

— OPERATION — DESERT STORM THE FIRST GULF WAR

HISTORICAL BACKGROUND

On August 2, 1990, Iraq invaded Kuwait. Kuwait asked the United States for assistance in defending themselves, and within five days United States F-15 Eagle fighters arrived in the Persian Gulf from Langley Air Force Base in Virginia to begin Operation Desert Shield, an effort to liberate Kuwait from Saddam Hussein, the political leader of Iraq. The United States was able to put together a coalition of more than thirty-five nations who supported the military liberation of Kuwait (moral support, troops, money, and supplies). It was clear that the United States would carry the major burden of the effort. On August 22, 1990, President George Bush authorized the call-up of the reserves. Reservists began to mobilize in preparation to go to the Gulf for combat and to receive casualties. Areas were prepared to receive patients in the Gulf, in Europe, and in the United States. The activities in August began a five-month diplomatic effort to liberate Kuwait and stop the conflict. However, on Janu-

ary 17, 1991, a one-month air war began to try to convince Saddam Hussein to leave Kuwait, with no result. On February 22, President Bush delivered an ultimatum to Hussein demanding that he withdraw from Kuwait by February 23, 1991. When no withdrawal came, United States armed forces moved into Iraq and Kuwait. Though there had been much concern about a substantial resistance from Iraqi forces, little resistance was encountered and on February 26, 1991, Kuwaiti resistance leaders declared that they were again in control of Kuwait. On February 27, President Bush ordered a cease-fire at the end of what is sometimes referred to as the “one hundred hour war.” On March 3, 1991, Iraqi leaders accepted the terms of the cease-fire. During the war there were 148 combat deaths out of the 533,608 troops who served in the Gulf War. Another 145 died of non-combat-related conditions. One hundred thousand Iraqi troops died during the conflict and three hundred thousand Iraqis were wounded.

Though it has been over a decade since the first Gulf War, nursing literature is still being generated about lessons learned from that conflict. One registered nurse, Heather Worthington (1995), said of her experience in the Gulf:

We worked twelve-hour shifts, five days a week. The hospital was thirty minutes away, so bus transportation was important. The buses were always packed. Driving on the Saudi highway was a terrifying experience. I was less afraid of getting killed by a Scud missile than being in a bus accident on the highway. Our young bus drivers didn't have much experience. Also, young soldiers who thought they were "Rampos" rode shotgun. I thought, "Why don't they give the duty to our Vietnam vets who understand that weapons are serious?" We were loaded into buses with our backpacks, gas masks, helmets, and weapons. We learned to live with the gas masks day and night. (18–19)

Worthington (1991) spoke of the short preparation time many military personnel dealt with during mobilization in the Gulf conflict:

I had only four days to prepare before reporting to my mobilization point, Fort Lewis. This left very little time for family goodbyes. Nothing seemed real through the transition. I felt like I was having a bad dream from which I would soon awake. Tears were always close. Leaving home, I was not even sure of my destination—Germany or Saudi Arabia. (29)

We had twenty-four hours' notice when we left Saudi Arabia. Leaving was another new adjustment, especially for the women. Throughout the entire stay, we had no responsibilities except to our job and to ourselves. We went back to Fort Lewis via Cairo, Ireland, and the Arctic Circle—a striking contrast from the desert. We were warmly welcomed at Fort Lewis. From there, approximately thirty of us flew into San Francisco, where more than five hundred people were waiting for us—members of our units and our families. The emotion and anticipation of seeing loved ones again and of being back in the United States was overwhelming. (34)

Worthington also spoke of her feelings about the combat experience in general:

As I recount these events, the experience retains a sense of the unreal, as if I had traveled to the "Twilight Zone." My part in the war was an experience filled with contrasts—impoverished apartments, sparse surroundings, and war paraphernalia set against service in a modern hospital with wealthy clients and gourmet food in the cafeteria.

I felt a profound resurgence of patriotism. Homecoming brought tears and a full range of emotions that were different, yet just as intense, as those I felt upon leaving. I felt I had been a part of a much larger group, part of a true international force. Together with persons from many nations, we formed a multinational treatment team, all working toward a common goal. (34)

KENT DEAN BLAD

Serving in the Persian Gulf War was definitely an interesting experience. My wife and family, we have been truly blessed because of it. We also had many challenges because of it.

Just to give you a little chronological scenario, it was on Saturday before Thanksgiving 1990 that we were at our regularly scheduled monthly drill at the National Guard. I was a member of the 144th Evacuation Hospital out of Salt Lake City, serving in the operating room as an OR nurse. Many units at that time were being activated or put on alert to go to the Persian Gulf to help out with the conflict that was occurring at that time. At lunchtime there was an emergency formation called, at which time our commanding officer informed us that not only had we been put on alert, but we had been activated as of Thanksgiving Day, which was four days following our notice. For me, the reaction was one of fear, mostly because of the unknown. I had four days in which to get our (my family's) lives in order, get our finances taken care of, get our



Kent Dean Blad

shots, insurance—all the technical things that would need to be done in a four-day span to physically leave home—not knowing when we would be back. Even worse than that, we were given four days in which to mentally get ready. I think that was the toughest of the assignments. Thanksgiving Day we did spend at home. They were kind enough to let us spend the morning and the afternoon at home. The buses left in the evening for Fort Carson, Colorado.

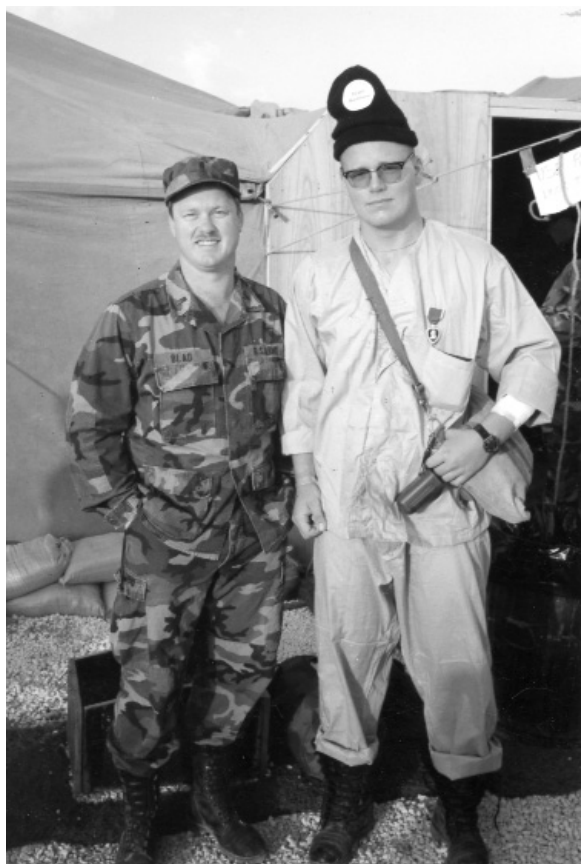
We spent approximately the rest of November, all of December, and the first week of January at Fort Carson. In January we were given our station assignment in Saudi Arabia. We flew over on commercial air transportation. We landed at night with the lights on the plane and on the runway dimmed, so as not to be identified. We spent three days, immediately upon arrival in Saudi Arabia, in a makeshift barracks or apartment complex that was sitting empty there until we

were to get our exact location to set up our hospital in Saudi Arabia. The place we stayed for those first three days in Dhahran, Saudi Arabia, is the same building that was hit by the Scud missile toward the end of the conflict that took out the majority of our casualties in the Persian Gulf War.

We were assigned to the Riyadh airport, called the King Fahd International Airport, in Saudi Arabia. Our hospital was to be set up at the side of the runway. As casualties occurred, they would be flown in, the planes would stop right on the runway, the doors would open, and they would empty them right into our tent hospital.

We were very fortunate in that we saw no casualties that led to deaths. We only saw one individual with a combat-related injury. The rest of our patients were more or less accident victims—vehicle rollovers, broken limbs—that sort of thing. We did not receive a tremendous number of patients. At any one time we probably averaged ten to twenty patients in our hospital a day. We were very grateful for that. The conflict ended the last day of February, but we were asked to stay on for an additional time period to be medical support for the troops while they were evacuating out of the country. So we did spend a little more time there than a lot of the soldiers who were in the conflict.

But my story today is not about times and dates. It is more about experiences that we had, about feelings that come in such a situation, and about lessons that were learned from that conflict. At the time my wife and I had four children, all under the ages of seven—very dependent children. It was a difficult time. We had a newborn and it was a very difficult time to leave my wife and children. But through the events that happened, there were a lot of blessings that came. It was very difficult leaving small children who did not understand that Dad was going to be gone for an unknown period of time. We did not know if it would be temporary or long-term or if I would even return at all. What do you say to your children when you don't know what the



Kent, left, with a patient

future is going to bring? It was a very difficult thing and one that we certainly do not wish to repeat. It was very difficult leaving a wife right in the middle of raising a family, having had a very wonderful relationship. We were right in the middle of our lives. We were loving life at the time. Things were going great. Things were pretty much turned upside down from this experience.

I would like to share some of the things I learned. Probably the main lesson that I learned was that having four days to get our lives completely in order—physically, mentally, spiritually—was not a lot of time. The lesson learned was that we never know what tomorrow will bring. We should live today as though it might be our last. I don't mean that in a doomsday way but in a very positive way. We should treat others as if this may be the last time we ever see them. We should treat our family members as if this may be the last day that we are with them. Life is

very fragile and we never know what tomorrow may bring. I would hope that we would treat others and be kind to others and do it as if tomorrow might not come for us or for them.

I learned also that we should cherish freedom and hold it so close and dear to our hearts that we would be willing to give our lives for it; that we should have wives and husbands who would be willing to sacrifice a spouse for that freedom and children who would be willing to give up a father or mother if need be to protect the freedoms that our country is based on.

What I learned was a great lesson on priorities in our life. All of a sudden, it was not important what kind of car we drove or what kind of a home we possessed. It was not important what kind of sports we played in high school. What we thought was important at times quickly switched to things that really are priorities, such as families and loved ones. I learned very quickly and in a big way that where your heart is, there also will be your treasure, and that is what we should focus on in life.

I also promised myself that if I made it through this conflict, that in the future if I ever had to choose between time and money, I would always choose time—time to be with my family, friends, and associates—time to be with those that I love.

We may find times in our lives when we are totally helpless. No matter how much control we think we have over our lives, we must always remember that we have to have faith and trust in the Lord. We are not in control of things. There is a higher power beyond us that controls the big scheme of things. That was brought home ever so emphatically in this situation.

In addition to what I said about cherishing freedom, we should always cherish the things that we love the most, and not take them for granted: our families, our friends, and those around us that we care about so much. We should not think that they will always be here for us, no matter what, because that may not always be true.

The next thing I learned is that the gospel and the family are everything. Without those two things, our lives would be pretty empty. I cherish them even more now. I thought I did before, but I do even more since this happened. Those two things became the main focus of my life.

Another thing I learned was that the time we spend on things should equal the priorities that we have. The things that are lowest on our priority list should not be the things that get the majority of our time. The time spent in our lives should be equal to the importance of our priorities, whatever they may be.

I learned that there are great rewards in service. How many times are we told in the scriptures or asked to provide service and commanded to be of service and to love like Christ did? Even though each individual soldier who went to that conflict may not feel like they alone made a great impact, collectively there was a great impact by all the individuals that were involved. Having an opportunity to serve and to love those things that I cherish so dearly was a great blessing in my life.

I learned to always be positive. Too often in life we focus on the negative aspects of life. We spend a lot of time and attention thinking and talking about negative things, when in essence, life is so short and fragile, it should be just the reverse. Our time should be spent with positive things and our attitudes should be positive. We should approach things always in a positive manner. We should treat others positively.

I learned that you should treat people you love as if you really love them. Don't just go through the motions. Show with your time, energy, and actions that you really do love them. Being kind to others is a good insurance policy. We never know when we are going to need others to be kind to us. I am thinking specifically that when I left that Thanksgiving night, I left my family not knowing if I was going to return. Knowing that I would be gone, I prayed so hard that people that we had tried to be kind to would show generosity and kindness toward my wife

and children in the absence of their husband and father. I prayed that I would now be the recipient of that 100 percent home teaching that I had tried to do for so many years. The day before I left, the bishop came over and met with us in our home. He asked us, as kind as he was, what he could do specifically to help us while I was gone. It was not the need of food, it was not the need of money, and in fact, it was not any physical need that we had at that time. I begged the bishop to please be sure that my wife received the best home teachers that he had in the entire ward, someone that could be dependable, somebody that may come on another day besides the last day of the month. He assigned himself and his wife as our family's home teachers. According to my wife, there was not a week that went by without him checking in. I'm sure it was probably closer to daily visits. The children's birthdays were not missed; special events in our family were attended to in a great way by this great man and his good wife. So we should remember that if we are kind to others, we may end up being a recipient of that kindness from them. We should always treat others with kindness.

The next lesson learned is that righteousness always prevails. Sometimes it takes a little time for that to happen, but righteousness, goodness, and honesty—the best thing that could happen will always prevail.

One of the last things, but certainly one of the most important things, was my gratitude to my Savior for many things—for protecting me and for protecting my family. Over in Saudi Arabia, in the Arabian Peninsula, close to the birthplace of our Savior, there were many nights that I was very lonely. Even though we were surrounded by many people, there were many nights that loneliness and missing our families set in. That is the worst feeling that anyone could experience. On those nights of loneliness, I would go outside and stare into that sky, that eastern sky that held that star on the day that our Savior was born. That was a great comfort. It was a great feeling and a great thought to know that

for the first time in my life. I was able to stare at the same sky that the wisemen and the people around the time of the Savior's birth had stared at. I was grateful to my Savior for my wife's sake. My only prayer, the whole time that I was gone, was not that I would be protected, but that my wife and children would be well cared for in my absence. My wife relates experiences that are very sacred and very private, particularly of protection and help that she did receive. She said that at no other time in her life had she felt so secure. She felt protected to the point that she would not hesitate to leave the windows open at night in our home, which for her is a major breakthrough. She is very security seeking. We did not live in a great area of town at that time. She said that she felt that there was a shield, a protection that was over our home at all times. That meant a lot to me.

My oldest child at the time was seven, and his name is Matthew. He was the only child we had at the time that could even remotely understand that his dad had to leave and that it was not necessarily Dad's choice, even though I was grateful for the opportunity to serve. I sat each of the children down and said goodbye to them. As I specifically said goodbye to him, not knowing his level of maturity or sensitivity, I said to him, "Son, I'm going to have to go now. I don't know when and I don't know if I will be able to return. Since Dad is going to be gone, I need you to be the man of this house. Mom is going to need a lot of help and Dad will not be here to help Mom like he wants to. I would ask that you would now take over as the man of the house." The day I arrived at the Salt Lake Airport, where we were released from duty, he ran to me with his arms out. We embraced for a long period of time, as fathers and sons often do. He said, "Dad, I'm so glad that you are home because I am tired of being the man of the house." And I saw a physical release come over him. Little did I realize that he had taken me so literally that day when I asked him to be the man of the house at seven years old. He was physically exhausted from try-

ing to help his mother. There were many lessons that I learned from that experience about children and about human nature in general and about being a father in a family. I have been ever so grateful to him for the valuable lessons that he taught me with those one or two sentences that he muttered that day. I was anguished and pained that I had put that burden upon his shoulders but grateful for the seriousness with which he took it and grateful for the lessons that he taught a mom and a dad that day.

Even though we did not experience great numbers of casualties through the Persian Gulf conflict, there were many valuable lessons that were learned. My wife and I feel like that was a turning point in our marriage, which was very good at the time but became even better. There was a bond that occurred there that could never be broken. There was a newfound love for my country. Ever since that very day that I returned home, I cannot see a flag or hear "The Star-Spangled Banner" without privately coming to attention and paying respect for the symbol that flag represents. I am deeply offended by those who choose to talk negatively or unfavorably about our country and our flag, especially those who have never had to pay a price or who are so willing to be the benefactors of those who have fought for their freedoms. Yet they bad-mouth those very freedoms that have been protected over the years. I am grateful for the opportunity that I had. I feel like it was a huge blessing in my life. In a lot of ways it was an answer to many prayers and in six months time I surely grew many years beyond my age. I will ever be so grateful. We have benefitted financially, physically, and most importantly, our family has benefitted spiritually from that experience. I am ever so grateful to my Heavenly Father for that.

PAUL LEVI BLAD

In 1981 I was doing pre-med courses at Snow College and decided I needed some financial help. That is when I joined the army. After

joining the Army National Guard, I trained to work in the operating room as a technician. I did that at LDS Hospital while I attended the University of Utah College of Nursing, plus I did weekend drills for the 144th Evacuation Hospital. After my four years of nursing school, I decided I just wanted a break before I went into a graduate program. I joined the Air Force as an active-duty member and was stationed in Northern California at Beale Air Force Base. It was there that I had a major life event.

My first wife passed away—a sudden, unexpected death. I got off of active duty because of my family situation. I had three small children—one a baby daughter. I came back to Utah and joined up with the original Army National Guard unit that I had previously belonged to. That was the 144th Evacuation Hospital out of Salt Lake City. I had invested enough in the military that I knew I didn't want to get out completely. Within a year of going from active-duty status to National Guardsman, Desert Storm broke out and I was activated as a reservist. The active duty unit I had belonged to never was activated. Here, I got out of being an active duty member to be Mom and Dad to my children. Then the war breaks out, and of course they don't take hardship cases. They need you for your specialty, and that is what I trained for.

I had just gotten remarried when I was activated for Desert Storm. It was about a year after my first wife had passed away. I thought, "How could my poor new wife take on my three children and her two children—five children into this new marriage?" It was a hard time. Basically, we had just come off our honeymoon. We began our marriage with me leaving to go to a war. I did not try to get a waiver. It was my responsibility, and I went. I didn't see my hardship as any worse than anyone else's. Basically, my life had stabilized because I had gotten married and my children had a support system. Also, my brother, Kent, was activated and left a large family.

Right before Thanksgiving we had a weekend drill. They notified us that right after

Thanksgiving we would be leaving. It was a hard, emotional, and sad time of my life because we did not know what we were getting into. We had the impression that Iraq was almost a world power when it came to military equipment. We had heard about the Russian-made equipment and how efficient it was. If we went over, we really did not know if we would be coming back. Of course, that is the situation with any war. It was a very emotional time. And having survived it and looking back, I have to say that a major bond formed between me, my wife, and my family. We survived it together. We feel like we went through a hard time and survived it. We did our best.

I live in the small community of Kanosh, Utah, total population of just under five hundred. In the entire Millard County, only two people were activated to the war. I pretty much represented the east side of Millard County. I got more support than I could have imagined, but I didn't realize it until after I got home. It was a good thing for my wife to be in a place where she received a lot of support. It was a time when home teachers and visiting teachers and the whole ward really kicked in. I have extended family in the area, and they really helped out. It means more than I can ever say.

We went over to Saudi as a whole unit, about three hundred members. They supplemented our unit with members from all over the nation. Most units have vacancies, and in a war situation vacancies are filled. We received physicians and nurses from all over the nation who were put into basically an LDS unit. At least 90 percent of our unit was LDS with about 60 percent activity. We functioned as a branch during the war. It was really fun to be a part of something like that. Bonding came with it. We were all kept together as a unit when we got to Saudi. It was interesting watching our medical unit function as a branch. Many of the leaders of our unit were bishops or stake presidents back in Utah. Important people in society were taken to a war zone, leaving their comfort zones. We were all so

humbled. I can't tell you the spirit that was there in our sacrament meetings. It was always so strong. Usually the theme was how much we appreciate the gospel, our families, everything we had previously taken for granted. There was a great spirit, and we became very close because of it. We held positions in the branch. Everyone was at least a home teacher or a visiting teacher. We took turns teaching, and we had a lot of testimony meetings. The leadership was already established because we functioned as a branch during weekends before mobilization. Our branch leader was also our commanding officer. We had a chaplain who was part of the branch presidency. There were a lot of inactive people that became very active during that period. However, there were a few people that you would have assumed were strong and active who went the other way. It was interesting to stand back and watch how people cope with the stress of such situations. For the most part, people usually bonded together and made the most of it.

We were warned not to bring up religion to the Arabs. We befriended many Arabs and some of them actually invited us into their homes and explained their way of life and actually asked us questions about our religion and what we believed in. We were told that if we were asked about our faith, we could respond, but it was not okay to proselyte. I have heard it said that war usually opens up doors of missionary work, so who knows what seeds were planted during this war.

Our unit was designated as an evacuation unit, like a MASH unit. We are supposed to be able to pick up and set up our hospital anywhere in twenty-four hours. We set up our hospital right next to the International Airport in Riyadh, where we could receive the heavy casualties. It was a five-hundred-bed hospital, covering just about every specialty you can imagine in a wartime setting. Some of our physicians were actually plastic surgeons. That wasn't their title in the war, but that's what they were in the civilian world. We had sixty physicians, three hundred plus nurses, and all the ancillary support and

equipment that went with it. I was associated with the operating room section. All of our operating rooms were huge mobile boxes. They popped out to be these incredible two-bed operating rooms. The OR suits were interconnected to the hospital so that we have the same air-conditioning and heating systems and air control.

We were activated and we went to Fort Carson to do our pre-war training, most of which was nuclear and biochemical warfare training. That took two or three weeks. Once we were done with that, it became a waiting game—waiting for our turn to go over. Of course, all of our equipment had to precede us. It was kind of a logistics nightmare. It was over Christmas and we couldn't decide whether we should bring our families to Fort Carson and have a little Christmas or whether we should we go meet them somewhere. We were told we really couldn't leave because we could be sent off at any time. That's why Fort Carson was difficult for families.

