee included both appointed personnel and evacuees. A broad program was discussed with education in regard to tuberculosis as its basis. Subject matter was to be included in different courses of the curricula in regard to this disease. Dr. K. Kiyasu was an active member of this Committee and greatly interested in it. A part of the program was to be a play given at the end of the school year with as many people participating as possible. The idea was to have different groups assist in composing the play. Many groups on the Project were contacted and were interested. About this time the Post-exclusion Act came through. Interests of the evacuees changed over night and with regret the program was dropped.

#### CLOSING OF THE NURSING SERVICE

The last patients left the hospital the 5th of November. Mrs. Agnes DeSomer, Mrs. Velda Brown, Mrs. Carmen Hughes remained to assist with cataloging materials and taking inventories of supplies.

To have had a part in the community health work of this Project has been a unique experience for all concerned. We have been part of an experiment never tried in this country before. Many methods have been learned through trial and error. Whatever the errors, the success has been great. The patients have received good medical and



nursing service. Mortality among babies has been extremely low, young mothers have received excellent pre and post-natal service. Most of the evacuees left the Project with a much better understanding of the underlying principles of health than when they came three years ago.

The nursing service has always been able to meet any situation confronting it with the help of the War Relocation Authority Nursing Consultants from Washington; Miss Joy Stewart, Miss Jean Sutherland and the Assistant, Miss Gertrude Wetzel. Their help has been understanding, timely and sympathetic.

Respectfully submitted,

*Priscilla Parker*

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Priscilla Parker  
Chief Nurse