I spent a lot of time on the phone. My phone bills got as high as \$800 a month. We were lucky to even have access. To be able to call home during the war situation was fortunate. We had to hike several miles to a phone in Saudi, at least at the beginning of the war. Later, as technology came in, we did get phones closer to us. You would have to wait hours sometimes to get to the phone. I don't remember anyone having cell phones. There were several ways to call home. One was like a ham radio where you say, "Hi honey, I love you, over," and then she would have to give her message and everybody in the camp could hear you. I really felt that as a newlywed I needed to call home, and I wanted to call as often as I could. I was promoted during Desert Storm from first lieutenant to captain. So the pay raise all went toward phone bills. That was how I justified the phone calls.

They took us from Fort Carson to Saudi in a very large commercial airliner. We didn't fly right into Riyadh. We flew into Bahrain. It was frightening. There were certain instructions given to every unit coming to Saudi. When the

airplane got close to the city, it had to turn off all of its lights, and we landed on a very dim airstrip. Lights were out. We were going into a war zone and we did not want to enter conspicuously. When we got out of that plane and walked onto the runway, we were dead silent. The feeling was very eerie. We had just walked into a war. Everyone kept the noise level down. We didn't turn on our flashlights. Fear of the unknown dominated our thoughts.

They put us up in Bahrain in an apartment complex while we waited for our final assignment as to where we were going to set up our hospital. The apartments that we stayed in are the very apartments that ended up getting bombed at the end of the war. It was hit by the one Scud missile that did get through and ended up killing thirty servicemen. Speaking of the Scud missiles that had come into Riyadh, after it was all over, they sent each of the units a copy of the trajectory of each of those Scud missiles, where they would have hit had they made it through. There were four of those that were projected to hit the complex where we resided. So we were grateful for the Patriot missiles and modern technology.

We had a Patriot missile battery right next to where we were stationed. They were set up right next to our hospital, right there by the international airport. Whenever a Scud missile would come close, a Patriot missile would go off. They sent two Patriot missiles at each Scud missile. They did that in case the first one missed, which they rarely did. Sometimes one would hit the warhead of the Scud and the other one would come by and hit the rest of the missile.

We were in Saudi a few weeks before the war actually started. Our hospital was already set up and we had already started to work shifts in the hospital. The hospital was twenty or thirty miles away from the apartments that the Saudi Arabian government gave us to stay in. We would be shipped in for our shifts, which were twelve-hour shifts. The first night of the war they sent thirty-eight Scud missiles. We medical types

had no idea what was happening. All we knew was that there were a lot of explosions, a lot of earthshaking, and we thought we were right in the middle of it. I was not on shift at the hospital on the night the war began. My brother and I and our little group had actually gone to watch the football playoffs at about 1:00 in the morning. We had to walk several miles to where we knew there was a TV. I remember it was half-time. We decided we would leave and go get some breakfast. They had mess halls set up everywhere, and we were in the mess hall eating breakfast about 1:30 or 2:00 in the morning when Iraq started sending the Scud missiles. When the first one hit, the lights went out. We basically just took cover. None of us carried weapons, and we didn't know what to do anyway. We were in the mess hall, took cover under the tables, and just listened over the next few hours to one explosion after another. When this all happened, there were a lot of people in there. It was pitch dark. The attack lasted two to three hours. We did have our gas masks and chemical suits, and we were trained to get into those immediately. So there we were, all decked out in our chemical gear, and it was very hot. Eventually, we high-tailed it back to our apartment complex.

Being stationed next door to a Patriot missile battery, we experienced the power of such technology. Each Patriot missile being launched felt like a double earthquake, one explosion from the concussion of the launch and another as it broke the sound barrier right out of the launchpad. The biggest explosion of all was when it would connect with the Scud, and then everything would just shake. Pieces would come flying down around us. In the daytime we could go around picking up shrapnel. At home I have pieces of Raytheon circuit boards from the missiles. Fortunately, none of us got hit with any of the debris. It was a bewildering situation. We were trained not to panic, but fear of the unknown and not really knowing what your place is in such a situation was just different.

During this war we treated many more non-war casualties than war casualties. We were next to their freeway, and we treated civilians involved in accidents. We were willing to take any patient we could as we had ample medical gear and personnel waiting to do something, not wanting to lose their skills. As far as war casualties, the few that we did get had already been seen by front-line medical units and so they had been treated and triaged to the point that they were stable. We performed some surgeries: appendectomies, exploratory laps, on-the-job injuries, heavy-duty lacerations, sandstorm accidents.

About half our unit was male and half female. While we were waiting for the war to start, we befriended the Saudi medical personnel. We actually went to their hospitals and worked alongside them in a teaching/learning situation. Some of the male members of the unit got to spend time in the homes of the Arabs we befriended, but the women were not welcome. When the women would go into town, they would get pinched by the Arab men, not because they were trying to be fresh, but because they disapproved of women who were not veiled. Some of the women continued to try and go unveiled. Others didn't go into town. Some actually bought a veil and wore it over their battle dress utilities (BDUs) to go into town.

The physicians were so concerned about losing their skills. We were seven months over there. We arrived there the first part of January 1990, and we left the end of May or first part of June. We were one of the last units to get there and get set up. Because we were set up so well and had a reputation of efficiency, they decided to keep us behind to support the troops. We were the designated medical support for the exiting troops.

By the time we got home, the ticker tape and parades had pretty much ended except for my little community. When I came into town, they were waiting outside with the town fire engine, and they made me and my family get on and ride down the only street in town. Folks were waiting and welcoming me home. At the

Fourth of July parade in Fillmore, I was designated the grand marshal. While I was gone, the staff at the hospital doubled up and covered for me, so when I got back I tried to pay them back by working some extra shifts, but they were so supportive. I received several letters and postcards from them. The support was just incredible.

In retrospect, from a family standpoint, the war turned out to be one of the biggest blessings of my life. While I was gone for seven months, my three children learned to love their new mother. When I came home, she was their mother. There was no stepmother/stepchild barrier. There was love and bonding. It was incredible. I just stood back and admired and cried and thanked the Lord. It was a great blessing. You just never know. My wife went through a lot more than I did in the war, trying to make the family stick together. Once we were there and set up, there wasn't much stress involved. We weren't getting casualties. It was a waiting game.

We learned to entertain ourselves and keep busy. We had Olympics between us and other countries, like the Swiss unit right next to us. We would have get-togethers and entertainment shows. My brother Kent and I had the unwritten assignment as entertainment specialists and tour guides. We took tours into downtown to the perfume and gold shops. These activities appeared to aid in building morale during such stressful times.

None of our people were hurt in action. Some of the ladies were sent home because of pregnancy. We had a couple of on-the-job heavy-equipment accidents, but no one was sent home because of them.

One of the great lessons I learned during the war was how important our freedoms are as Americans. When Iraq left Kuwait and the war was basically over, we were allowed to go in and help where needed. We would go into Kuwait, only as small groups as a security measure, because there was always the threat of terrorism and a few bands of Iraqis left behind that weren't



*Susan Herron with a flag that
her unit kept in their plane*

very predictable. The streets of Kuwait City were pretty empty, but the Kuwaitis would come up to us and thank us and cry at our feet and do anything they could think of to show their appreciation for what we had done. When we left Kuwait, all the oil fields were burning and that was a really eerie feeling. We went to the freeway that leads to Iraq, Thunder Hill. During the conflict, all the tanks and Iraqi troops were trying to get back to Iraq by that route. Our air force just bombed it all. The sky was black and the sun looked like blood from the burning oil, and there was a feeling of death and destruction and darkness. I can't tell you what it felt like. It penetrated to the bone. It has had an everlasting effect on me. It certainly felt like a sign of the times.

I learned three lessons from my combat experience. First, I am so grateful to be a member of the Church and to have the gospel and the blessings and security of the plan of salvation. Second, the strength of family and their love and support through prayers and letters meant everything. Finally, love of country. Having experienced firsthand what it would be like to be stripped of your freedoms by a neighboring country, I would defend our nation at all costs.

SUSAN HERRON

I have been in the air force reserves since December 1988, when I was commissioned. It was one of those things where I was reading one of my nursing magazines, and it said, "If you want to see the world, join the air force." They were right because I've been all over. I knew that I didn't want to spend my weekends in the hospital, that's what I did during the week, so the air force offered the opportunity to be a flight nurse and to fly around. The army uses rotary aircraft, like helicopters, for medevac. They'll go in and get the sick and wounded and bring them to us. We fly in a large cargo plane to do the long haul.

For Iraqi Freedom, we had a very complicated thing to start with. We started out in England, then we would fly down to Sicily. We would sit alert in Sicily, then we would go to Kuwait and pick the patients up and fly them to either Germany or Spain. It was a huge circle. As the war progressed, they eliminated some of these spots. Pretty soon we ended up going from Germany to the desert, Germany to the desert, and so forth.

The planes that we mostly flew on were the C-141s, and they are capable of transporting 103 litter patients and then a mixture if you have ambulatory patients. We had a combination of patients. Some of the patients would come on the plane and they had an abnormal pap smear. Other patients would come to us on ventilators with head injuries or blast wounds or burns. You saw everything. We had Landstuhl, which was a big hospital in Germany that had the capability for everything. They could handle trauma and all kinds of stuff.

After we took care of the service members, we never really knew what happened to them. What we did know is that we took them to Germany, and then occasionally we would do a mission to the States and we would bring some of the more serious ones stateside. We never really saw them after that. Now I'm assuming that

there were many that returned to duty. We were deployed from February 2003 until August, so about six or seven months later.

We never seemed to stay in one place for more than two days. We were in England for two days, and then we would fly to Sicily. Then we would crew rest, get ready for a mission, and stay there for two days before going to Kuwait. In the initial part of the war, we would just land in Kuwait and go on, and that made a twenty-four-hour workday for us. We would be dead after that. Then they decided that they were killing the aerovac crews, so they decided to allow for crew rest. Even then when we hit Kuwait, we had to off-load all the cargo that they put on the plane and set up everything for air evacuation. By that time, we were twelve hours into our day, and we were dead tired already. It was also 120 degrees outside, and we were in a metal tube. We would pick up all our patients and then fly to Germany. That was another overwhelming thing. When we were in Sicily, we would get a basic initial report of how many patients we were going to get. They would tell us that we would get twenty to thirty patients, and that in itself was kind of overwhelming because we had three nurses on the plane. So then we land in Kuwait and they come on the plane and say, "Oh, you're getting seventy patients today." Seventy patients! It was crazy.

Our patients were mostly active duty. We did have a couple of Iraqi nationals. Most of them were humanitarians. I remember one was a sixteen-year-old girl who had burns. Another one was an Iraqi freedom fighter. There were a couple others interspersed in there. Most of the time they had an interpreter with them. That really helped. Otherwise, we used body language. You have to be very careful, especially if you're dealing with the males, because females couldn't touch them or even approach them. You really had to keep that in mind. We Americans are very touchy-feely. That's how nursing is.

There were three nurses on the flight crew. One nurse would be the medical crew director, who was in charge of paperwork and coordination and all that kind of stuff. The other two nurses would split the plane in half. One nurse would take one side of the plane, and the other nurse would take the other side of the plane. So you started at one end of the plane and you just worked your way down. You gave medicines and bandages, started IVs, gave morphine pushes, charted when you could, and did whatever else you had to do. By the time you finished and got down one side of the plane, you had to start all over again. We have very strict guidelines and regulations on narcotics. When a client comes on a plane with narcotics, you do a double count and chart that. Well, when you have seventy patients and at least half of those are coming on with tons of morphine, there's no way to count it and no way to account for it. So you're just pushing morphine and hopefully charting it because there are so many that you're doing. Everything took so much time because we were mixing all of our IV antibiotics since nothing came premixed. It was overwhelming.

One of the things I realized when I got back here into the urgent care emergency room here at the VA was that there were some days that I really enjoyed my job here and other days where I felt this stressful feeling. I realized that I was having some feelings, I don't want to call them flashbacks, because that just sounds so veteranish, but it was that overwhelming feeling, the feeling of being overwhelmed and being out of control and not knowing if you could do it because there are so many things that needed to be done. When we have fifty patients out in our waiting area and they all need to be seen now and you can't get to them all, it's just like seventy patients being on your plane and each one of them needs something, but you can't do everything. Again it was that overwhelming feeling that I felt during the war and I didn't like that, so I started to think that it was time to go on to a more structured

environment, so that's why I was looking for another job position.

I'm going to have to word this carefully because this was one of our difficulties. They tell you to train the way you're going to go to war, so we train a certain way. We have our medical supplies packaged a certain way. We go on training missions. Like this weekend, I have a training mission coming up. We're going to bring our supplies and set up the plane, and we're going to have people playing patients and people playing crew members. We will have diagnoses for these patients, and we will have to go get supplies out of our kits to take care of these patients. That's how we train.

Well, I don't know when it was, whether it was the week we left before the war or the week after we got to the war, but they changed the packaging guidelines. It was great in theory because the theory was if you have between ten and twenty patients, you're going to take bags one through three, so you only have to take three bags. If you have between twenty and fifty patients, you're going to take two extra bags. Okay, now that's five to seven bags we're up to, but it was still manageable. That was the theory. If you have fewer patients, you'll take fewer bags. So that was great. However, like I say, when we got to Sicily, we were told we were going to have twenty to thirty patients, but by the time we get to Kuwait we were told we have seventy. So we ended up bringing every single piece of equipment and every package of bags full of all our stuff on each and every mission. So now that the packaging guidelines are different, we don't know where to go or which bag is what. It didn't really help, because we had to take everything anyway. So when you're looking for IV tubing, it used to be in bag number three, but you'd have to look through the packaging guideline. Then you would have to look through sixteen pages of the packaging guideline to figure out which bag it was in, and your patients are screaming in pain. You don't have time to be looking for stuff like

that. It was very frustrating to have things change right before we went to war.

Initially, we had enough stuff because we were only carrying twenty to thirty patients during the first couple of weeks of war. After that is when we started getting our missions of fifty, sixty, seventy, and sometimes up to eighty patients. Then we started running out of things like saline flushes, piggy backs, tubing, needles, syringes, or other things you were using all the time for a lot of patients. What we as individual flight nurses started doing after every mission was repacking our kits. We all had our own little kits, our own personal bags that we would throw a bunch of extra stuff in, the stuff we knew we were going to be using so much of, so we all had extra supplies with us. It happens to you once and you learn, and then the rest of the time you're prepared.

I was deployed three times. I went on Operation Restore Hope. That started in 1992. I was deployed in 1993 for it. It was the famine relief effort in Somalia. You might remember it from the movie *Black Hawk Down*. It started out being a humanitarian effort. We went there to feed the hungry people, but it didn't turn out like that. I was a flight nurse then too, and we spent half of our time in Cairo, Egypt, where our base was. We would do rotations down into Mogadishu. We spent two weeks in Cairo, two weeks in Mogadishu, two weeks in Cairo, and again two weeks in Mogadishu. Our plane would take off from Cairo, come down, pick up the patients, and fly back to Cairo and then on to Germany. That was our ultimate destination. If we had a really sick patient who couldn't tolerate a stop in Cairo, we would go all the way on to Germany, which was a ten-hour flight. It was really hard on the patient and hard on the crew. But sometimes you just have to do it.

It was a United Nations effort. On the flight line in Somalia, you had the different countries camped all the way around the flight line. You had Americans here, Pakistanis there, Egyptians



Susan caring for casualties on an aerovac mission

here, Romanians here, Germans there, and Italians here—every country you could imagine. It turned out really well. If you had some connections, you could go to dinner at a different country every night. We carried a lot of American military, but we also did a lot of humanitarian missions. The Pakistanis got ambushed, and there were fifty patients. We regulated those to go to Pakistan, so we actually sent one of our aircrafts into Pakistan. It was the first time in I don't know how long. We did not have good relations with Pakistan back then. We sent fifty of their soldiers back with our medical crew taking care of them. That was really cool. We never took any Somalis out. They pretty much stayed in country. I don't remember any of them going out.

There were nurses on the ground as part of the humanitarian mission. The army was there as the ground unit. They initially were at the flight line as well. They got bombed a couple of times, so they decided it wasn't a good place for the hospital to be. They moved into town, which didn't seem much better either, because then they

were right in the thick of things. So we would have to convoy initially to go up to the hospital to see patients or to do whatever we needed to do preflight because there are things you've got to tell patients or make sure they have before they get on your airplane. Initially we would just get in convoys and go up to the hospital, but pretty soon that became too dangerous because people were getting either sniped or bombed or whatever. So the army had the helicopters there, Blackhawks, and we would just ride the Blackhawk to the hospital. That was really cool because you don't get to fly in a Blackhawk helicopter all that much. That was a lot of fun. Pretty soon that too became very dangerous.

Did I feel like I was threatened? You know it's funny because people ask that, especially when you get back. They always want to know how close you were to being shot at or something like that. For me, I must always have a false sense of security or I just know that I'm being protected and watched over and that whatever happens is going to happen no matter what. I know I have to

be careful, but when I was deployed and doing my job, thank goodness for me that was always way back in my mind. I'm not so concerned with safety or things like that.

We did have a couple of instances. We had gone in a convoy to the hospital and there were several of us in the convoy and we were done with whatever we had to do. It was me, one other flight nurse, and the SP. We were in a Humvee and we were done with our task, so we just thought we would go ahead and drive back. The convoy was still doing their stuff, so they stayed. Well, I won't mention names. The marine that was our SP escort asked if we wanted to take a different way home, because we would always take the same path back and forth. So we said, "Sure!"

We went through a district called K-4. The day after we went through there, we were banned from going through that area because it was so dangerous. We were going down this street and there was a car accident in front of us, so that blocked all the traffic. I don't know how it happened, but all of a sudden there were two or three hundred Somalis coming out into the street. Whenever we drove in a convoy, we always carried a stick because people reach into your vehicle and try to steal things. As they were reaching in you'd swat them, and that was basically your protection. We all had to carry guns. That was the first time nurses had ever had to carry guns. You always had your weapon strapped to your chest.

On this particular day, the accident, Somalis surrounding us, the marine was in the front seat of the Humvee and the other flight nurse and I were in the back seat. As this swarm of people started to approach our vehicle—and it wasn't just our vehicle, there were several vehicles—thank goodness there was a UN vehicle behind us with a turret gun. The other flight nurse and I ended up back to back in the vehicle facing our respective window with our sticks because these people were just converging on our vehicle and

they were grabbing at anything that wasn't tied down, especially our sunglasses. So we're beating people out of the vehicle. They popped the back of the vehicle and start scrambling in and stealing. It's like you're just beating people right and left. This whole time I kept thinking, "Please don't let me have to pull this gun off my chest and start using it." Then next thing I hear is the nurse who's got her back to me and she says, "That guy over there has a knife." I kind of looked around and this guy lifted up his shirt to show that he's got this huge machete stuck down his pants. He was just showing us to let us know that he had a weapon.

The next thing I hear is the marine, our driver, with his M-16 locking up. I was like, "Oh my goodness, please please just let us get through here." My first thought was, "I wish I had a little piece of paper to write a note to my mom and tell her that I loved her so I could stick it down my shirt, and hopefully somebody would find it." Then I realized, "That's so stupid, my mom knows I love her and I don't need to write a note to tell her." But it's one of those crazy thoughts that passes through your mind when you don't know what's going to happen next. Anyway, the traffic finally cleared. What seemed like an eternity was probably only about ten minutes. So we get back to the base and I had that incredible adrenaline surge and thought, "We made it. That was the weirdest experience, and I'm so glad we're here. I will never do it again." But I'm so glad I had that experience because it was so incredible.

Another time one of the army pilots and I had gotten to be friends. He was going through a hard time at home with his wife and everything. He just needed someone he could talk to. We had concertina wire all around the camp, and we were told never to go outside of that. Well, there was this fuel truck with a bench beside it. It was parked just right outside the concertina wire because, of course, you can't maneuver the truck inside of it, so we just walked right outside the

concertina wire. We were just sitting on the bench chatting. All of a sudden we heard gunfire and we could see the tracer bullets going right over our camp and right over the fuel truck. So we're like, "Oh, crap." Here it is. It's dark outside. We can't run into camp because camp doesn't know what's going on and all they hear is the gunfire, so if they see people running, they're probably going to shoot us. So we just kind of stayed there waiting to see what was going to happen because there were reports that the Somalis were trying to come over the wall of the camp. So we we're just sitting there and didn't hear anything after that.

We probably waited half an hour and still nothing, so we thought we needed to do something because we didn't know what was going on inside camp either, and they were probably looking for us because they must be doing head counts. It was probably about forty-five minutes after the incident. We kind of nice and slowly walked into camp talking so they could hear our voices and know that we were coming. They had blackout conditions in the camp, so we made our way to our individual tents. I got into my cot, and the person next to me said, "Susan, is that you?" And I said, "Yeah, what happened?" She said that evidently some Somalis tried to come over the fence, and the Egyptian guard went crazy and was just shooting randomly all over the place. She said, "I knew where you were, I knew who you were with, so when they came in to do the head count and called your name, I just said 'Here.'" So I thanked her.

Everything turned out fine, but it's times like that that you don't know what's going on. You don't know how threatened you really are. I guess the different countries took turns posting guards on the wall, and he must have seen people coming up. I don't know if he was shooting directly at them or firing warning shots or had too much to drink. Who knows?

I think if you thought about these kinds of experiences and knew that they were going to happen, it would be something that you wouldn't

want to go into or do. My mom always used to say that I was looking for adventure, and maybe that's it. But I don't focus on the danger of the experience. I think I always have to ask, "Why am I doing this?" Well, I'm doing this for a reason. "Am I willing to do whatever it takes?" Well, yeah, because I've already made that commitment and taken that oath, and that's what's asked of me. Like I say, if you knew it beforehand, you probably wouldn't do it, but you don't know the individual experience that might be the one or the one that comes close. Sure, if we had known that we were going to have our vehicle surrounded and that we would have to beat people out of it, we wouldn't have gone that way, but you never know.

When I was young, I always used to think I would die at an early age. Don't ask me why. But that early age I thought was more close to my twenties, and here I am at forty-three years old and I'm thinking I haven't had that feeling or thought for a long time. I guess I'm not destined to die at a young age. I had another experience after my mom died. She died in 1997. I had this feeling after she died like, "My mission on earth is complete. I have eased my mother out of this world and have helped to take care of her until she could die. Now I feel like my mission is done." Then I realized I still had my own mission to complete. I guess I just have this innate sense that I'm protected and taken care of and that my Father in Heaven is with me and that whatever is going to happen is going to happen because of the experience that I need to have or the growth I need. I don't think everyone experiences that, because I've had friends in the past who seemed to be afraid of everyday life. Part of me, when I sit and listen to them, has a really hard time. "What's the matter with you? That's not right." And maybe it's the way they were brought up or they didn't have that religious background. To live in fear everyday—that's got to be hard.

Absolutely, I think being in the air force is part of what I'm supposed to be. I became a

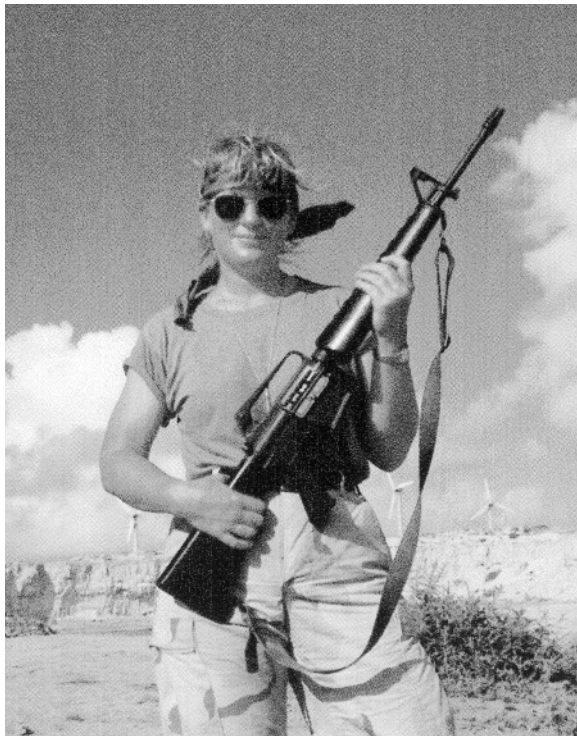
nurse by accident. My very first job when I was sixteen was in a nursing home, and my job was to wash the wheelchairs, pass ice water, and feed patients. I considered myself an assistant to a nursing assistant. Then I graduated to be a nursing assistant. After high school I was working at this convalescent hospital full time, there was a group of people who were going to go down to the city college and take the entrance exams for the LPN program. I thought, "Hey, I'll go with you," so we went. There were probably six or seven of us that went down. I was the only one that passed. I had to ask myself if I was doing this because everyone else was doing it or because I really want to become a nurse. So I thought, "Well, I'm not doing anything right now." So I went to the LVN program and of course that led to the RN program, which just continued on.

I guess for so long I had been working and going to school, doing both at the same time. When I graduated from my RN program, I found myself just working for the first time. Then that's

when I got interested in the law, so I went to law school, and I was working and going to school again. When I got finished with that, boom, all of a sudden I was just working again. I was working at the law firm, and call it boredom or whatever, I guess I just don't know how to not be busy. It was then that I was looking through my nursing magazines and saw the ad. I went through the interview and said, "Hey, this sounds great."

Now that I'm not working and going to school all the time, I'm working and doing the reserves. I've got at least those two things going still. When I joined the military, I think I just became a different person. It caused whatever was in me to sprout and grow because I was forced into different situations (like leadership positions), and I hated that. Initially I hated being put in a leadership position. Once I did it several times and started to become comfortable with it, I realized I kind of liked it because now I could set the tone. I could not do things my way, but I could make sure things ran smoothly and got done efficiently. I think that's the part of the leadership position that I liked, so I knew I was destined for the military. If I had known it was going to be like this, I would have joined years ago, and I would have been able to retire by now.

I graduated from nursing school in 1983, and I didn't join the air force until 1988. I was married at that time. I got divorced and then joined the air force. When I was married, we had some friends, and the wife was in the navy. They had been to the Philippines and lived in all these places. She was active duty. I thought, "Oh, I wouldn't like being told where I had to live and having to move to someplace that I might not like." I knew that active duty wasn't really for me, so I thought, "Hey, the reserves, that's great because I can live where I want and work where I want. I don't have to be at Balboa. I don't have to be in a tent with the army. I can go on a plane and fly and I can stay in hotels." I chose the air force over the other services because of what I could do with them.



Susan with the marines in Somalia, 1993

I think that until we have certain experiences in life, we don't know what we're capable of doing. It's the same no matter what you do. If you're challenged, you're going to rise to the opportunity. It's like our callings at Church. My first calling was a Primary instructor, and I thought, "Holy cow!" Number one, I don't do kids. I'm forty-three and I don't have children. I'm not exposed to children. I don't know how to deal with children all the time. Sure I have fun with them and laugh and joke, but to know how to control them and to make them listen and discipline, I don't know how to do that, so it was really hard for me. But I learned how through trial and error. My next calling was camp director. Well now I had the teenage girls. Oh my goodness, teenagers! They're harder than the kids. I had a lot to learn. I remember the stake leader said, "If you're ever in doubt, just keep loving them. No matter what they do, just keep loving them." So that was a real growing experience because you want to say, "No, you need to be over here and not over there!" Then again, going right into the military and being in charge of your crew and being responsible, that's something that they really can't teach you. They can teach you the principles, but then it's up to you to figure out how to apply them through trial and error. You don't always do it right, but at least the job gets done.

I remember my mom asking me, when I first became a nurse, "Susan, how do you do it? How do you deal with all the stuff you deal with during the day and then come home and be like a normal person?" And I said, "One day as I walked in the hospital and came through the front door, it was like a feeling. I could feel that I became another person." I must have put up that protective wall or whatever it is that you do in order to deal with the patient who has cancer or the child who is dying or the family member who is going through all the grief or whatever it is you do during the day. I think we all have our own protective mechanisms that we put up.

I was inactive for a very long period of time, about fifteen years, from my early twenties to my mid thirties. During that time of my inactivity, my coping mechanism was going out and partying with my girlfriends. We'd get drunk almost every night. I look back now and I see that that was a coping mechanism for nursing and for the stress of the day and for the crazy things I had to do or see, especially during deployments and wartime. You get done with your flight, and the first place everybody goes to is the bar. Then in my thirties, when I started going back to church and stopped the drinking and other things, I realized, "Uh oh, what am I going to use for my coping now?" Then it became chocolate for a while. Then it was exercise for a while. Sometimes it's a book. My escape during the war was a book—to be able to totally focus on one thing and be in another world. That was just an escape. So home life as opposed to professional life during the various years of my life have been a little different. I just did what I had to do. I now know that I need to concentrate on being a social person because as I've gotten older, I've realized that I'm involved in fewer social activities. When I was younger, we were out all the time socializing. Now that I'm older, I prefer to stay home, and it's just nice to have the peace and quiet.

I would do it all over again. If there was another war, I would volunteer for that one too. It's kind of funny because we knew that the war was coming up, we didn't know when, and they were asking for volunteer lists because we have a squadron of 150 people. In an air evac squadron, they usually don't deploy your whole squadron. They usually take bits and pieces and make their own squadron with a bunch of different people. So when we knew that the war was coming up, boy I was like, "Are you sure I'm on the volunteer list? I want to see it." Then when we got the call, it was like, "Uh-oh. This is really going to happen now." But I knew that because I have over fifteen years in that this might be my last chance for a war and my last chance to do what I've been

trained to do. Maybe you get psyched up your whole career because this is what you're trained to do and then finally you're able to do it. There are several people in our squadron like me.

Then there are several people like, "Hey you know what, I joined to go to school and to get benefits, and I've got a family now." I totally understand that. I can't even imagine being a regular reservist and having children and being gone one weekend a month, let alone being deployed away from your home when you have kids. So I'm so thankful that my life worked out to where I've been single and I can just float around and go wherever I'm asked to go. But I remember thinking, "This might be my last chance for war, so I'll go."

Each deployment is different. For Desert Storm, I was in England. It was a party time. We never saw a patient. We never got on an airplane, never flew. Operation Restore Hope was half party, half scary. When we were in Cairo, we were in five-star hotels and were catered to. It was just wonderful. Then when we were in Somalia, we were in a tent in the middle of a desert, but still that was great. Then with this war, it was totally different because there was no fun-and-games time. There was none of that party time or that let down and relax time. In that seven months, I would venture to say I had five days off. On those five days, if you were in England, you went down into London, and that was your day off. Once we were in Sicily and we went to Mount Etna. Two more times I had days off in Germany, and that was pretty much it. Your other days were spent getting ready for the mission, doing the mission, or recovering from the mission. Then you started up that whole cycle again. I don't think of myself as being an adventurer. I think of myself as having a pretty mundane life that every once in a while has these blips on the screen of excitement. I would do it again. Maybe that's a personal thing, but I would do it again in a heartbeat.

When we got back, they were asking for volunteers who wanted to stay on active duty and probably go out again soon, and I said no to that. I was dead when I got back—mentally, physically, psychologically, spiritually, and emotionally. I felt like my sense of joy had been taken away, and it was so hard to integrate back into normal life, back into my family, friends, and home life. I don't remember it being that hard before with other deployments or coming home from my mission or other stretches of time of being gone, so right when I came back I said I was never going anywhere again. But I've recovered and am back to normal life, and, oh yeah, I would go back again.

In comparison to other times, when I was deployed for Desert Storm, we were only gone for three months, so that wasn't a big issue. We didn't see anything there. We heard about it on the news, but CNN was as close to the war as we got. In Somalia, it was such a great time that that's why it was hard to come home, because I didn't want to come home. It was an intense experience and I loved it. It's kind of like you leave the stress of your normal life and take on the stress of different life, but this stress is different. It's easier to take initially because it's a different stress. Then this time, I didn't really have any preconceived ideas of what it was going to be like because I just had no clue. I knew it was going to be totally different. When we got there, we were separated into crews, so I knew who I was going to be flying with. I had a great crew, people who I flew with all the time at home. Well I do one mission and then they split the crews up. My second crew was a crew that was at each other constantly—fighting, bickering, and having power struggles. It was horrible. I flew with them for a month on other deployments. I never ever remembered feeling like, "I can't wait to go home." But that's the way I felt during that time.

We were on one-year orders with an opportunity to extend for a year, so we didn't know when we were going to go home. I thought,



Susan in a casualty receiving area, 2003

"This is going to last forever and it's going to kill me." Thank goodness at the end of that month the crew I was with was in a special group and they got to go. That was hard too, seeing other people go home, especially after this difficult time I had been through with this crew. Plus, the guy who I had been dating sent me a "dear John," and it was right at the height of the war. All of these things were hitting me during this one period of time. The next crew, which was my last crew, I spent the most time with, probably two and a half or almost three months with them. They were a great crew, so then I thought, "Maybe I can make it now."

This whole time I kept thinking, "I can't wait to go home," and I had never felt like that on deployments before. Then I get home and it was like, "I can't wait to go back," because life is so hard now. It's hard to get back into a schedule

and routine. I don't know what normal life is like. I don't have a job—well, I'm still on active duty. I had three weeks off. I was commuting back and forth from Riverside to the base. We get home, we have three weeks off. That was the hardest three weeks of my life. I had people living in my home who were moving out since I was moving back in. I wanted my house back. Then finally I got to live in my house. I woke up every morning and wondered, "What do I do?" There are so many things to do and you're overwhelmed, so you don't do anything. Then I found out that I had to start going back up to the base. It was such a relief and it felt so good to be around people who I had been deployed with, people who had been through the same thing that I had and understood the stressors. And they were all going through the same thing too. It was so good to get back to our family, our military family. It's weird now to be uncomfortable with your own family and to be very comfortable with your military family. That was my life. With my own family now, I have more of a level of comfort. When I first got back, I stayed with my brother for a week because people were still in my house. I didn't feel comfortable there because it wasn't my home. People always want to know how it was and what I did, and if they don't ask, you wonder why they're not. You're uncomfortable sometimes when they do. And now there are some who say, "I didn't know what to ask or what to say, so I just didn't."

You had such a structured life being on active duty for so long, and then all of a sudden there's no structure whatsoever. You felt overwhelmed, so you just didn't do anything because it was easier than having to tackle all these things. I guess for me, I felt like I needed to give myself permission to take a break. I've been through all this; it's okay to just sit on the couch and do nothing. My favorite thing was just flipping through the channels not watching anything because while I was deployed, we didn't have TV that we could understand. In Italy it was all in

Italian. In Germany we did have some TV, but nothing was familiar. So once I got home, it was like, "I have ninety-six channels that I can flip through." I wouldn't concentrate on any of them; I just wanted to see what they were.

The three weeks were hard, but I did feel like I needed them physically, especially because your sleep cycle is weird. It takes time just to get your sleep cycle back on track. When you're deployed, you slept, but you were always one step ahead of yourself. Alert days were hard because you were always in a state of "What's going to happen today?" You just never knew. It got to the point after a while where you just got so used to it that it wasn't a big deal any more.

When I got back, I did not want to share anything. Part of you feels like it's a very personal experience and if somebody hasn't been there, they can't understand it. When they do ask you specifically or they invite you to talk about it, you tend to be very superficial. You tell them pretty much what they already know—what they've seen on the news. Every once in a while you'll interject something like, "The seventy patients . . ." or something like that. But you never talk about how scared you were when you flew into the desert because of the intelligence briefing you got beforehand about how you might get shot and where the RPGs are located and what they're aiming at and the chemical possibilities and how you're having to strap on all your chem gear when you land in the desert. All this kind of stuff.

The first several weeks when we flew in, we were getting these intelligence briefings, and that was enough to scare the crap out of us. So that was hard. You don't talk a lot about that stuff. When we got back, unfortunately, it wasn't until about three or four months after we got back that our squadron had a debriefer. We didn't get debriefed until everybody was pretty much getting over it. We had already talked amongst ourselves. We went through about a month where everybody in our squadron didn't really say any-

thing until one person said, "Are you having any difficulties now that we're back?" And I said, "Yeah!" Then we asked a couple of other people, and it turns out that everybody is having some sense of difficulty. Maybe not the same but in some facet of their life they're having some difficulty. We all talked about it, and then all of a sudden we're getting a debriefer.

I still keep in touch with the people in my squadron that were deployed at the same time. I see them every month. That's very nice because we all have a bond. The other people, we have bonds with them too, but it's a little different, not as strong. There are a couple of other people from different squadrons that I ended up flying with that I still keep in touch with. That's really neat to see what they're going through now. I got an e-mail from one of the guys I flew with the longest, and he talked about some of the difficulties he'd been through, so I wrote him back. He wrote me back and said, "I don't know if you knew this, but every time something happened or something came up that was difficult on the mission, I always kind of turned to you for validation or to make sure it was okay or what I did was right." I thought that was so sweet. I never realized that. But it's nice to hear stuff like that, especially with him, because I looked at him as being the guy in charge. He was the strong man, but he never showed his fear. The sign of a good leader is not showing how scared you really are.

I had been e-mailing the guy who sent me a "dear John." We only started dating two or three months before I left, but we were talking to each other every day and going out every other night before I left. We were pretty close. I had been gone about two months, and looking back I can tell that his e-mails had slipped off a little bit. Then I remember the day that I got the e-mail. We were able to go check our e-mails at either the library or tent or wherever the computers were set up. Like I say, it was that time when I was on that really hard crew, and when I got the e-mail, it was something I couldn't share with anybody.

I didn't feel close enough with anybody on my crew that I could share that, so I kept it inside. The other nurse who was very difficult was my roommate at the time. After I got the e-mail, I just remember I was walking home in the dark and went in between two buildings where I knew no one would see me, and I just leaned up against the wall and slid down to ground and was just bawling. I had to let it out and that was the only way I could then. That was really hard.

Through the Church, I had really great support. I had been the Relief Society president before I left, so the ward knew me. That was really nice. I would get a lot of e-mails. Every week the Achievement Day girls would get together and spend the last five minutes of their meeting writing to me. Their leader would then send all their cards to me. That was really special. Every week I would get a packet.

I have two big brothers; neither one has been in the military. My dad was actually in the navy for four years during Korea. They didn't call them this back then, but he was a SEAL. He did underwater demolition and all that good stuff. UDT is what they called them then. It's funny because once I joined the military, he started opening up and telling me a couple of stories. Then when I would go on deployments, especially after Somalia because I would write back all the time, he would open up a lot more. Especially now, after this one, I got back in August. My dad was a fireman, and he got emphysema really bad because he was a smoker, plus all the smoke from the fires, so he just moved in with me in November. He lives with me now, and we have more opportunity to talk. It's nice to talk about things with my dad, especially about things that he's kept in for so many years.

He worries a lot, especially now. When he was living in Georgia, he didn't know when I would go off on the weekends or whatever, but now that he's living with me, he knows. This weekend I'm going to be gone on a three-day

mission, and he worries now because our planes are old and they're falling apart. He would never tell me how much he worried, but when I got home I could tell by some of the things he said that he was definitely worried. But he didn't want to let on to that, because he wanted to support me. He didn't want me to worry about him worrying.

He was very supportive and wrote me a lot. Most of the time when I received his letters, it was great. He had a very difficult living situation back home. That is one of the reasons he lives with me now, because life back there got so dangerous. So when he would write me about how he almost ended up in the hospital or how he did go to the hospital because he couldn't breathe. I was like, "There's no one taking care of him!" But thank goodness the Church was there and they were looking after him, so I knew that for the most part someone was looking out after him. But it was hard getting the bad news because, being the daughter, I'm the caretaker of the family. When something happens, that's my job. Being that far away, you have to just trust the rest of your family. I would write my brothers and tell them they need to call Dad once a week without fail. For the most part, it's good to hear from home.

After a while, it's like, "I hope no one else writes me, because I don't feel like writing back." I felt obligated to write back if someone wrote to me, but that got so hard. To a certain extent, I wanted to forget about life back home. When I first left—and maybe this was one of the reasons I got a dear John—I did not call my boyfriend. I would e-mail him, but I did not call him. I needed to make a break with home, and that's the way I did it, by not calling home. I e-mailed everybody, but I didn't maintain telephone contact. So you do need to break it off to a certain extent. I didn't want to know if my cat had to go to the vet. I didn't want to know if my plumbing broke. But I'd still hear about all this stuff and it got to be hard, so I would tell my brother to just take care of things.

We have rotations right now. There's one going out in March. There are enough volunteers for that. There's another one going out in June sometime. I haven't heard if they have enough volunteers for that or not. Now normally I would say that I would go in June, but right now, now that my dad just moved in with me, I'm kind of in a different living situation with different responsibilities, so I have to think more about what I need to do versus what I would like to do. Right when I first started back here in my job, I wanted to go back because it was hard being integrated back into work again. But now I'm getting used to that.

On our airplane, we had three flight nurses and four medical technicians on every flight. Occasionally, but it got to be almost every flight, we would have a CCAT (Critical Care Air Transport) team. That consisted of a doctor, a critical care nurse, and a respiratory therapist. They would take no more than three patients. They could take three critical patients, but no more than that. We would give them our three worst patients, and we would do the rest. That was usually the ventilator and the cardiac monitor guy and somebody else who required suctioning or stuff that required hands-on every so often.

The form has a patient's name, their diagnosis, doctor's orders, and a place for nurse's charting. Half of the time it's old because they've been in the system for at least twenty-four to forty-eight hours. Sometimes you'd have patients puking their guts out because they're airsick, but you have no orders for Compazine or Phenergan or anything. Those were the times that we were thankful for the CCAT doc to write an order. We do have a couple of standing orders. Sometimes the doctors would be good about writing standing orders, or PRNs, but if they did not, in our regulations we have certain drugs that we can give as one-time doses. Nothing push or nothing IM, it's all PO. If they're vomiting, they're not going to be able to keep POs down. You just do what you can and hope you don't run out of barf bags.

I got to the point where I would carry around Dramamine everywhere because I never get airsick, but on these missions, probably because of the length of your day, once that fatigue hits, you're susceptible to everything. I remember two missions specifically where there was something wrong with the autopilot and we were just listing from side to side the whole time and everyone was throwing up. We were pushing Phenergan like crazy. The crew members would go in the corners and throw up in the barf bags and then go about their duties, then go and throw up again. We had no pharmacy support. For the really sick patients, we'd get either a bag or a box with all their medicines. You made sure during training missions that you had the right supplies requested. But during the war you hoped you had what you needed and you just made do.

I would say during the height of the war, we did a lot of putting out fires, because you came upon situations that you hadn't encountered before that you can't anticipate, so we were reacting. As we learned the kinds of things that were happening, and we knew that we were still going to be facing a lot of this stuff, we learned to be more prepared and to be able to act. After every mission, our entire crew would get together and debrief. We would actually have to do a written debrief for our commander about the problems we encountered and the solutions we implemented and the things we wanted to have change. We would give as many suggestions as possible.

We got along well with the other services. We worked a lot with the army. The navy, I don't think we had a whole lot of interaction with them other than as patients. They mostly got flown out on a helicopter and put on the boat because the boat was right off the land there. We had lots of patients from the marines, especially eighteen- or nineteen-year-old kids. That was hard. There were kids who now had no arms, legs, or eyes. I remember one kid who was sitting next to me.

He came on the plane and took off his helmet, and he was looking at the inside. I glanced over to see that he had a picture of his little baby girl with his wife. That was enough to break my heart. He turned to me and said, "I just missed her first birthday."

That was hard because all of a sudden they became human. They became real. They weren't just patients. They weren't just the belly wound or the burn. They were people and they had families and they were just like us. You try to always have a smile on your face. You always greet them. You always talk to them. They had been eating MREs for months and months. So what we as a crew used to do is take up a collection and we would all donate between five and ten dollars. This particular mission, we would do it once a week. We would take the money and go to the commissary and buy hot dogs, cookies, and french fries. We had these little ovens on the plane, so we could cook the food. These guys must have thought they had died and gone to heaven, because they had not had real food in so long. It was the coolest thing. We had a fireman on our crew for most of my flights, and somebody sent him this huge American flag that we hung inside the aircraft. When the patients saw this, they knew they were going to get some food. You always had to think of their morale because we knew that they had been through the worst of it. It wasn't us. We still got to stay in a bed and shower and go eat at restaurants. We had those things, but they didn't.

In the beginning when they came on the plane, you could tell they had been through something because of their affect and the look on their face. You could smile and do whatever, but they wouldn't respond as much. Some would but some wouldn't. Then they all seemed to be in a phase where they were much happier and much less stressed. Then I remember when we started doing the mission straight into Iraq. What would happen was we would pick up the patients in Kuwait, they had a 130 unit, a smaller plane, and they would go to Baghdad and Tikrit and Kirkuk and

bring them down to Kuwait, and that's where we would pick them up. We started doing missions directly into Iraq and into Baghdad and bringing them straight to Germany. This was probably after the major fighting had gone on and I was ground support in Germany, so we recovered this plane that had just come in from Baghdad. These people had the flat affect and no energy, and they were quiet. It was weird to see that again. You knew that they had been through some stuff. It's hard because you can't talk on the plane. You can't hear. You have ear plugs in because the plane is so noisy, and you have to yell even at a close distance. Sometimes you could carry on conversations on the rare occasion that you had a lull in what you were doing because you had an eight-hour flight. The techs were able to chat more because they had fewer duties than the nurses. I would see the techs going up and down the aisle talking to people. Most of the time, the patients just slept. They were exhausted.

Who knows now at this point when I'll go. I'm kind of waiting for my dad to stabilize with his emphysema. If it was just selfish me, I would go with the next wave. It's a responsibility issue now. I have two brothers, but guys just don't see things the same way. Maybe guy nurses are different, but my brothers—we'll be all in the same room and none of them would see how my dad was suffering with his breathing. My brothers are more unifocal, whereas women can be doing something and know what's going on other places.

The Association of Military Surgeons of the United States has a conference every November, and I was fortunate enough to be one of the presenters this past November. There were around five thousand people there. At the time I presented, there were probably only two hundred because it was one of the breakout sessions. But one of the speakers talked about how he had just gotten back from Iraq and how misleading the news is. All we see is how all these Americans are being shot and killed and how we're spending all the money and how the Iraqis are still shooting at

us and hating us. He said, "When we go to Iraq, when they see an American, they run up and hug us and thank us, and they are so grateful to us. They now have clean water, they now have food to eat, and they now have medical systems. They now have an infrastructure." He's talking about how all these people are so grateful for the things that they have now and the change that has happened. I think now's the time when they need to have the reporters embedded in these units so they can see what's really going on and the good that we're doing instead of getting the negative aspect from the news. So every opportunity I get, I tell people about that.

STEVEN MCCOLLEY

I started off with a bachelor's degree in respiratory therapy, but I wanted to become a nurse anesthetist. I needed a degree in nursing and a license to do this, so I decided to attend the nursing program at Weber State University. In 1984, after two years of schooling, I graduated with my associate's degree in nursing. Afterwards, I began my anesthesia training program in Kansas City at the Truman Medical Center School of Nurse Anesthesia. When I went there, I was automatically enrolled in the University of Missouri Kansas City School of Biology for a master's degree. At the same time that I was receiving my anesthesia training, I was also going to graduate school at nights to work on my master's degree in biology. In 1987, after thirty months in my program, I was finally finished with my education.

After graduation I worked for a bit. In June 1990, I became a part of the Army Reserves, not to be mistaken for the Army National Guard. The difference between the two is that the Army National Guard is under the control of the governor, whereas the Army Reserves is under the control of the president.

There was no obligation for me to enter the military, but I've always felt at some point that I wanted to enter. My father was a marine. He



Steven McColley

joined the Marine Corps Reserves in 1950 and was immediately called up to go to Korea. My brother was active duty military in the army for about twelve years, but he never saw any combat. In June 1990, he gave up his command of the 24th Mechanized Infantry of Stewart, Georgia. Unfortunately, just a few months later in August, his unit was called up after Saddam Hussein's invasion. I think he was quite upset with the fact that he had given up his command to someone else right before his unit got tagged. After ten years of infantry, I think he would have wanted to be there. There were people he knew who were going, yet he wasn't going with them. I was relieved that he wasn't going, but then a few months later I got tagged and called up with the 328th General Hospital in West Germany during Operation Desert Storm.

In February 1990, I was working at the Ogden Regional Medical Center (St. Benedict's Hospital) in Ogden, Utah. Later that November, I received my first call. At that time I was single, so it wasn't a big deal for me to leave. My parents were even living in Germany then. They were

serving a mission for The Church of Jesus Christ of Latter-day Saints in Frankfurt, Germany. I had just been visiting them in October when I told them it was a possibility for me to come back to Germany. It was ironic that three days before my parents were to leave their mission to come home, I landed at the Frankfurt International Airport. I was able to meet with my parents and speak to them for half an hour before I was rushed off to Rhein-Main Air Force Base. I was then sent off from Frankfurt to Nuremberg, where the Nazi trials were. I got to Nuremberg in December 1990.

I didn't know many people in my unit because I first started with the NAAD, the National Army Medical Department's Augmentation Detachment. The NAAD is essentially a float pool where we were assigned to a unit but didn't have to drill with that unit if we were more than a certain number of miles away from our home unit. Physicians, nurse anesthetists, and such were assigned to one unit but drilled somewhere else with a different unit. At the time I was actually drilling up in Ogden, so I was close enough to meet with them for my drills. But at the same time, the headquarters were up in Salt Lake City, which was a ways away from where I was actually living.

I only drilled with the unit in Ogden twice before I got tagged. I hadn't even put on my uniform yet, nor did I know where things went. It is a requirement for everyone in a unit to go through officer basic course before being shipped out, but when my unit got called up, not everyone had fulfilled this requirement. There were twenty-six of us who had to go to a two-week course in San Antonio, Texas, to complete our training. When we came home, we were immediately shipped to Germany after completing our in-processing at Fort Carson, Colorado. The rest of our unit had already flown to Germany by the time the twenty-six of us were ready.

My unit and I were at the 98th General Hospital in Nuremberg. We were set up for four operating rooms so we could run twenty-four hours a day. We did all kinds of surgeries there, espe-

cially orthopedic and amputations. Before the ground war there were many football, volleyball, and jeep injuries. But soon after the war started, it became bullet, tank, or shrapnel wounds that brought patients to us.

Our patients were mostly casualties from combat rather than friendly fire. The ground war ended abruptly one hundred hours after it began. Many casualties were brought to us then. Most of those casualties came from the Gulf and were actually treated in places like Saudi or Kuwait before being flown to us on a C-130 or C-141. We were getting around fifty patients a day for about a week and a half, so we saw approximately three hundred to three hundred and fifty patients total. This was certainly fewer than we had anticipated.

For the most part we tried our best to keep from being shot by terrorists, so our involvement with the community was limited. I tried to blend in and not let the Germans know that I was an American. I even bought some German clothes for when I went outside, and my hair was longer than the usual military standard.

I guess you can say I was quite familiar with the language and country of Germany. I took German in junior high, high school, and college, so I was able to speak the language well enough to get by. My brother and parents also spoke German after serving their missions for the Church there. I went to Germany a couple of times during my high school years and afterward. It was helpful to know the language and culture, especially when going out to eat. I always had to help my friends with the menu and the customs. In Nuremberg, if customers left a 15 percent tip, the Germans would go crazy on them because the tip is included in the meal. The people in Nuremberg didn't speak English, so I usually did all the ordering and paying.

The Germans weren't too friendly. When we first got to Germany, we rode the subways and street cars everywhere. One time there was a transit worker who was giving us trouble, so I took everyone's money and gave it to the man

and told him I needed twenty-four passes to start the same day. We had a little conversation, and I insisted that I needed all twenty-four passes. For those transit workers, their job is one of the greatest in the world. They just sit there and don't do anything. If someone wanted a rail pass, they would take a whole hour just to get one pass done.

So when I came in there with a request for twenty-four passes all at once, the guy wasn't too happy. I could see the disgruntled look on his face as he had to stamp out all those cards. Once I got the passes, I went back out and distributed them to everybody and told them how to get new ones when they needed to get them replaced. Word spread quickly throughout the unit that I could speak German, and I was happy to help others out.

The war ended sometime in March, but we still took care of many patients until there weren't many to deal with. Once our patient load reduced, the army saw that they didn't need the medical reserves or any other reserve units, so they packed us up and shipped us back to the States. We left Germany, and I came back to North Ogden, Utah.

Serving overseas was kind of like serving a mission for the Church. I had served my mission in Toronto, Canada, before joining the reserves. Once again, I was in a small area where there weren't many Latter-day Saints, so I appreciated the opportunities I had to spend time with other Saints. We Latter-day Saint soldiers didn't receive any Church callings. Our main and usually only responsibility was just to go to church on Sundays. We had to stay in the hospital if we were on call, but otherwise, we always went to church on Sundays.

There was an English-speaking branch in Germany that met right after the German branch. While they had sacrament meeting, we would have our priesthood meeting. We walked to the chapel since it wasn't too far away. The members who attended the English-speaking branch were mostly military people or people connected with

military. The leadership of the branch was military people too. We were only in that location for a short time, so I don't really remember what the structure was like. I couldn't even tell you who the bishop was or anything else. I just know where the elders quorum met and where the chapel was located. I don't really remember going to Sunday School while I was there. We usually just had priesthood class and sacrament meeting.

During my time in Germany, I didn't see any other cities, because we had tight limitations. Our commander drew a very small circle around Nuremberg on a map and said we couldn't go outside that circle. He didn't want people to be absent in the event of mass casualties; otherwise there would have been big problems. This was a huge possibility because we were expecting many casualties, but overall we got far fewer casualties than we thought we would get.

Anytime people go to war, they get the chance to have many experiences and be with different people. It's a nice thing because it provides opportunities for strengthening testimonies. If Latter-day Saints become complacent in their Church activity and do nothing but the regular grind every day, they may have a greater tendency to slip a little bit. But when someone gets to experience different opportunities, it helps to strengthen them because they're in a new environment with new challenges. I'm not a person who is tempted by coffee, cigarettes, or any of that kind of stuff, so being away from home where no one would have seen me was not a big challenge for me.

After I came back from Germany, I continued to drill with the 328th unit over the next seven years. Around 1997 or 1998, I received a letter in the mail saying I'd been transferred from the 328th unit to the 934th Forward Surgical Team. I didn't know what a forward surgical team was, but I knew what the word *forward* meant. I didn't want anything to do with it. It was a brand-new team and a brand-new concept that the army was putting together. The team had a rocky start

because they started with only two nurse anesthetists. I was the fourth nurse anesthetist by the time they brought me on. We had two local guys, two NAAD people, and one unit administrator. The unit administrator was not a friendly person, but he was still the full-time administrator for the unit. He felt that he already had the two people he needed with the two local guys. Later that unit became short-staffed when two of the CRNAs left. At that time the unit was supposed to do their first two-week assignment, where they actually put the hospital together. Since they were short-staffed, the unit administrator was just begging me to come. From then on, things were friendlier each time I went to drill with them.

I chose not to drill often with that unit since I had that option, but I did do my summer camps with them. We did one at Fort Polk at the Joint Readiness Training Center (JRTC) in Fort Polk, Louisiana. Training at that site was supposed to be the closest to combat we would ever get. It was, for those of us who didn't know anything, but we already knew how to put together a hospital and take it down.

Essentially there were twenty people in my unit, including two nurse anesthetists and four surgeons. Three of those surgeons were general surgeons, and the other was an orthopedic surgeon. We also had an emergency room nurse, a recovery nurse, an executive officer, a commander, three scrub technicians, and medics. Everybody and everything fit in our six Humvees with trailers. We would take all of our equipment, ammunition, generators, gas, food, water, and other supplies into the Humvees and trailers, and then we would be off. All together we were an FST unit, which was a forward surgical team, also called a "fast team."

This past December there was a change in command. The new commander was a nurse anesthetist, and he called a friend of his and invited him to join the unit. This meant we now had three nurse anesthetists. Two of them were full-time and drilled with the unit, and I was the

NAAD person. When the unit got called up in February, the new commander was slotted to go, and he slotted his nurse anesthetist friend to go as well. While the commander was fulfilling command obligations and trying to get our unit ready, the rest of us met together for one week in February. The commander's friend had only drilled with the unit once and was just getting back into the military after being out of it for a while, so he was scrambling to get his paperwork in order so he could get privileges and go with us. This meant that there was no one taking care of the anesthesia supplies and business, so I was called and asked to go and help out.

I ended up packing everything that was going to be available to the unit. I talked to a real transplant surgeon from LDS Hospital in Salt Lake City, Utah. He had been in Afghanistan with a forward surgical team, so I kind of pumped him for information on what things I should pack. I asked for information from anyone who had ever been deployed.

For some reason, I always felt there was a good chance that we would be going somewhere soon. I felt it could be to Afghanistan, Bosnia, or Kosovo, because those were places that were still rotating people. Iraq was not on my mind at that time, but when people were suddenly being sent to Iraq, I felt there was a good chance that we would be going there as well.

Before departing, I put all the equipment and supplies together for our hospital. I found out that neither of our anesthesia machines were working and needed to be replaced. The whole fast team centers around the operating room. If there were no anesthesia machines that worked, then nothing would have worked at all. When I called the people in the army, they didn't argue with me about replacing major equipment like the anesthesia machines, because they knew the fast team was dead without them. The machines weren't replaced until we went to Fort Lewis, Washington. Interestingly enough, the two anesthesia machines came from Hill Air Force Base in Ogden, where we had just come from. We could have just driven

up the street and gotten them, but the army usually gave us the roundabout way with things.

My unit was at Fort Lewis a few weeks for our in-processing. We were supposed to have only been slotted for twenty people, but there were twenty-eight people in the 934th Surgical Team unit. One enlisted woman was pregnant, so she wasn't going to go. Then there were two others who had just barely joined the unit, and their slots were taken up by someone else, like me. So there were about eight of us who weren't able to go, but we still went in during that time to help out as much as we could getting the unit ready to go.

They spent a week in Salt Lake City, Utah, before going to Fort Lewis for their in-processing. After they left, I came back to Utah to work at the VA Hospital. In the meantime, while the unit was up in Fort Lewis, I was calling up the NAAD to see if anyone needed a nurse anesthetist to go over to Iraq. To my surprise, they just weren't short of nurse anesthetists. Nobody could find a slot for me. I said it was okay, but I let it be known that I was a free entity and could be taken.

The unit then went to Ryder Trauma Training Center in Miami, Florida. The Ryder Trucking Company donated money to build that hospital. The army has a contract with them, so they rotate these forward surgical teams down there so they can work with trauma and improve their skills. When the unit got to Florida, they found out that neither of the nurse anesthetists were prepared for the job that lay ahead. One nurse anesthetist worked in an outpatient surgical center for more than twenty years doing only office surgeries. The other nurse anesthetist had been working for eight years, but he had been in a small community and hadn't had any experience with trauma. Since these two nurse anesthetists weren't used to being around trauma cases, they didn't feel comfortable.

The unit knew I had experience in hospitals doing emergency and trauma work, so they wanted me to join them. They felt more comfort-

able having someone who was up to date on trauma surgeries than having only those two other nurse anesthetists. So on March 6, when the unit was coming back, my orders came in to Salt Lake City, and I received twenty-four hours' notice. My unit wanted to go to war, so we essentially volunteered to go. We were the only reserve forward surgical team in the theater during the war.

I had gotten married in 1994. I had three sons and one little daughter. My second oldest son and baby daughter had just celebrated their birthdays in January and February when I got tagged. My other two children's birthdays were in April and May, but I was in Iraq for both of those. My wife had no previous military experience. Her father had served twenty years in the navy, but he was out of the navy by the time he married her mother. My wife did pretty well in my absence. We also had a really good ward that geared up for this kind of stuff. Once I knew I had only a few hours to leave, I called my bishop to inform him and ask him to watch out for my family. He and the whole ward geared up to help. They were the kind of people who live to serve and help others.

I could have passed on the opportunity to go to Iraq, but I wanted to make it known that I was volunteering. My wife was not happy with this. I felt I was going to go either way. There was no doubt in my mind that I would have been going somewhere sometime. It was easier for me to make the decision to go then rather than wait and get called during a bad time. I didn't want to be on a family vacation and get a twenty-four-hour notice and have to cancel everything. There was one guy who was on his honeymoon when he got called and had to come back early. I didn't want that sort of thing to happen to me and my family. I wanted the word out that I was ready so I could go soon, have my obligation taken care of, and have some control over my enlistment.

Our unit flew over to Kuwait in March, and then we went a couple of days across the berm border and into Iraq. We crossed as a unit with

our six Humvees and trailers. There was a convoy that was going north to the same place that we needed to go, so we went along with them. March was the beginning of spring. The sun would be down by 5:30 p.m., so we'd put on our night vision goggles. I usually rode on the back of the Humvee. Sometimes we'd stop along the way at a couple of places to get gas from U.S. military supply lines.

Early one morning around 1:30, someone realized that we were completely lost. So about 2:00 a.m., we turned around and went back to the refueling point, where we felt we were safe. We threw out our cots near the Humvees and slept right there. We woke up at 6:00 that morning and hooked up with the convoy again. Less than a week before, the 507th Main Force Company had gotten lost in essentially the same place and had gotten shot at, resulting in nine deaths. That was a little unnerving.

The same thing happened again the next night, but this time we got lost further north. We were traveling with an MP group that was supposed to be leading us. They got us lost, so we had to turn around. As we were turning around, we got separated, and a Humvee right behind me hit a dune and flipped its trailer over. We didn't want to stop too long, so we got out and unhooked the trailer from the Humvee, then took off without the trailer. We went back to another refueling point at 2:00 a.m. We woke up at 6:00 a.m. and went back to get the trailer. When we got to the trailer, it was empty. There was nothing on it; even the tires were gone. If we had stayed there during the night, we surely would have been attacked.

We continued to travel up north until we hit a place called Camp Spartan. As soon as we got there, we were told, "Hurry up, get going, and put your hospital together! We've got casualties coming within half an hour!" Casualties were coming as we were still setting up the hospital. It took about an hour and a half to two hours to get the hospital set up, put together, and ready to go. The hospital was made out of a general-purpose

tent with no heating or air-conditioning. We had four beds in the intensive care unit. We also had monitors and ventilators. In fact, the first patient I worked on ended up on a ventilator, and we did surgery on her again the next morning. Our hospital seemed to be full most of the time. We would do surgery at night because that's when we usually received casualties. Between surgeries, we would walk out the back of the tent and watch the 3rd Infantry Division bomb the Karbala Gap. We would sit and watch the rockets before going back in for more surgeries. Then we would come back out and watch more rockets.

Instead of just packing supplies for U.S. military men, which was what we expected to get for casualties, I followed the advice of others and also packed supplies for women and children. Sure enough, the first two patients we had were women. They were local civilians who had been hit and brought to us. During our time at Camp Spartan, we operated on a lot of prisoners of war. There was even a prisoner of war camp right next to us. People would bring us civilians who had been shot, we'd work on them, and then they would go to the prisoner's camp for interrogation and be released if they were not a threat.

My unit decided early on that we would help anyone who came to our doors. The army told us that we would have to take care of them as if they were Americans. We all thought, "You don't have to tell us that, we're reservists. We're essentially private practitioners over here. We don't turn people away!" It was primarily our motto, "Whatever you have done unto the least of these, you have done unto me." We heard that other units had told their staff that they were not going to take kids or civilians because they were active duty. Not all units were like us. We worked on anyone that came through the door, many of whom were children of various ages. One time we had a set of brothers younger than nine years old. Another time, we had a fourteen-year-old come in with thirty wounds all up and down his back and legs. We also had a lot of women and some of our own guys as patients.

As soon as we were done working on patients in one place, we'd move on to another place. Once during our travels with the convoy, my unit ended up between the 3rd ID and an enemy tank battalion, so instead of being behind the lines, we were actually in front of the lines!

The next place we set up was Camp Dogwood. We actually found a building there where we were able to do surgeries. From Camp Dogwood we drove north to Baghdad. At one point during this time, we saw and heard AK-47s shooting at us. The Humvee right behind me got shot at and picked up a bullet hole. No one got hurt, but we knew that we were being shot at. We got through and continued north to Balad, where we stayed for a few weeks doing more surgeries. While we were there, our base was attacked. We were just a few hundred yards from the firefight, up on top of a cement airplane hanger with our weapons loaded and drawn. If the enemy had gotten through the first line of defense, we would have been the next in line. The next day was Saddam Hussein's birthday, and we felt that we would be attacked again. Because we had such a huge perimeter around us, volunteers were needed to help cover it. I volunteered with some other officers to go and guard part of the perimeter in case of another attack.

An interesting thing happened while at Camp Dogwood. One of my old buddies, a CRNA (nurse anesthetist) got called up to join us. We then had twenty-one members in the unit. Usually I would trade off cases with the commander, but I ended up with the most cases since the commander was very busy. After my old buddy Mitch came, he and I traded cases. Sometimes we would do anywhere from five to eight cases per day, depending on how busy the 3rd ID was. The 3rd ID were the guys who did pretty much all the fighting. Since we were right with them the whole time, everyone in our unit was awarded the Combat Medical Badge for our work with the 3rd ID. After staying in Balad for a while, we went on to Tikrit, Saddam's home town. By the time we got to Tikrit, the war had ended.

We called it "jumping" whenever we would move from one area to another. While we were jumping from Balad to Tikrit, Secretary of Defense Donald Rumsfeld was scheduled to speak at the Baghdad International Airport. I was chosen from my unit to go and represent the 30th Medical Brigade. I flew in a Chinook from Balad down to Baghdad and back, which was about a forty-five-minute to one-hour flight. The next day, after listening to Secretary Rumsfeld's talk, I flew back in a Blackhawk. The crew that I was with treated me very well. I was given MREs to eat and a place to sleep. I was supposed to have flown to Tikrit, but there was a full-bird colonel that had "hijacked" the bird. The crew was going to leave me in Balad, but I opted to stay with the crew since I hated Balad. We ended up flying to Mosul while we dropped off the colonel and his crew. Eventually they dropped me back off at Tikrit, where I had to find my unit, but they had actually dropped me off at the wrong place! Just as they started taking off, the chief warrant officer, who was also a pilot, said, "Man, you're in the wrong place!" He grabbed my stuff and I grabbed my weapons, and we started running after the helicopter. The helicopter came down and I got back in; then we flew to the right place.

Although the war had ended by the time we got to Tikrit, we stayed there to work on patients. We set up our operating room on an army post's airbase north of Tikrit. For five weeks we were going in and out of that place. We had to drive from the airbase to Tikrit and back, and from the airbase to Balad and back. Each time we did so, we had to be armed and told what to avoid. One day we had to go downtown to Saddam's palace where the engineers were and take some water with us. Our hospital in Tikrit was so bad that the army kept over-flying us. The hospital building had no windows, so dirt would get in and cover everything. We only did one case during our whole five week stay because casualties were taken to other places. While we were there, we would help out the 566th Area Support Medical Company (ASMC) that we

were assigned with. They would call us up if they had a trauma that they couldn't handle. We would get in there, move their people off to the side, and then take over their emergency room during the trauma. After we took care of and stabilized the patient, we would turn the care back over to the company.

By this time, we had worked on more than one hundred patients and had done about fifty or sixty surgeries. The only time we ever came close to having someone die was when we worked at Camp Dogwood on a fourteen-year-old civilian boy who came to us after being operated on somewhere else. When we received him, he had a hematocrit of less than ten and had already crashed before crashing again hemodynamically. I was called over to put an endotracheal tube in him while the others were trying to stop his profuse bleeding. They ended up having to amputate his leg to keep him from dying. In the meantime, his blood pressure had crashed.

Our commander announced that anyone with type O blood needed to help out. Our blood refrigerator had broken earlier because it was so old, so we kept all of the stored blood up the street with the med log. I sat three volunteers down and stuck each of them with an intravenous line (IV). The IV was a 14- or 16-gauge that had a little tubing with a three-way stopcock on the end of it. I taped it down to each volunteer, drew blood out of each arm, turned off the stop cock, then turned and infused their blood right into the patient. I was able to administer a total of 750 cc of blood from those three volunteers. After forty-five minutes of requesting the blood from our blood refrigerator, it finally came. I stopped drawing blood from those guys and started administering the blood from our blood bank. As soon as I started pumping all that blood into the kid, he regained hemodynamic stability and survived.

The next day the captain in charge of the blood bank hassled me about why I gave whole blood without having done a type and cross test. Let me tell you, he just took on the wrong person.

I ate him alive. We all knew about Jamie Smith, who died in Mogadishu in 1993. The unit couldn't ship him out fast enough, so they just gave him fluids until he eventually bled to death. There was also Jason Cunningham, who died from a gunshot wound in Afghanistan almost two years ago. The unit couldn't evacuate him fast enough, so they gave him IV fluids until he bled to death as well. We knew this fourteen-year-old boy was going through the same thing. We were pouring fluids into him, but he kept bleeding. My unit and I decided we were not going to let another incident happen again, so we drew blood. The decision was immediately made. We didn't want to watch this kid die in front of us when we had blood that could save him. It was the policy to use a walking blood bank, so I didn't care that this captain didn't like the fact that I didn't type and cross, especially when it was O-positive blood. I knew the kid could take it. And I only took blood from people who were O-positive. The kid had no reaction to the blood, and within two to three weeks, he went home. His leg was amputated, but he went home.

We were running in between having things like that and being shot at in Balad and Baghdad. We tried our best to survive on MREs. Heat often bothered us throughout the day. If we worked on patients early in the morning, they would be freezing to death because we had no way to keep them warm. But when we did surgeries later in the day, everyone had a temperature of 102 degrees. It was hot, and there were flies landing everywhere and dust blowing around. We tried to clean up as best as we could, but we could only do so much when there was a sandstorm going on and dust flying everywhere. I don't know if any infections resulted from this because we didn't keep patients around for very long. My unit had to be able to quickly take apart the hospital and move, so our patients didn't stay long. We usually kept a patient for only a couple of days before we shipped them out to a place like Kuwait. If the patient was an Iraqi, we shipped him to southern Iraq. Most of our patients went

on a Blackhawk to the Navy's USS *Comfort* ship, which was anchored in the Gulf.

Since my unit went wherever the 3rd ID went, we spent a lot of time sitting around and waiting. If we saw an MEK, (a kitchen on wheels that dished out hot foods) we knew we would be jumping soon. We came to this conclusion because oftentimes the MEK would be around one day for one meal, and then we'd get the word to jump the next day. Afterwards, we would be back to eating cold MREs. It was as if the MEK was there to kind of boost our spirits before a jump.

Our unit would move to wherever there was a battle, and usually it would end just a couple of hours before we arrived. In fact, there were a couple of times that the other unit pulled a Bradley tank right in front of our convoy. If a battle was still going on in front of us, we would have to wait for it to end. When we got to an area, there was no guarantee that it was enemy free. It just meant that our army had cleared out active opposition, but there was still the possibility of the enemy being there to shoot at us.

Because of the threat of something like that happening, all of us carried weapons and knew how to use them. The army trained us for this. In order to be deployed, we had to qualify on our weapon. To do this, we had to have twenty-three out of forty hits on our targets test. I did thirty-six out of forty using an M-16 when I was at Fort Lewis. I had used a rifle before and shot blanks from an M-16, but I had never had an M-16 with live rounds. My time in Fort Lewis was really the first time I had ever been in a target range with an M-16. During our testing, I had to get in and set my site and adjustments. It was winter then, so it was raining and freezing everyday. I would shake so bad, it's amazing that I was able to even hold my weapon at all. When my group and I went to our first testing, we ended up quitting because it was unbearably cold. Later I got smart and went to a clothing store to pick up some neoprene underwear and gloves. I was nice and toasty the next time I went to the qualifying range.

All of us Latter-day Saints who wore garments had special brown garments because we used desert camouflage uniforms (DCUs). The Church issued these garments to people with military identification. Most of the time it was so hot that I wouldn't wear a shirt, just my garment top. In our unit, a lot of us would write our blood type on our garment or undershirt tops, helmet, and the back of our boots. When I came back to the States and visited Hill Air Force Base, one of the officers thought it was quite unique of me to have my blood type on my boots. He came up to me and asked, "Is that your blood type on the back of your boots?" "Oh, yes it is," I replied. He just said, "Oh," and turned around and walked away after realizing where I had been. The air force guys didn't get around combat too much, so they found this type of labeling unusual. However, most people who were in combat did the same, so it wasn't unusual for me or my unit.

We were in the Gulf for a total of three months, and during that time we held church every Sunday. There were many of us who were made group leaders before we were deployed. We were set up as group leaders so we would be able to hold sacrament meetings. My stake president interviewed me and set me apart, like many other guys, so a lot of us had these cards that said we were ordained and set apart as group leaders to hold sacrament meetings. Most of the time we had sacrament meeting and a Sunday School lesson. We tried our best to also have priesthood lessons. The military even issued us our scriptures.

When we were in Camp Dogwood, just outside of Babylon, we held church on top of a building right next to an enemy prisoner of war (EPW) camp. The first time we had church there we sang the hymn "Ye Elders of Israel." It was funny because we would be singing Church hymns right next to the EPW camp. I'm pretty sure the EPWs just heard a bunch of men singing, but they didn't know we were holding our own church services. In our sacrament meetings, we would have talks as well as the sacrament.

Whoever was the group leader was also in charge of assigning talks.

We didn't have trouble keeping track of the days since we all had calendars and watches, but we still had very little information and news coming in to us. The *Stars and Stripes* magazines were always three to four weeks old by the time we got them. We never got any Church magazines or any mail from home because we were moving so much. About a week before I went back home, I finally received a package my wife had mailed two months earlier. Luckily someone had a satellite phone, so we would have three to four minutes once a week to call home.

When I was in Camp Dogwood, there were three kids that had been hurt by a hand grenade. One of them ended up with a very badly damaged arm. When I called home on my buddy's satellite phone and spoke to my wife, I learned that our five-year-old son had fallen and broken his arm and needed to have surgery. It was ironic that I was taking care of those little kids at Camp Dogwood when I knew that my own son was going through surgery. It was a pretty tough time, but it was nice to call and say hi on my children's birthdays and on Mother's Day. Calls usually lasted only a few minutes on that phone because I did have to reimburse my buddy who owned the phone. Beforehand, we were told not to bring any phones, because the army didn't want us communicating with others. They told us never to tell anyone about our location. This sometimes bothered my wife, but she didn't need to know where I was for her own well-being. I didn't want her to turn on the television to see the 3rd ID lined up at the Karbala Gap, being shot at and injured, and know that I was in that dangerous situation. I would usually tell her every time that I was safe and out of harm's way, when in fact I was right at the front line. I didn't want her to know any of that until later.

When I got home, I told her all about our close calls, how we got shot at, and how we were just one mile away from an enemy tank battalion.

I told her about the time there was a firefight just outside our hospital and how I stood at the guard tower and watched the tracer bullets. I also told her about the time I was driving a Humvee and had to force a man off the side of the road. The rule was that we weren't to let people get between us and the convoy. The lieutenant in the back of the Humvee drew a bead on this civilian, who was in a taxi cab. The civilian decided that he was going to come over, so I had to bump him and take him out of our way. He had to know that he couldn't get in there. If he had gotten in and shot a weapon or done anything weird, the lieutenant would have taken him out. Most stunning for me was the fact that I had my weapon loaded and the safety off. There were several times that I had taken a bead, and if it had been necessary, I would have squeezed the trigger and killed someone. It bothered me to know that, but luckily it didn't happen.

There were many times that we didn't know what would happen, so we had to be ready to go because people were being shot all the time. Even though we were noncombatants, the enemy didn't know that, nor did they care. People asked me what to do if they saw someone with a weapon. I told them to take a bead on them. Then somebody else said, "Yeah, but they have a right to have a weapon too." But I said, "They don't have the right to have a weapon if it's pointing at me. If they pull out a weapon, you take a bead on them. And if they look like they're even remotely going to turn that weapon on you, you put 'em down. If you can't do that, then you get behind me and I'll do it." Then I told the guys, "This is the way it works; you have to do it." There were a couple guys who had trouble with this, but most guys were ready to do what they had to do.

All in all, I had some spiritually enlightening experiences having church in places like Iraq, Babylon, the place where Abraham lived, and near the location of the Tower of Babel. Those were nice experiences. When we held church services, people from all over would attend.

Some guys would travel for miles because they couldn't have a meeting on their own since none of them were set apart to be group leaders. Some of them were the only Latter-day Saints in their unit, and not everyone knew about the position of a group leader. I remember a Major Wells from Missouri who was on active duty. He was sent to Iraq from Fort Hood, Texas. Every Sunday he would pray to meet up with other Latter-day Saints. Then suddenly, out of the sky fell the 934th Forward Surgical Team from Salt Lake City. He found out we were having church and came running. During the next week, some military intelligence guys from another unit also came. Then the next week, another man from a combat support hospital heard about us and came. Our group would grow and grow, but then we would have to jump and try to find another place to have church. If people knew about it, they would come. Like I said before, we had church pretty much every Sunday. We even had a sunrise Easter service at Camp Dogwood.

The last two places that I served were Balad and Tikrit, two extremely dangerous places. Despite the risks, I somehow felt protected, and I don't know why. We had many close calls. We could have been picked off easily during the time we were shot at with AK-47s. There was also the time with the tank battalion. If they had come over that little ridge, they would have seen us and taken us out in a heartbeat. During the big fire-fight in Balad, we sent guys out who actually had to discharge their weapons. Then there were the nights when I had to be part of the first line of defense as a guard on duty to protect the perimeter. I even saw many tracer rounds going off that were directed towards us. Officers do not do guard duty, but we did it out of self-preservation.

Balad was a very bad place, but for some reason I felt very protected. We didn't have anybody get injured. Just before the whole unit flew out, one guy playing volleyball tore a whole bunch of tendons in his leg. Then an officer had a sudden flare-up of carpal tunnel syndrome. We

had a whole bunch of weird little medical things like that, but nobody in my unit got shot at or was seriously injured. In fact, we only had one guy leave early because he had some family issues to deal with back at home. He had a son with some medical problems that kept worsening. When his baby was only three months old, the little guy had already been through three surgeries. After everything was done and when we were at the point where we weren't doing anything else, the commander laid down the law and told this guy, "You have to go home, your wife needs you. We want you to stay. We love to have you here and realize this is your only shot at combat, but you have to go home." He reluctantly went home to help his wife and take care of his baby. When he was sent home, we were back to twenty in the unit.

While I was in Balad, I broke my right wrist. I was coming down a rope when I fell and landed on my right side. We didn't have an x-ray machine, so I didn't know I had a broken wrist. I went around the next couple days as usual until my wrist hurt so bad that I had to do my push-ups on my knuckles. When we got to Tikrit where there was an x-ray machine, I found out that my wrist was indeed fractured. I had to put on a cast that drove me nuts. The unit knew if we had problems, I wouldn't be able to work with the cast on, so I had them bivalve out the cast so I could use it as a splint. I told them that if we got into problems, I could easily take it off and work. I had already done cases with the broken wrist for a month, so I knew I could take off the cast in a heartbeat and still work efficiently. Luckily we didn't have to deal with it that much, but I still had to carry my weapon around with a broken wrist, which was a bit difficult.

We were able to bring home souvenirs but only what was allowed. Nobody in our unit tried to sneak anything back. If the army said we couldn't use it or take it, we dumped it. At first they told us we could take certain things like gas masks, but later they told us we couldn't take

them. We grabbed all the gas masks we had and dumped them in the amnesty barrel. We knew we couldn't take any of the weapons, but none of us wanted to take those anyway.

My experiences during my years of service did have an impact on my testimony. During those times, I wasn't in a huge group of Latter-day Saints. Even though we were in a war during our time in Germany, it was still a little different from Iraq. We were told to watch out for terrorists because there had been a bombing earlier in Berlin that killed some servicemen. It was far more dangerous in Iraq than in Germany, but for some reason I felt protected. It was as if there was something good going on for me. The days spent in Tikrit were long, so when we weren't operating and we had nothing to do, a couple of us would whip our scriptures out and have scripture study. One of the two CRNAs was a high priest, and the other was a first counselor in the bishopric. Since there were three of us CRNAs, we spent a lot of time studying the scriptures and discussing questions we had about different doctrines. But it had to be something we could look up or find in the references. Each time we went to church in Tikrit, we thought it would be our last. But five Sundays later, we were still there.

We went back to Balad after being in Tikrit, and I hated it there. We would have church in a tent on a Sunday afternoon. It had to be at least 130 degrees in that tent because it was 118 degrees in the shade and 125 degrees outside. We had no air conditioning inside of the tent. I remember leaning forward and watching the sweat drip off my head about every second. Fortunately, by this time we had big bottles of water that we were able to take everywhere with us. No one wanted to sit in church and get dehydrated. There would also be weapons lying all over the floor, so church was different because everyone had a weapon and a big bottle of water at their side.

We did have trays for the sacrament. If we were a group leader, we could buy trays beforehand. Sometimes we ran out of water cups, but

we would just bring up our caps from our water bottles and fill those. We didn't have any regular bread, but we used pound cake from the MREs or other kinds of bread stuff. The regular bread was so horrible that it was much more satisfying to eat the pound cake. Plus the regular bread usually ran out by the end of the week.

When we came back to the United States, I had to stay at Fort Lewis to do rehab on my broken wrist. I ended up spending a total of six months away from my family on active duty, and my being gone did impact my family. My wife had to learn how to do a lot of things that she didn't like doing. She had to do things on her own and rely on other people, which she didn't like doing, even though they were members of our ward.

During the Gulf War, we were told that the army needed to rotate nurse anesthetists, dentists, physicians, and others more often because many guys would either lose their practice or get killed. They said people in those positions would serve ninety days and then rotate. Our surgeons assumed this to be true, which meant they would be called up in February and released by May. This turned out to be false. We had a general who came to us and said, "Let me let you in on a secret. We're at war. This ninety days policy does not apply during war." There were some guys who were pretty miffed by this, but I wasn't. I just figured my orders said that I would serve at least 365 days, and I accepted that. In the end, two surgeons were able to leave by the end of May, but the rest of us didn't leave till June.

I got home on a Saturday morning. It was interesting that when I came home, both my son and I had broken arms. My ward was supposed to have a Primary activity that day, but they found out I was coming home and changed the Primary activity into a parade for me. They lined the streets to my house. As I pulled into my driveway and got out of the car, everyone from the ward was congregated at my house to welcome me. I gave a little talk, and then we all sang "God Bless America." It was nice to finally be home.

It is now my fourteenth year with the military, and I plan to continue with them. I have at least one more chance for deployment, so hopefully my children will be much older the next time around. It's easier when the kids are older than when they are young.

My experiences were really spiritual because I was forced to make sure my prayers were more fervent. Most of my prayers were not for my protection but for the protection of my family. My biggest concern while I was away was my family. I was more concerned that something was going to happen to my family than to me.

DEANNA NIELSEN

I joined the military in 1975 as an enlisted person. I received my commission to be an officer when I graduated from nursing school in 1976. In 1977 I became an officer. I was an enlisted person in another unit, but I had been with the 328th General Hospital after I transferred over as an officer. I was in the 328th when they called us to Desert Storm.

We had our drill in November 1990, and there was a lot of talk going around because the 144th had been activated. They got activated the first part of November. This was an exercise for us in getting our paper work in order, and I was a little concerned because this was highly unusual. Unit administration was saying, "Oh, we are just doing this in case we have to send our group out." We all figured that with the 144th being gone, there was no way they were going to take another medical unit because that would pull all the medical people out of the local hospitals. Lo and behold, that wasn't the case. We got called up on December 3. They said, "You are activated. We will be sending you to Fort Carson to prepare you to go to Europe." It was fortunate that we were going to Germany and not Saudi Arabia. I felt blessed in that fact because I love Europe and Germany. My ancestry goes back to Germany and Sweden.



Deanna Nielsen

It was a very stressful week. I had four children ranging in ages from eleven down to three. I was more concerned about having Christmas ready for them because my husband Jay isn't much of a shopper. I don't know what it was, but this was the first year I had all of my shopping totally done. I had no clue we were going to be activated. I was glad that I had gotten all my Christmas shopping done.

We were going to have a family portrait that year, and I was making the girls all the same dresses. I knew that it was probably the last year that Natalie would wear the same dress her younger sisters were wearing. I really wanted to have a picture like that. So I was in the middle of that and I received the news. Of course, I was crying. I couldn't think of being separated from my children and my husband. It's not that I didn't want to go and serve my country, but a lot of emotions were raging through me. I was questioning our purpose in going over there a little bit because of all of the political things that were going on. I was concerned that people were going to give their lives for something that was not sensible. That week was probably the shortest week of my life. I had to get everything done and prepared for Jay before my departure. I've got to say

that I couldn't have received better support. My ward came to my rescue. My good friend came over that Sunday, and she said, "Deanna, what can I do to help?" I was crying and I said, "I don't know. We are suppose to have our family picture taken this Thursday and I don't have these dresses done and I've got to get all this other stuff done." She said, "Give me the material and the patterns," and I said, "There is no way you can make these dresses." She said, "I'll take them. I can handle them." I said, "Okay." So I gave it to her. She called up a day later. She said, "Deanna, I'm in a bind. I don't know where you got the thread for this." I know this sounds silly, but it was really important to me at the time. I said, "I will go get the thread and bring it to you." I got in the car, raced down and got the thread, and ran it back to her house. Her daughter opened the door and said for me to come in. I went into this huge kitchen and here were all these people working on these dresses to have them done before I left. It just really touched me. It made me so happy. We got everything done and we had our picture taken.

The week flew by. We had to go up to Fort Douglas for grouping. Governor Bangerter spoke at that time. He said, "We will take care of the families. We will make sure that everything is provided for your families. We will make sure there aren't any problems here. We give you our full support from the state of Utah."

We left on December 9, which was a Sunday. It was a very cold day. It was bitterly cold. I was serving in the Primary presidency, and that day the children sang my favorite song, gave me some roses, and wished me well. The bishop came over and said, "I don't like to do this, but I have to release you from your position because we don't know how long you will be gone." I felt like during that week an end was coming to every part of my life. The hospital closed me out. I had to turn in everything. So that door was shut. The next door came when they released me from my position. I just felt like all these doors were being shut behind me.

That Sunday we had all the family over who were living in Utah. My sister was out of state at the time. They came for a little Christmas celebration. I had started putting up some Christmas things. We always starting putting up things the weekend after Thanksgiving. Jay said, "You better not put up the expensive things, because I am afraid they will get broken." We put up the tree and a few decorations. It was a good thing, because when I came home and saw how he had just tossed all of the decorations into a box without putting them in their individual boxes, I was amazed nothing got broken. But when I realized how many things he had to deal with while I was gone, I forgave him. So we had our little Christmas dinner and farewell. My mother was having a very difficult time with all of this. She always worries about her kids, and it was very hard to see her. I felt very good, very calm inside even with all the stress of the previous week. I had prayed earnestly that I could get through this and not have it affect my kids. I went into the garage, and Jay put my bags in the car. All my kids stood at the door and waved good-bye, and that was the last thing I saw. Jay took me up to Fort Douglas. All the buses were lined up. You chose a bus that had an empty seat and you got on it. They gave us a few last-minute instructions, and we left as a group. There were six hundred-plus members in our unit. Because of the large size of our unit, we were going to be placed in different cities in Germany and in Vicenza, Italy. Some went to Belgium and then the rest of us to Germany.

In Fort Carson, Colorado, we had to go through all these stations to make sure all of our finances and medical care and legal affairs were taken care of. The hardest thing about Fort Carson was that it wasn't a fun place to be. They put us in barracks without any window coverings. We had to use brown paper as drapery. It was like a condemned area, but not quite. They weren't that bad, but they weren't clean. We had to use our cots to sleep on. I refused to unwrap my

sleeping bag because I knew I wouldn't be able to get it rolled back up. So I slept in my thermals, robe, and my ski warm-ups. I threw on my army jacket on top to cover me. It was a mess.

The hardest thing about Fort Carson was that they were coming to our unit wanting people to go with the 144th. The 144th had left before us. The reason I knew the 144th was there was because when we went to the movie, I heard these people calling "Deanna." I turned and I said, "Oh my gosh," and I ran and we hugged each other. My one friend who worked on the same floor as I did was on the 144th. We chatted and we all went to dinner.

The 144th was short on some people with certain skills and they wanted to take some of our people. The way they went about it was not in the kindest manner. It was a great sacrifice for someone to go with the 144th to Saudi. Our active duty chief nurse gathered all of us together and said, "We need to have a couple of volunteers go over to the other unit. They are short and they need to fill their ranks. If no one volunteers, we will just draw names out of a hat, so we are hoping that someone will volunteer." In our unit we had satellite units who met in Idaho, St. George, Provo, and some other outlying areas. We didn't often see these people. Grace Jacobson and Beth Taylor volunteered. We were so happy. I said to these women, "Thank you so much for doing this." They said, "That's okay. We don't mind." They had to relocate across the base from where we were. They asked one of the commanding officers of the 144th how they were supposed to get their duffle bags over to the new barracks. He said, "Well, that is your problem, but you need to be over here by such and such a time." She started crying when she was telling me that. It was like, "What have I gotten myself into?" The rest of us decided we wanted to get out of there before they start plucking more people. I was really upset with what had happened.

Luckily the rest of the week passed quickly, and we were on our way to Germany. I was with

people I knew. We arrived in Germany early in the morning, and we were all tired. We were waiting in a big room at the terminal. Finally, the chief nurse called me and told me that I would be going to Landstuhl. I had put down the name of a friend and Nuremburg as the place I wanted to go, and I got neither. It was late at night, and we got on buses to go to our duty station. I was glad it was dark because as we went along, we could see homes with Christmas lights on them. I started to cry. Tears were streaming down my face. I didn't want to be gone for Christmas, although I had dreamt of being in Germany for Christmas sometime in my life.

We arrived in Landstuhl. We were tired and dragging. All we wanted was a place to lay down. We got to stay in the air force barracks. These were a lot nicer than the army could provide. I was given the option of a private room because of my rank. At that very moment I knew it wasn't a good idea to be alone, so I said I wanted to be with someone. I roomed with this one gal that I knew and we just collapsed. The next day we met with the nursing personnel at the Regional Army Medical Center in Landstuhl, Germany. There is also a Regional Army Medical Center in England. We met with the nursing personnel, who told us how wonderful it was to have us there, because so many of their active duty people had left for the front. I have a shirt that shows how many units supported that area, and that shirt really means a lot to me. We were given our assignments according to our rank, and I was assigned to the neurosurgery unit.

The hospital was made up of wings, with half the wing for inpatient and half for outpatient. Now, because they had to anticipate casualties, they were turning that hospital into a thousand-bed hospital. They were having to remodel, with new wiring and everything, and the Germans were coming in to do that work. I met with my head nurse, and she told me there wasn't much going on right now. We were to come in and go over the paperwork and learn the routine, but

there wasn't much to do. We arrived there on the 18th, and the holidays were coming up, which meant that the hospital would be virtually closed.

They were planning to have their Christmas party for the children, and I got involved in planning that. It was hard because I wasn't in the mood, but it was good to be involved in this activity. We prepared little bags of goodies for the children to receive from Santa Claus. It was actually a pediatrician there at the hospital who was organizing this activity, and she was just wonderful. Everybody had a good time. We had entertainment and we made snowflakes to put on the stage and decorated trees. It was a lot of fun. A little girl at the party resembled my youngest so much that I just watched her for the longest time.

The Sunday before Christmas I went to church. I was sitting there with my two friends Mike Gorzitze and Lynn Birrell. At the end of the meeting, they asked everyone to stay seated. The bishop got up and said, "We know this is a difficult time for everyone. We ourselves have family members who are serving in Saudi, so we don't have complete families. You have been pulled away from your family. We want to make Christmas the best Christmas we can possibly make, so we have some members here who would like to take some of you in for Christmas. If you don't have a place to go on Christmas, we would like you to raise your hand." This was an American ward held in Keiserslautern. The three of us looked at each other, and I said, "I'm not going. It is bad enough being away from my family, but I don't think I can take it being with somebody else celebrating Christmas." We didn't raise our hands. They approached us, wanting to know if we had a place to go, and we just said, "No, but that's just fine." We decided we would just do our own thing. I was walking out and this woman came up to me and said, "I noticed that you didn't raise your hand. Do you have someplace to go?" I said, "No, but that's okay." She said, "I really want to have you at my house for dinner.

I need to have you come to my house for dinner on Christmas. My husband is in Saudi. I have four children at home and I want you to come."

I told her I was going to be with my two other friends. She told me to bring them along. She said she would pick me up. I told my friends, and they wanted to know what I was getting them into. I told them I wasn't going alone. If I was going, they were going. She picked us up. She lived out in this cute little German town miles away from our base. I just loved the German countryside. I was excited from that respect. This sister and her children knew how to speak German. Well, we got to her house and those kids were so excited to see us. They welcomed us, and they never stopped talking. We played games and we had a nice dinner, and she gave us little gifts. She was very hospitable. I had the time of my life. I forgot about everything for a while and had a lot of fun playing German games. We really had a fun time. At the end of it she said, "Thank you so much for making this a special day." I realized at that time that we fulfilled the needs for each other. It really turned out to be a positive experience.

We became really good friends throughout the rest of my time there. She liked to do *volksmarches* (6 or 10 K walks or runs through the German countryside). People of every age do these *volksmarches*, and at the end you get a patch or a medal. I got something from each place. You walk through the wooded areas and through the towns. You can usually buy some juice along the way. At the end you go into this big room, and they have all the German food. It probably saved my sanity because I love nature. I love the out-of-doors. We would drive to all these places, and some were quite a ways a way. It probably saved her sanity, too.

I was only gone for four months total. We ended up being in the hospital. We did receive casualties, usually freak accidents, things like a shooting in the foot. I don't think they realized there would be so many problems with the

shifting sand. There would be pockets under the sand. There was a deuce and a half (a semi) that was covered over and had the troops in the back. It drove into a hole and flipped the deuce and a half. One of the people that I took care of that had been hurt in the accident was a physician. He was the saddest case. He had a head injury. He couldn't remember anything. He had amnesia. I don't know how he recovered. While we were taking care of him a doctor went in to evaluate him. He came out of there saying, "I can't handle this. This man was with me during medical school. It is just too difficult to see him like this." The patient was in a wheelchair and couldn't remember anything. He could talk, but he couldn't remember anything.

I took care of a lot of nice people. A lot of soldiers would say it was so good to come to this hospital and get rid of the sand and have clean sheets and no bugs. It was like living at the Hilton. A lot of injuries were minor, but the soldiers were so grateful for whatever you did. I didn't have even one disgruntled soldier. We took care of one soldier who was close to a fire that started. He was burned and lost part of his vision. He ended up receiving a purple heart at our hospital.

I was glad I was able to take care of patients instead of just sitting and twiddling my thumbs. There were some people who were deployed who had nothing to do. Even so, I told people it was like being on vacation. I was relieved of all responsibilities at home. It was almost like being single again. I couldn't worry about home because there wasn't anything I could do about it. All I had to care about was me, and I hadn't been in that mode since I got married. We pulled a seven twelve-hour-day tour when the war started. After that first week, we would find time to go over the Ramstein Air Force base and go to the movies and go shopping. I would go shopping in the little towns close by.

The children did well overall. It was a hardship for Natalie because at eleven years old, she had to become the mother figure. She went gro-

cery shopping with Jay. She watched the kids. They reached the point after a few weeks that Natalie said, "I don't want anyone coming over here. I'll watch the kids." Natalie has always been a very responsible person. I know that it was a hardship on her because when the World Trade Center thing happened, we were at lunch with my cousin. My cousin asked if the event was going to impact me. Natalie had this look on her face. I said, "We don't discuss this at our house." Natalie said it was the saddest Christmas, with no spark on Christmas Eve or Christmas Day. Jay said Nathan cried himself to sleep every night. I'm glad he didn't tell me, because I just burst into tears when I heard that. I don't think I could have taken that. Adrienne thought I was in an airplane just flying around the whole time. She had no concept. I talked to her on the phone, but she still didn't understand. Lindsie had her sixth birthday. She was not forgotten. She received five cakes on her birthday. Jay turned forty that year in February. We had planned on going on a cruise. The day that we were called up I was calling to start the reservation process. He didn't get to go on his cruise. My family had a little party complete with black balloons. Jay received a lot of support from my really good friend who I have known since sixth grade. She even gave piano lessons to Natalie.

I can honestly say I received wonderful support from the ward. They wanted to bring meals in every day, but Jay said, "Absolutely not." Jay is not one who feels comfortable with people doing things. He was on the stake men's athletic committee, so he did consent to someone from the Young Women's coming in to stay with the children one night a month and someone from the Relief Society bringing food in on that night.

On the other hand, a captain who was serving with me was upset because his bishop never called to inquire about the status of anything. He never talked to the wife. She had two little kids, and he was very disappointed. I felt really bad that

he was experiencing that. One gal who was not a Latter-day Saint wanted to know how I managed to stay in such good spirits. She said, "You have left your family at home. You have four little children. How come you can be in such a good mood?" I told her that it made a big difference when your family is being taken care of and that my church was providing this support. I had an inner calm come over me when I came over here and I have felt that the entire time." She said I was one lucky person. She only had one little baby at home. She was really struggling.

I can say that overall I had very positive experience over there. It isn't something I would wish on anyone, but I developed an appreciation for so many things, so many aspects of my life. The gospel has taught me what matters most in life. And now it came to light. At the time I was packing my bags, I was very limited in my space. I could only pack a small amount because my uniforms and my gear took up most of the space. I took my scriptures, which I hold dear to my heart, and a few other books that were meaningful for me and had been given to me before I left. I wrote in my journal that I knew I could leave everything behind, my house and all my material things, but if I didn't have my family, which is the number one thing, my life would be nothing.

Having the ward members and the Church in Germany involve me in Church activities really gave me strength. It made me feel a part of something I could identify with. It gave me the strength I needed to increase my faith and my testimony. It helped me to know that the Church wherever you go in the world is there to support and sustain you and that the feelings and faith of the members in Germany were as strong as that of the members of my own ward.

I am so thankful for the tiniest things, the freedoms, having a warm bed and hot water. I got to take a bath at a friend's house, and she told me they only turned the heat on in the rooms they are using. I was shivering by the time I got done with that bath because it was so terri-

bly cold. It was so cold in that room you could almost see your breath. I thought, "This is not fun." I had a chill the rest of the evening. I was so glad to get back to my place where we had a water heater. My head nurse had me come over and spend a weekend with her. She told me I could go in and take a bath, and she kept her whole house warm. She told me to go in and just have the time of my life, and she had this bath stuff, and I did. To think that people who were basically strangers would take you in and provide for you and try and make it a nice situation for you. It was wonderful.

When I came home, it was hard because we had that mind-set of being there for a long time. It was the two hundredth anniversary of the death of Mozart, and they were having this big concert in Salzburg. I said to my friend, "We are here in Germany, let's go." We were getting ready to buy the tickets, and they called the meeting and said, "You are going home." It was just like shifting gears to an abrupt halt. "Home! I can't go home! I'm going to that concert in a week." I guess Governor Bangerter put in a word that he wanted his people home because they were having such a terrible time with the medical personnel shortage. We were pulled out first.

When I got back to the VA, my head nurse acted like I had hardly been gone and that it didn't matter that I was back. But Mike Harwood, the nursing assistant, came up to me and said, "It's so nice to have you back." It made all the difference.

KIM WALKOWSKI

Back in high school, when I was seventeen, the Vietnam War was hot and heavy. And my friends knew that as soon as they got out of high school, they would be eighteen and going over to Nam. So I started thinking, "What can I do? I don't want to go to Sweden. I don't want to go to Canada. I support this country. I don't know if I really support this cause." I thought,

"What could I do as a seventeen-year-old to avoid getting killed? I will join the National Guard."

Across the street from where I was, on Sunny Side Avenue, was the 144th Evacuation Hospital. I was seventeen, and I had a close friend of mine with me who was my magic friend, my magic buddy whom I grew up with. We were both magicians. As we were growing up I told him, "We gotta do something, so let's go try to join the National Guard." On April 1, 1969, April Fool's Day, we went over to the 144th and signed up. They said for us to call them every week until we were actually accepted because their waiting list was so long. It took almost a year to get to the top of that list.

Right after I graduated from high school, I was all of a sudden zipped off to Fort Bliss, Texas. When I got there, they asked me what I wanted to do. I never thought I was going to go into the medical field at all, but I thought that was a safe bet. If I was in the medical field, I was not packing around a gun. I would not be shooting people, and I don't believe in weapons, especially in a war that didn't make sense. So I thought, "If I'm in a medical unit, I'm helping people, I'm fixing people, I'm going to make them better, and I'm going to do something good." Because I was just a little grunt without any rank or seniority, they said, "Okay, we're going to make you a medic and start you at the bottom." And I was okay with that. They taught me how to patch people up, and they still handed me a rifle and taught me how to throw hand grenades.

Then I went on to Fort Sam, Houston. On the day that basic training ended, they started calling out the names of everybody and where they were going. With every name they would say Vietnam. They got down the list, and there were only two of us that came back to Salt Lake City: me and my friend. All the people who we trained with got sent over to Vietnam. I missed that by the hair of my chin.

So then I was back in Salt Lake as a young high school graduate and I thought, "Well, I need to get a little job. What can I do? I have a little medical training." I went up to the University Hospital. They needed orderlies at the time. They had an opening in the operating room and also in the psychiatric ward. My friend grabbed the psychiatric ward, and I thought I'd go to the operating room. I thought it was kind of interesting working in an operating room, and I started thinking also that I didn't want to stay at the bottom of the ladder, so I thought about what I could do. I ended up going to Trade Tech, which is now Salt Lake Community College, and became an operating room technician. While I was doing that, I started thinking of staying in the military and keeping my military career.

I was twenty-seven when I got married, so I waited a long time. By now I was an officer in the military. I hung in there lots of years and finally got to the point where I could almost qualify for retirement. You have to have twenty years to qualify for retirement. All of a sudden, Desert Storm broke out. I was about forty years old when the war broke out. So the next thing I knew I was telling my wife. She saw the writing on the wall and told me, "You need to call it quits. You're a captain in the military." I had done this for twenty-seven years. I had tolerated all the little drills, and I knew all the military games and everything, and I had gone to those different schools. She told me I needed to get out.

But I told her, "I need to hang in there to get this retirement, I'm so close." She said, "Get out!" The next thing I knew, right before Thanksgiving 1990, I got a call that said I was going over to Saudi Arabia. And the army said, "We need to ask you a favor. We know you're a magician. You've performed in a lot of our shows. There's no entertainment in Saudi Arabia. There are no movie theaters. There are no operas. There's not even a TV. The people there say their prayers seven times a day. They're not allowing us to bring in any of the entertainers over there. We're

bringing Bob Hope, Steve Martin, and a couple others, but the Saudis are watching them closely and they'll only let them shake their hands. We want to make a little U.S. host show if you'll entertain the troops over there." And I was thinking, "You're asking me to perform in a war? I'm scared to death because Saddam said this is the mother of all wars." I honestly didn't believe I was coming back. I really thought I was done for. When my wife found out, she was really upset that I didn't get out. She was rather mad and very scared. I think a lot of it was that we had a little daughter who was in kindergarten or first grade, and this was all new to her.

The army said they wanted me to perform for the troops if things worked out. So I agreed to do whatever I could do to help. They boxed up all of my magic props in these crates that they had me take down to the armory. They told me they would send them off on ships, and I thought, "Well how are you going to find me out in the middle of the desert?" And they said, "Well, we'll do our best." So right away I started calling my insurance agent. They said, "Sorry, we don't insure anything going into a war zone." And I said, "Can't I get a home owner's policy or anything like that?" So I called insurance company after insurance company and nobody would insure me for anything that was going to a war zone. In my mind I was thinking, "Not only am I never coming back, but I'm also never going to see my magic again. I'll probably never see it over there in the war to begin with, to entertain the troops."

I went to Fort Carson, Colorado, with the 144th, which was really a good experience because our unit—and I've known these people for years—are nice people. It is good to go with friends. It is good to go with compadres. I would say 50 percent of the unit were Latter-day Saints. We had a strong bond. We had people that weren't going to be rabble-rousers. We were going to stick by each other. I was going with people that I really felt good with, that I could trust if things got

bad. I would be protecting them at the same time that they'd be protecting me. But at the same time, I still didn't think I was coming back. I kept this to myself. My unit didn't know my thinking. My wife didn't know that either, but I think secretly she didn't think I was coming back because she wanted me to take out the biggest insurance policy on myself that I could get.

Before they shipped us off, my wife was in such a state of sadness and shock that she couldn't see me off on the buses. So I was sitting down at the armory, and all these other spouses are hugging and crying and stuff, but she was in so much pain that we had our little moment at home before I drove myself down to the armory. At the same time, to make matters worse, my brother was activated in the same unit as me. He is two years younger than me. He is also a nurse, but at the time, he was enlisted. He became a nurse and paramedic with the county fire department. Now my parents were losing two kids, two boys. We have another brother, but he was dropped on his head and had to get a metal plate. The army doesn't take people like that. My sister-in-law and my wife were able to console each other, and that was very helpful for them.

So I went to the VA and they said, "Normally we don't do this. We only do this during open season, but under this situation, we'll go ahead and raise you up a little bit." Fortunately, I was luckier than a lot of my friends because nurses are brought in as officers. I was a captain at the time, and a lot of my friends were attorneys and accountants. They were enlisted, but they had private jobs on the outside, making three times the money I was making. But the VA was nice because they were helping me out and they let me use my annual vacation time to help offset things. Also, the loan officers helped us with the mortgages and things like that, so I felt pretty good about that. I was working as a dialysis nurse at the VA. The only thing is, they didn't need a dialysis nurse out in the middle of a war zone. If someone is in renal failure, they get

triaged out. So I was with this little group in the operating room.

So we were shipped off, but I was kind of separated from my brother because he is enlisted and I am an officer. Even though he was over there, which was kind of nice, we were separated. We drove out to Fort Carson, Colorado, and we were there for several weeks until they figured out when to ship us off. We did get a break for Christmas. We were not supposed to leave the base, but several of us got in a car or went on a plane or whatever to get home for a couple of days. I came home disguised in a little hat and dark glasses so no one would recognize me. For three or four days during Christmas, we all got to be with our families before we snuck back. They shipped us out right after Christmas.

We arrived in Saudi Arabia in January. We took off in this big, beautiful 747 decorated all nice and patriotic for us, and they landed in some remote makeshift airport out in the middle of the desert; it was pitch black. They shuffled us all off and pushed us into these buses with other people. I don't know if they were Saudi Arabians or what, but they couldn't speak English. We couldn't talk to them. We did not know where we were going. So we were sitting on this bus and I remember looking out at the pitch blackness, going across the sands hour after hour. There were both men and women mixed all together, officers and everything. There was no way to communicate to these guys for a rest stop or anything. We needed to go to the bathroom, but there were no bathrooms. They gave us bottles of water as we boarded the bus because there is no water over there. We got to the point where everyone had to go to the bathroom. Everybody was kind of numb. We had been awake all night. We used our water bottles as pee bottles. People respected each other's privacy on this bus, plus it was pitch black. The girls did it too. We couldn't talk to these guys because they couldn't speak English. They just knew they were supposed to drive their bus wherever, and I was looking out into the dark-

ness thinking, "What in the world am I doing here? How did I get myself into this mess?"

I was going across the desert with everyone else, and by now people were so tired that they were falling asleep, and I remember looking out in the blackness at nothing. They took us to a place called Dhahran, to a little holding area in the bottom of some carports, and they just dumped us off and laid our things on the concrete. That was where we slept the first night, not knowing what was happening. The next day we got up, and the officers were saying that they needed people on the front lines and they were going to send our unit right to the front lines. These were our officers, and they had gotten the information from someone else. And I was thinking, "Why are we going to the front lines? I thought we were a hospital. I just wanted to go home to my family.

So they kept us in this carport for several days while they tried to get information. We were eating MREs (meals ready to eat), but it was so hot that we could throw one of those MREs on the hood of a truck and five minutes later we had a hot meal. After that our troop commanders came back and told us that they didn't have enough people in their hospital. We had to wait and get an attachment from other hospitals so we could fill all of those spots and have a fully functional hospital. We spent a couple more days in this carport, which was bombed near the end of the war. Then we were loaded into these old planes in the middle of the night, wondering what it was all about. They sent us over to a place called Eskin Village, which is a place that the Saudis had built for the Bedouins, nomads who roam the deserts. It was seven to twelve miles outside of the capital, Riyadh. It was really nice that the Saudis built this place for the Bedouins, but the Bedouins insisted they needed to bring their camels and sheep. The Saudis said that the housing was for them and not their camels, so the housing never got used.

We were put in this "Ashcan" Village, as we called it, while they were finding us a place for us to build our hospital and set up our tents. We were there for several weeks while they shipped us back and forth to build our hospital. I don't remember the date, but all of a sudden these sirens started wailing. The next thing I knew, the ground started shaking, bombs started blowing up, and the sky was just echoing with Scud missiles going off. My heart was pounding a hundred miles an hour. We grabbed our chemical suits and put our masks on, and we were thinking, "What is happening?" Every time the Iraqis would send up a Scud missile towards us, we would shoot two Patriot missiles at that one Scud in case one of the Patriots would miss. Each missile cost two million bucks. So every time they shot up one Scud missile towards us, we shot up four million dollars to shoot that thing down. I'd never heard of a Patriot missile in my life, but I was so thankful that they were there. I was so thankful because we would feel this big explosion and the sky would just echo and shake, but at the same time we didn't know if it was chemicals or what in these missiles. So for twenty-four hours we lived in our chemical suits, hyperventilating with our masks on. The next day when we took them off, we were black because the charcoal would leach through the chemical suits.

For the next several weeks, these missile attacks would come constantly, whether we were building our hospital or filling up sand bags to build walls around it. These Scud attacks would go on for weeks and weeks to the point where we would hear the sirens and know that we had seven minutes from the time that missile left Iraq to when it would reach us. So for seven minutes we would sit and meditate and pray. During those seven minutes, we knew that those chemicals were coming to us, and we would sit in our chemical suits trying to find something to be under. A lot of times we were out in a tent. Seven minutes we spent just meditating and praying that we were going to be okay. And this whole time, I would

be praying for our guys to shoot the Patriots and waiting for the explosion in the sky.

That turned my life around. I had never really been a spiritual person. I believed in our Father in Heaven and all that stuff like that, but something changed my life when I was out there, to the point that I would attend every single service they offered. It was something to be sitting in a group in the middle of a war zone in our battle fatigues having a sermon about our Savior; it really touched me. I wasn't going to take life for granted anymore. I was going to appreciate every day and every moment that I have. I was going to come back a different person.

Well, the ground war flared up near the end of January and went through the whole month of February. During that time, there weren't as many Scuds going off. Around our compound we'd be out in the desert many times, and I'd go out and meditate. I would have my pockets full of little magic tricks. I'd see bunkers out there where they would put enlisted guys with their M-16s, and I thought, "Oh, these poor guys stand here all day long and can't go anywhere, guarding perimeters and stuff." I, being an officer, had a little more clout; I could come and go. So I'd pick out a bunker maybe a mile away, and I would walk out there with my pockets full of magic tricks. I'd see two little rifles aimed at me as I'd start coming closer and closer. They were American bunkers to guard perimeters in case there were tanks or terrorists out there. They'd call out for me to halt and say who I was. I would say, "I'm one of you guys. Come here; I want to show you something."

Now, they wondered, "Why in the world is an officer coming out here?" Most of them would be scared because they were just enlisted guys, and they'd be saluting me, and I would say, "Take it easy. It's okay. I want to show you something." Then I would reach in and do a couple of little tricks for them. I would always, even to this day, carry two little rubber bands around my wrists. They didn't know what I was doing. I would take

a rubber band and another rubber band and I would show them that the rubber doesn't stretch, but right then it would stretch right through, and then I made the rubber bands pass through each other. Something simple like that, and it would bring a spark to their eyes. Here was some officer out in the middle of the desert coming out and pulling out a couple of rubber bands. I'd then reach in and do a few little card tricks for them, and after a while those two guys in the bunker were just laughing and happy like, "Wow, this made our day!" Well, it didn't really make their day as much as it made mine because I was giving something to somebody else.

I'd wander to another little bunker, and this gave me time to meditate. In the meantime, I took a little tape recorder and I would make little recordings to my wife of my thoughts and feelings. The more I meditated, the more I realized that life is valuable and precious. You have the chance to do something for somebody. Then one day someone said, "Hey, we got a video camera. Do you want to send a videotape home to your wife?" And I thought, "Well, my wife is a schoolteacher. I'm going to make the kids a video." I did it eating a packet of MREs and talking to the little kids at a low level explaining my situation. Then I sent it off. When I got home eight months later, I found that this little video had made the rounds to a majority of the elementary schools. The schools liked this video so much that they made copies to share. Several of my friends said, "Man, we need to send that to *America's Funniest Videos*." The video was of me eating a dehydrated MRE hamburger and telling the kids what life was like. Even to this day my friend Stan says, "I guarantee you can win ten thousand dollars if you send that video." But someone had this little video that I didn't even know preceded me.

In the meantime, the war was still going on. Then by the end of February, the ground war was wrapping up. And guess what arrived at our hospital? A truck. And guess what was in that truck? All these crates of magic props. And the

army says, "Okay, we want to put together a little U.S. social. We're going to be sending our troops home. Can you travel around and perform for our troops?" So they got me and another guy named Gaylin Young to team up, with Gaylin playing the guitar and me doing magic. He is now a nurse, but I don't think he was at the time. We were about six miles from a Swedish hospital, so they got a troupe of Swedish girls, and we would travel around from unit to unit, performing for these people. It was so much fun. We had a captive audience. They had a little entertainment, and most of them had a big feast. They all knew they were going home. It was one of the neatest experiences once again to be able to share something, a special talent that you have.

The funniest part of the whole thing is that I packed my tuxedo in one of those trucks. Here performing in front of these troops was a guy dressed in a tuxedo in a war zone. People came in, and they just couldn't believe that here was someone who packed his tuxedo in the middle of war. Sometimes when I wore my white tuxedo, I would get a Saudi Arabian white scarf to wear around my head for my magic show. Gaylin would play guitar and folk songs. The Swedish girls would dress in their cut-off, beady uniforms with their legs showing. It was really a fun time. And many times my friend Kent Blad would come around and be my right-hand man. He was a good friend of mine.

What kept me longer is that when it was time to go home, they needed what they called a rear party for units being shipped off. They needed a group to stay behind for people getting hurt. I was in one of the small groups. So when our unit, including my brother, went home, my wife just couldn't believe I had to stay. It was kind of a rough. One person out of every section had to stay. There had to be an OR nurse or an OR tech, enough to make a little surgical team so they could stay while all the rest of the teams were processed out. I was one that was chosen.

KATHRYN RAY HIERSCHE WALTHER

I was about fifteen years old when I came across a flyer at an army recruiting booth at a county fair for a full-ride four-year scholarship at the Walter Reed Army Institute of Nursing. I held onto that piece of paper throughout high school. When I was a graduating senior in 1969, I applied for that scholarship. At that point I wasn't even that sure I wanted to be a nurse, but I decided, "Well, if they're going to pay for me to get my university education, then that's what I'll do." I did receive the scholarship, and that is how the decision was made that certainly affected the rest of my life in a very dramatic way.

The way Walter Reed's nursing program worked was that students went for their first two years to any university in the country. I spent my first two years at the University of Oregon, which was about 120 miles away from my home. All of the students accepted in 1969 (all girls except for one male student) moved to Walter Reed Army Medical Center in Washington DC, where we then became students of the University of Maryland. For eleven years, the University of Maryland had two campuses. One was in Baltimore, and the other was at Walter Reed Army Medical Center. The Baltimore campus is where our diplomas say we graduated from, where we physically registered for school for the first time, and where we went for graduation ceremonies, but we lived at and attended all of our classes for our last two years right there on the compound of Walter Reed Medical Center.

There were about one hundred students per year accepted into the Walter Reed Army Institute of Nursing (WRAIN). All of our instructors were Vietnam veterans with master's degrees in nursing. That was really amazing in those days because at that point there were still a lot of diploma schools out there; an MS in nursing was very impressive. Baccalaureate nurses, nurses with their BSN were made first lieutenants after they graduated, while diploma nurses were made second lieutenants. That did not make for



Kathryn Ray Hiersche Walther

really good feelings between the new graduate lieutenants.

The first graduating class of WRAIN was in 1968. The purpose of the program was to produce army nurses to meet the needs of the Vietnam War. There were about one hundred of us in each class, and we were from all over the country. By the time I graduated in 1973, the WRAIN graduates were no longer going to Vietnam. This was the pull-out time, so none of my class ever served in that war. But we did have a three-year obligation to serve on active duty. It was very interesting because some of the previous graduating classes went straight to Vietnam. As the war progressed, the graduating classes were required to do a couple of years in country before they went to Vietnam. The last WRAIN class to graduate was in 1978, since the Army Nurse Corps realized that they did not need as many army nurses during peacetime.

After graduation, I went to Fort Sam Houston in San Antonio, Texas, and then did my active duty at Fort Leavenworth, Kansas. This is where the Command and General Staff College is for all army officers, which is a type of military graduate school. There were tons of majors there, while the only lieutenants were a few nurses and support staff, so to be a lieutenant on that post was the lowly of lowlies. The hospital of Fort Leavenworth was very small. It had four small wards. One was obstetrics, another was considered an intensive care unit, another was a medical-surgical ward, and the last was a prisoner ward. If prisoners from the army's prisons at Fort Leavenworth found themselves ill or injured, they would end up in that ward, which had bars on the doors. It usually had only fifteen patients. I worked on all wards at one time or another, but I did the biggest block of my time in obstetrics, which was one year.

While I was in the army, I got pregnant. I was married to a marine officer who at the time was stationed in Kansas City, Missouri. I had met him in Washington DC when he was at the Naval Academy and I was at WRAIN. It was an interesting time in the army for women starting families. Previously, a woman was given a discharge if she got pregnant. At the time I became pregnant, the pendulum did a really fast swing, and women were no longer allowed to get out of the military if they got pregnant. By the time the baby was born, I had done about two years of a three-year active duty obligation, but the army still told me I could not get out. Things were rough during my pregnancy. I had to drive about an hour to work. Since I was the lowest ranking person on my ward, I was chosen to do everyone's days off. I was working two nights, two evenings, and two days, and it was a horrible schedule. They would not give me a permanent shift. My husband was on active duty. And to top it off, I was also very ill during the pregnancy.

At the time I had an old-fashioned army chief nurse. She had never married. She still lived in the hospital compound, and she saw nursing

as a calling. I mean to say, the army was her life. She was a nice lady, but having a pregnant nurse was really more than she wanted to deal with. It was as if she thought, "Well, how annoying. Why would you do something like that? How dare you get pregnant!"

I had a friend who was also a lieutenant. She got pregnant a couple of months before I got pregnant. She wanted to stay in the army, but the army was trying to force her out. While my friend was fighting to stay in, I was trying to figure a way to get out or to at least be given a decent schedule that would allow for daycare. I went and spoke to our hospital chaplain, and he suggested that I request a hardship discharge. When the hardship discharge went in, it requested the army give me a permanent shift to allow me to plan appropriate child care, but the army just gave the hardship discharge instead, and I joined an Army 325th General Hospital Army Reserve Unit in Kansas City.

The decision to join the reserves was the result of a bit of a guilty conscience. I knew the army paid for me to go to school for four years and I had not completed the three-year active duty obligation payback. The reserves was my own way to fulfill the obligation. I drilled one weekend per month and did one two-week tour of duty at Fort Sill, Oklahoma.

I observed an interesting historical event in the army that first year of my reserve duty (1975). A woman who was in her forties joined the army and even became my chief nurse. What made this so special was that the army had to give her a special waiver for her to join. The reason she had never joined before was that she was a nun. At that point, nuns had not served in the military or had not been allowed to do so by their church. She became our chief nurse. Not only was she a nun, but she was also a reservist. It was a time for many changes in the military as you can see, especially for women. First we couldn't be married, then we couldn't have children, then we had to stay in no matter what. Of course now, even to be in the military, parents have to have a care plan

on file identifying the individuals who have agreed to take care of their children should they be deployed overseas. Having children and a husband does not keep a woman out of the military. Women just have to plan ahead on how children will be cared for in the event of war.

After being in Kansas City for about a year, my family and I moved to San Diego, California, where I affiliated with the 67th Combat Support Hospital. A combat support hospital was one that ended up on the front when there was a war. It was similar to a MASH unit, only it was more inflatable and better equipped. We drilled at the Naval Regional Medical Center, also known as Balboa. There we did our military training on the weekends. I also did some army-nurse recruiting at colleges and recruiting days while in San Diego.

After San Diego, my family and I moved to Las Vegas, Nevada, where I was in the 125th Combat Support Hospital. Although it was out of Phoenix, Arizona, a detachment was in Las Vegas, so we drilled there at the county hospital. I worked in the emergency room, where I supervised the corpsmen and the medics that we had in the detachment. I was there almost two years, and I even did one army reserve two-week tour of duty at Fort Lewis, Washington. Some years I did not do my two weeks because I was either having a baby or nursing.

I had another baby in Las Vegas, so again I had time off. In fall 1979, my family and I left Las Vegas and moved to Federal Way, Washington, and that area became my home for the next nineteen years. During that time I affiliated with the 50th General Hospital, which was based in Seattle. The hospital also had a detachment in Tacoma, and since I lived halfway in between, I spent my last eight years in the reserves drilling with the detachment in Tacoma.

The 50th General Hospital was a very large reserve unit with the potential for six hundred members. It was while I was in the position of training officer in the 50th that I was called to active duty for the first Gulf War in 1990. The entire

50th General Hospital was mobilized. We were the largest unit mobilized for the Gulf War. That was in November 1990.

It is interesting to me as I look back on the experience that I was pretty realistic about it. I never thought, "I'm in the army and I'm never going to care for anyone that has been in combat." For one thing, when training at Walter Reed, the majority of the patients we took care of were Vietnam veterans. Not Vietnam veterans that had been wounded years ago but Vietnam veterans who were coming back directly from Vietnam for treatment. So even though we certainly were not in the theaters of operation, we did care for patients who had become ill or injured in the course of the war. I saw war as a realistic possibility. Also, as the unit training officer, I trained people and designed training with the idea of mobilization. I heard someone compare it once to working in an emergency room. You never ever want to see trauma. You have compassion as a human being, and you do not wish a car accident on any of your fellowmen. You don't want any kind of a mass casualty or anything like that, but there are times when you are there saying, "This is really boring. I wish something good would happen," but you don't really mean "good." I think that's true in the military. If you're a realist and you're training people all the time, you do think sometimes, "I wonder if we'll ever use this training?"

I was never so naive that I thought, "Oh, I won't have to go," or, "I have a bunch of kids, so I don't have to go." I always felt that by belonging to the military, my responsibility was to be prepared to go. My husband was also in the reserves. We had pretty elaborate family care plans should either one of us be mobilized or certainly in case both of us were mobilized. Family care plans involve everything from powers of attorney to who will care for the children while you're gone to who's going to take care of them until the designated caretakers get there. It didn't include who's going to take care of your children if you don't come back; that would be in your will. The military's

family care plan was designed to determine who will take care of your family if the military requires your services. There is no point in having people in the military that say, "Oh I'd like to go, but gee I can't go; I have little children."

Because I had gone to the Walter Reed Army Institute of Nursing, all four years of my college counted as active duty. I went onto active duty on September 11, 1969, which never had much significance to anyone but me until the events of the recent September 11 happened. Not everyone knows that date. But I had my own special reason to remember September 11—that is when I was first sworn into the military.

In 1989 I was eligible for my twenty-year letter. My plan had been that at twenty years I would get out of the military. I had invested twenty years so that when I was sixty years old I would receive a retirement benefit. In September 1989 I hit twenty years. I was warned by several people, "Don't get out until they actually give you your twenty-year letter," because everybody knew a horror story of someone who had thought they had their twenty years in, but when it was really figured, they were missing two months or something like that. So I said, "Okay I'll wait until I get my letter." It took the army until the following August to get my letter issued. When I received it in August 1990, I went to my unit administrator and said, "Well, I'm really done. I'm ready to check out." I was thirty-eight years old when I hit twenty years and thirty-nine when I got my twenty-year letter. I was excited to say to my commander, "You know, I'm really going to retire?" He looked at me and said, "You can't retire! There is a war going on." I said, "Yes, I can. Here is my twenty-year letter. There is always a war going on." Even though Desert Shield had started, I thought, "What's the difference with this and any other involvements we've had in the military?" But I was told I really could not get out at that time.

I drilled in August, September, and October. Sometime in November 1990, we received an alert and were called to the unit headquarters in

Seattle. This is when we began to feel like we were participating in a dark comedy. They told us that we would go through what was called a premobilization drill. They said to us, "We don't have the word that we're being mobilized yet, but we're going to do all the paperwork and immunizations." At the end of the two days, there were at least four hundred of us standing in formation with our commander on an outdoor staircase. He was up a couple of floors, so it kind of reminded me of King Benjamin. He had a bull-horn or some sort of PA system, and he was talking to us and congratulating us on a good two days and saying that we had done such a good job. Then he said, "I know you haven't believed us, but we do not have any orders. We have not been mobilized. This has been a premobilization exercise. We are on alert, and you will remain on alert when you return to your families." As he was going on trying to convince and comfort us, we saw a sergeant come running up the stairs while the commander was telling us this, and we knew what he had in his hand. He got up there and, sure enough, it was our orders. The commander was in shock.

We had Thanksgiving with our families and said good-bye. We were put on buses with police escorts, and we went to Fort Lewis, Washington, which is about an hour and a half south. We drove through the town I live in and went back down to Fort Lewis, where we were put up. Fort Lewis was just bursting to the gills because there were so many people being mobilized, so we were assigned to an area of Fort Lewis that had some old Bachelor Officer Quarters (BOQs). That is where we stayed. We went into the BOQ building to see our new "home." I had a roommate I knew well and respected, and I knew we would get along well. We went into the room assigned to us, and of course it was absolutely bare. I'm not even sure it was a BOQ. It might have been an office building. There was a bathroom attached to our room. When we went into the bathroom, the toilet was stopped up. I had done really well emotionally until this point. I just burst into

tears. It was like, "You can send me to war. You can rip me from my family, but don't give me a stopped-up toilet." I just lost it.

For the first night or so, we slept on very thin foam pads. We had sleeping bags at first. Eventually they got us bedding. We were at Fort Lewis for two months, which was only an hour from my home, but we were not allowed to go home. Of course I snuck home and got caught in a snowstorm coming back and thought, "Oh great, I'm going to be in jail or something."

During those two months it was all training and preparation, but we still did not know where our final destination was going to be. We didn't know if we would end up going to the East Coast to augment some hospital that had lost all their active-duty medical folks to the war early on. We did know that it looked like we were going to the theater of operations. While we were at Fort Lewis, we would see other reserve units come and go. They would come to Fort Lewis and leave for Germany, or they would come in and go to other places in Southwest Asia. It was just weird. We couldn't get real empathetic. I had a friend come through who had been at WRAIN with me, and she was with a unit out of Vancouver, Washington. She was extremely upset because they were going to Germany. She was upset to be leaving her family, which I could empathize with. But her destination was Germany, so I just could not feel much sympathy for her. It was like, "I like Germany. I'll go to Germany," because of course all the while we were thinking we were going somewhere much closer to the action.

We were given a couple days at Christmas and New Year's to go home. Our families also got to come and visit us on a few occasions. After the holidays, we came back and received our orders. We knew we were going to Saudi Arabia. Our families were able to come down and say good bye. My five children and my husband came to visit. He was actually in an army reserve unit at the time. He was in an army reserve unit that was the unit that mobilized everybody else. My husband was never mobilized, but he had volun-

teered to work full time for the army during the mobilization phase.

Though I didn't keep a journal most of the time I was mobilized, I did a little bit at Fort Lewis. On January 7 I wrote, "Still at Fort Lewis. Said good-bye to the kids tonight. Molly said (she was almost three when she said this), 'But this is Saudi Arabia.' She thought I was at Saudi Arabia the whole time that I was at Fort Lewis because everyone talked about how Mom's going to Saudi Arabia." Since she saw me every couple of weeks while I was in "Saudi Arabia," she was very upset that she could not come and visit me anymore. I cried with the kids and felt sad and very lost.

Fort Lewis was an interesting experience for me. This big group of four or five hundred members was divided into several companies. My roommate and I became the co-commanders of a hundred-member company that was made up of the Army Nurse Corps and Medical Service Corps officers. The MSA is made up of the dieticians, physical therapists, and occupational therapists. I was supposed to keep them busy and trained.

It was one of the worst winters the Northwest had had in years. We were outside in the wet Northwest snow many times. Snow is not real typical for up there, so this was very unusual for late November or December. We tried to do things that would help the unit members not feel so alone. We were at least on familiar territory. A lot of us had been on active duty or done reserve duty at Fort Lewis, so we didn't feel lost in that respect. Most of us lived nearby. We were not that far from home, but there was the business of feeling very locked in because at any minute we could be told, "The plane's ready. We're out of here." We got to the point that we just wanted to get moving. You would think that we felt good and safe at Fort Lewis, but that wasn't the feeling. It was like, "Oh please, let's hurry up and go to where we are supposed to serve!"

People were learning to take apart their M-16s and their .45s and put them back together, and for the first time, having to shoot for a score.

Before mobilization, nurses were just expected to familiarize themselves with the weapons, but this time we were actually being graded and lying on our stomachs in the mud and shooting. We weren't twenty-year-old recruits anymore. I was thirty-nine, and I would say that the majority of people were in their late thirties or early forties.

We tried to make things work, and we'd say, "Okay, this is your assignment should you choose to accept it. You have to go out and find two Christmas trees for the two lobbies of the two BOQs, but we can't tell you where to get them or how to get them or whatever, and we're not even going to say we sent you if you get caught." They loved it. Those folks actually recruited another lieutenant, and the three of them went out and got these gorgeous Christmas trees for our lobbies. We decorated them with homemade decorations and things that we had.

The other thing we did was put up signs. I had a really talented psychiatric nurse in my group, and he and I did some planning together. I had done my master's degree in psychology, not psychiatric nursing, at Antioch University. I had my emphasis in holistic health and had completed it in 1983. Now it is 1990 and Jim and I decided that we needed to do something to help people vent because there was a lot of unhealthy venting going on. So we put three large newspaper signs up in the day room of the BOQ. One was titled "Stress Management Techniques That Work for You," one was "Thanks and Acknowledgments," and one was "Bi— List." We then encouraged them to write down all the things that they wanted on these posters. You would see people all the time reading them and laughing and having a bit of fun. There were lots of humorous comments, but at the same time it helped to let it out because life was truly scary.

If someone had said to me, "Will you go four months and spend a couple of months at Fort Lewis and a couple months in Saudi Arabia and participate in this war and take care of anyone that needs to be taken care of? I'll ensure you that no one will be killed among your group of

friends and none of your unit is going to lose their lives. Then you're going to come home in only four months and you will have had this amazing experience." I would have said, "Well, yes, I will do that! I'll figure a way for me to get those four months to get away." But that's not the way it was. It's the uncertainty and the feeling of, "Is this the last time I'm going to see my family? Is this the last time I'm going to touch ground here? Is this the last time I'm going to be in this airplane? Is this the last time I'm going to see my friends and family at home?" And then of course when you're a mom, you also worry that something will happen to your kids while you're gone. Even if you come back in one piece, will they be in one piece? That was the most stressful thing, not knowing. I really believe that about the type of experience I had, and certainly many people are having it now.

When I came back from the Gulf, I think I spoke about my experience fifty times in the first three or four years, and it was very therapeutic for me. I would always start by showing a picture of my family whom I had left behind. That was my reality. That was my real world. Then I showed them that my world became the pictures taken from the hospital where I was assigned to work—the pictures of Patriot missiles in the process of intercepting Scud missiles. My reality changed extremely fast, and that was a disturbing part of going to war.

My dad, who served in World War II, was gone for months and even years. Being a child of the generation whose parents and relatives lived through the events of World War II made me realize that war might also take me away for a long period. There was a part of me that thought, "I could be gone a really long time." I think many of us felt that it could be at least a year because we were the generation that sent our young people to Vietnam, where soldiers typically served a one-year tour of duty and sometimes went back for more. Most of us felt that our tour of duty would be about a year, but we really didn't know.

Information changed often, so when we finally knew we were leaving Fort Lewis, we had this goodbye time with families. It says in my journal that my family was there around January 7, and I think we left Fort Lewis the next day. We definitely knew we were saying goodbye for real.

There is a test called the Holme's Stress Scale developed by a researcher from the University of Washington, where you give yourself points for all the stressful things that have gone on in the past year of your life. If you hit over a certain number, you are at higher risk for accident, injury, or illness. One of the things that is not on the list is going to war, and I've decided that that automatically gives you the three hundred points or whatever you need to hit the high risk level. The morning we left, I did something really stupid. I woke up, and I was trying to be so organized. I went to the mess hall for breakfast, took an apple, and went back to my BOQ room. I had finished packing, and I had a certain amount of time to finish up my last-minute tasks, but first I decided I would give myself a break to eat my apple. I took out my brand-new pocketknife that I had bought to take with me to go to war. I had probably only used a pocketknife twice in my life, and I decided that I would cut the apple, but in the process I managed to stick the knife through my hand. It was really a sharp little knife, and it went right through my hand. Of course everybody said, "You're supposed to shoot yourself in the foot to get out of going to war, Katie. Stabbing yourself in the hand doesn't work." My best-laid plans for having a restful and organized preparation day were ruined. I got to spend my time running over to the clinic to get a couple of stitches in my hand before getting back on the bus. My hand was fine but sore, and I still had to carry a big duffle bag and a pack and all my army paraphernalia. I can't believe I made my trip more stressful by trying to plan a stress-free moment.

We flew Pan Am Airlines to Saudi Arabia. If you remember, the civilian airlines that had con-

tracts with the military turned their airplanes and staff over to the military during the war. We had flight attendants and Pan Am captains and the whole bit, even snacks and drinks. Now in a general hospital unit like this you have a commander, and one of the people on his staff is the company commander, who is actually over all the enlisted people. The company commander also has a say in things. He was a good friend of mine, so when I got on board, my roommate and I found ourselves sitting in first class. It wasn't the highest ranking people that were sitting in first class, but the friends of the guy who was in charge. I was in a very comfortable seat that was right in the nose of the plane. I've never been on a plane like that since.

We flew over and I think we refueled in Spain. Then we arrived in Riyadh, the capital of Saudi Arabia. Riyadh, although it's not Mecca or Medina, which are the holy cities, is considered one of the most religious cities in the Arab world. The veils of the women covered their entire faces. It was as if they were wearing a black sack over their heads. We arrived in Saudi Arabia and were taken out to what is called by the military Eskin Village. *Eskin* evidently means "village," but the Americans had always called it Eskin Village. The air force had been out there for months, probably since August or September, and they had used it as a base of operations. It was a huge village. A story was told to us about the village. The Saudi Arabian government decided that they needed to do something about the number of nomadic people they had and that they should give them a more stable life and get them educated. They built two Eskin villages, huge ones, in the kingdom of Saudi Arabia. One was on the outskirts of Riyadh, and it had fire stations, schools, and clinics. All these buildings were built plus many living quarters, which were usually high-rise apartment buildings that were five to seven stories high. Each apartment had balconies, an entryway, a formal dining room, a living room, a kitchen, a kind of open area like a family room, and then anywhere from two to

four bedrooms. They moved the nomadic people into these living spaces, but they refused to live there because their camels had to be separated from them. Their camels were important to their culture. I don't know how you get a camel up seven flights of marble staircases or into an elevator. The staircases were marble, and it looked beautiful but dusty when we moved in, but the balconies were full of pigeon droppings.

The only trouble was the apartments themselves were like cinder block walls; you couldn't get a nail in them for anything. There were no closets, nothing to hang anything on, and no furniture. Ten of us were assigned to an apartment, so there would be two people in the dining room, two in the parlor/living room, and then two people in each of the three bedrooms, and I believe we did have two bathrooms. There were ten of us in this kind of a common living area. When we moved in we had one-quarter-inch pads to put on marble floors to sleep on and no place to hang anything. Some of the doctors, while we were at Fort Lewis, had formed a "construction company," they called it, and they had brought some power tools. They had taken power tools with them thinking they were going to need them when we got over there. It took them a while, but they eventually figured out ways to drill into some of these walls.

One day I walked into my room and there was a closet, like a wardrobe! One of my friends had his sister order it through the Sears catalog and got it delivered. It was one of those things that you put together out of heavy cardboard, and this was a true luxury. We still had nothing to sleep on and we hadn't received a medical assignment yet, so one of my good friends got an idea. She was our infection control nurse and had brought thousands of condoms with her because that was the one infection she was the most concerned about. She told me one day, "I have an idea. Let's go out and see if what we heard is true." Well, we went out into the Eskan and found out that there was the army side of town and the air force side of town. The air force people had

been there for several months. They had been there so long that they now had little beds, metal framed twin beds, but they originally had been cots, which were now being used to lie in the sun. We would have given our teeth for a cot at that point, so she called it her "cots for condoms" program. She would trade condoms for cots, and usually it would either embarrass them enough that they would just give us their extra cot or they'd take her up on the offer. Through this barter system we slowly started getting cots into our living areas.

We were absolutely forbidden to have anything to do with the local community, so whatever socializing we were doing was with each other. This had to be just among the Americans. There was absolutely no socializing with the Saudis. The army did give us quite a few culture classes before we left Fort Lewis. If this didn't cure people, I don't know what would have. They said, "Okay, we need to explain to you that in Saudi Arabia, if somebody steals something and is found guilty, they will cut off their hand. We don't even want to imagine what they would do to you if they found you sleeping with one of their women." Right there the guys' eyes got real big, and that comment effectively cured them of any desire to fraternize with the women in Saudi.

I think the military did a good job of explaining that there were specific rules for living in Saudi Arabia. We could see how strict this country was once we started working in the hospital. The hospital we took over was what they called a Saudi Arabian military hospital. But by military they meant that if anyone you have ever been related to had ever served in the Saudi military, you could go to their military hospitals. There were not many military people in these hospitals because they had started clearing them out before contracting with the American government to come in and superimpose our structure onto theirs. I would say that over half of their employees had already left.

In Saudi Arabia there were no Saudi citizens, at least at that time, that worked in any medical

profession except as physicians. It was considered low and horrible, and nursing was looked down on as a degrading occupation. None of their people would be nurses, nor would they allow any of their children to ever be nurses. Nursing was considered a really evil thing. The majority of the nurses in the hospital that we were assigned to were Filipinos. Many of the original Filipino staff had returned home, but some of them stayed and worked alongside of us. There were also Canadians and American civilian nurses, and it was run on a British system. The hospitals in Saudi were either run on an American system or a British system. We had this lovely old-fashioned Irish nurse who wore one of those blue capes. She was the chief nurse and ran the hospital before our arrival. When we started to work and convert the hospital to the 50th General, we met many expatriates because those were the people who had been hired to work there during peace time.

I personally believe that the Saudi Arabians allowed the Americans in during the war because if the war had continued all of their expatriates would leave the country, and the country could not survive without outside help. They would not have nurses, they would not have physical therapists, and they would not have plumbers or construction workers if their expatriates evacuated completely. All of those roles are performed by expatriates. It was interesting because certain countries provided certain types of workers. The Philippines provided nursing and medical people. The United States provided the hospital administrators. England and Canada provided nurses and administrators. In addition, there were all of the people who did our laundry, who seemed to be all from Pakistan. All of the repairmen were from other countries as well. Saudi Arabia was just run that way. The natives held "positions," but they did not hold "jobs." I talked to a young man who was actually in an OR tech program, the first of its kind, and he literally said that they were training only three Saudi citizens to be OR techs.

I asked him what his family thought about this and he said, "Oh, they're so embarrassed. They're embarrassed, they're ashamed, and they don't know why I would want to do this. They ask me why don't I want to hold a position and why do I have to have a job." The citizens got paid for holding positions, and they were the people who serve as the figurehead of any concern. Sometimes they knew what they were doing and were good engineers or good whatever, but other times they were not. They would be the head and the one that signed for everything. It wouldn't matter that it was the Canadian or English or German or American person working under the figurehead that wielded the power, those who held a "position" had the authority.

We learned more about the customs and culture once we got out among the expatriates who had been living there for a long time. They usually chose to work in Saudi because the money was good. Filipinos told me they could live there for ten years and then retire. While they lived in Saudi Arabia and worked, they would have their children cared for in the Philippines. They were given two one-month vacations per year when they would go home and see their families. They would work for ten years and then they would retire, and their families in the Philippines lived wonderfully with maids, and they owned homes. Now, the salaries that they were being paid were not grand by American standards, but they were wonderful by Philippine standards.

At the Eskan, we finally started getting livable conditions. We ate in a mess tent, and eventually they even started serving us underneath our high rise, where there was a big parking garage. Of course we didn't have cars, so they turned that into our mess hall. We started working at the hospital within a few days of our arrival. When we started at the hospital we would work ten-hour shifts, but it really meant a twelve-hour shift because it took an hour for our buses to transport us. We had to leave an hour before our shift started. We would have twelve hours on and twelve hours off. It seemed like we were

working five days a week most of the time, five or six days, but we worked different days.

The Sabbath in Saudi Arabia is on Friday, from sundown on Thursday to sundown on Friday. We didn't work what we thought was our traditional five-day work week. We just worked whenever. We did observe Christian Sabbath on Friday. The expatriates who were members of the Church in Saudi Arabia always had held church on Friday, since that is the Muslim Sabbath. A Latter-day Saint group leader was called for our unit who was set apart by the stake president of the geographical area when our unit headquarters was located in Seattle. He was called our group leader, and he had been a bishop in his ward in Tacoma before mobilization. There were about ten of us in any of our Church meetings.

I can remember that when we first met as a group, the decision was made as to how we would hold our meetings. We decided that we would hold them on Fridays because that was the day the church had the expatriates meet in Saudi and the day when more of us would be available to attend. Our group leader said we would have priesthood meeting and sacrament meeting. I was the only woman at this meeting.

The group leader asked, "How should we go about teaching priesthood meeting? I'm thinking we should just maybe take turns." The group agreed, "Yes, we should take turns." I immediately raised my hand and said, "I want to be first! I want to be able to say that I came to war and I was a priesthood teacher." They thought that was great, and so I taught them the first priesthood lesson. And so I can say, "Yes, I was called to be a priesthood teacher!"

We had an interesting experience as members of the Church. We had a unit from Salt Lake City that moved across the street from us in the Eskin village. We all heard ahead of time that they were moving in, but they were a full hospital unit. They arrived, and of course I was excited and so were the other Latter-day Saints. The unit was welcomed by everyone because they had something our unit didn't have, and that was a

Catholic chaplain. Somehow we had ended up with three Protestant chaplains. We had had a Latter-day Saint chaplain, but because of his medical history of kidney stones, he wasn't allowed to be deployed with us, which he was quite torn up about. When the Salt Lake City unit came, we decided that we would attend services with them. Someone in our group contacted them and found out that they were going to have Church service on Sunday morning and try to stick to their tradition. They didn't know yet where they were going to go to be assigned to work.

On Sunday morning three or four of us from our Latter-day Saint group were free to go to their meetings, which were held in the garage under their unit's building. Oh my, there were lots of them in attendance. We were just amazed. There must have been about 150 of them. It was just a huge portion of the unit. The only way I could analyze our experience was it was like I was visiting another ward. It wasn't as we expected. We expected them to be the long-lost brothers joining the fold, but it was more a case of, "We're our group, and now you're coming to visit." They were holding a testimony meeting, and a couple of men bore their testimonies. There were a few women in the group, but largely men were in attendance. The testimonies ranged about how glad they were that their wives weren't there and that they were really glad that the women were at home so that they could be protected. There were only a few women in the group. I was coming as a visitor with another woman, and I was like, "Well, what am I, chopped liver? Am I invisible? What is the deal here?" No one in attendance addressed the issue that there were women there alongside the men at war.

Now in looking back, I think they might have all known each other in the same way I knew the people in my unit, and my unit wouldn't have taken offense at things I might say because they knew the context from which it was coming. But here we were, the little orphans from Seattle, coming over to the big Salt Lake

City church. First of all, we thought it was really crazy they were having their meeting on Sunday, because the whole country celebrates the Sabbath on Friday. They had their meeting on Sunday, and then on top of it all, it was not like, "Oh good! You can join our group and be a part of us." And, "Oh, I'm so glad we moved in because there's only how many of you? You can be a part of our group." We returned to our unit across the street, and we voted to stay as our own group. We didn't join their ward or their branch, whatever it was, which we could have easily done. We also talked to some of the people who went to visit the Latter-day Saints on the air force side, and people said that they were a very friendly group made up of people from all different groups and were very welcoming.

Of course that Latter-day Saint unit was brand-new in the country. We had been in the country a week or two, they had only been there a day or two, and maybe the day-to-day life hadn't hit them yet. In retrospect, I can think of all kinds of perspectives they were coming from, but I will tell you, when we had fewer than ten members and we saw this whole big Latter-day Saint group move in, we thought, "Oh good, I'm going to have all this support and all these brothers and sisters," yet we were treated as visitors and we knew we were not part of their group. I guess I can look back now and say, "Oh well, it's good that they had a group identity." But when anyone showed up at our little meetings, we were thrilled to death. We were so pleased to have them; it was wonderful. Because of our schedules, I know a meeting was held every Friday. I know I went every Friday that I was able to, but it was not always possible.

When I was first on active duty as a young lieutenant at Fort Leavenworth, I knew there was one other member who worked in the hospital. He was in administration. I also knew a wonderful Christian woman who loved the Savior with all her heart. I had an experience where I had an ovarian cyst rupture. I was at work when I had this attack of incredible pain and ended up on a

gurney headed for OR. They asked me, "Well, do you want us to call anyone?" I said "Get Robin for me." I had known Robin in nursing school. When she came, I told her she must get the Latter-day Saint brother from administration. I told her to tell him that I needed a blessing and that it was important to me. I knew she would follow through even though she didn't understand it. After I had made that request, I was given anesthesia and had my surgery. When I woke up, the doctor came in and spoke with me. He said that by the time the "guys from your church" had shown up, we were already in the OR. The doctor let them scrub in and get masked and gowned and come in and give me a blessing while I was on the operating table. I asked him, "Well, what was it? What had happened to cause that pain?" And he said, "You know what? When I got in, all I could find was a teaspoon of something. Whatever was there was gone, and there was just this residue." Then he said, "Somebody up there really likes you, Katie." This OB surgeon had a friend who was a Latter-day Saint, and because of his love and respect for his friend, I believe he was open to allowing the priesthood to give me that blessing.

This is how the military usually is. You know every other Latter-day Saint, and they are really supportive. We probably thought we had hit the jackpot with this unit from Salt Lake City. It was not like they were mean or antagonistic or anything, but it was like they had their own way of thinking. They were a closed group. That was a very interesting experience, but we had a good experience with our unit's Latter-day Saint group, which is what I believe was meant to happen. How else could I have been a priesthood teacher!

The first day we went to the hospital in Saudi I received my assignment. I was to be the head nurse of what was going to be a medical-surgical ward. There was a Canadian head nurse there who had not left the country, and it was great because I had a knowledgeable, experienced nurse to lead with. We also had a few civilian nurses who were still there, plus I had my army

medics, so we were well staffed. It was a very nice facility. My infection control friend went nuts the whole time she was there because their ideas of infection control were so different from ours. I was also given the small ward next to ours that did not have a civilian head nurse.

On our first day there, we went through a little orientation and we were all introduced to this little lovely Irish chief nurse. I said to her, "You know, I have very dear friends from the United States, and one of them is a hospital administrator. In the last card that we exchanged, he was here in Saudi Arabia in a place called Al Khari, which I can't even find in the map. How would I go about writing to them from here?" She asked me for his name and I said, "Ken Smith." She said, "Just a minute." Then she dialed four numbers and handed me the phone, and it was Ken. This hospital where Ken was working was a satellite of the hospital that I was now assigned to. The coincidence was just unbelievable. These were not just very dear friends of mine. Ken's wife, Ludona, is the person who brought me into the Church. And now we find ourselves at war together! Ken was an expatriate hired to work in administration, and even their three kids were there with them. As soon as Ken was able to tell Ludona, she came over to our hospital on the shuttle bus. There was a shuttle that ran daily between the two hospitals. Ludona came regularly on that bus and visited me while I was on duty at the hospital. She was not allowed to visit the Eskin.

We decided that Ludona must have been the first hospital volunteer ever in the Kingdom of Saudi Arabia because the concept of volunteers in a hospital was unheard of, since they don't even allow their people to work in the hospitals. Although Ludona could not work on my ward, she was able to do volunteer work on the orthopedics ward where there were American soldiers with broken bones. She would read to them and write letters for them and cheer them up with fun conversations. She would even take my laundry home and bring it back on the next

shuttle trip! The army had a laundry run by the Pakistanis. We dropped off our laundry but were never sure whose laundry we would get back. We did our underclothes in our bathtub in the apartment. Anything we needed, Ludona would go and find because she could go out into the economy when we were not allowed to. In her little town, she visited the market and found all kinds of things for us.

I think it was a Friday when the war was officially over, and we figured that we would be going home in a few weeks. I don't remember how I pulled off my next adventure. I must have ridden the shuttle myself, but I went out to Ken and Ludona's town and slipped into civilian clothes. I wore American clothes, but I had to wear the abaya and the scarf, without the veil. The expatriates don't wear veils. I had it explained to me that the reason we did not have to wear veils or the reason our faces were not covered is that the Saudi Arabians consider all Western women whores. I thought that could not be true. I mentioned before that I had a student in the OR who was a Saudi citizen. We got to chatting, and I innocently asked, "How do the Saudis feel about American women? I've heard that they think of us as kind of whores." He looked directly at me and said, "Yes." It was as if he were saying, "Yes, so what's your point?" So that's really the way it was. We're so below them we don't have to wear veils.

I spent the night with Ken and Ludona in their compound. The next day I attended church with them, which was back in Riyadh. It was really interesting because the government had a lot of stipulations on what Latter-day Saints could and could not do. They could meet in groups of a certain size, but they could never tell anyone they were Christian. They could never tell anyone what religion they belonged to. They could not show their scriptures, so when they went to meetings they would carry a brief case or a shoulder bag with their scriptures hidden in them. They were basically on their honor to not ever tell anyone anything about the Church. As a

member of the military, I was not under that obligation. I was not even aware at the time I arrived in Saudi Arabia that members of the Church were under any kind of censorship. Ludona was with me one day at the hospital and we were having a conversation with the young Saudi Arabian OR tech. As we were talking, I started telling him what church I belong to. I brought it up and told him about the Church and asked him questions. When we were done with our little discussion, he walked away and Ludona about fainted. She said, "I never thought I'd ever hear that conversation take place in this country. I just can't believe it happened. I'm just amazed!"

Expatriates would go back to the United States on vacation and return to Saudi with Church videos for their kids and Church literature. As long as they did not have a lot of the same item, they usually got through the checkpoints. I do know that one of Ludona and Ken's Church leaders had a really bad experience. Evidently, the story was that maybe he had made some enemies at work or there were Saudis who were jealous of him. When he and his family returned from a trip to the United States, they went through his suitcase. When they found a Christian video, they wouldn't allow him to reenter the country, so he had to go back the United States, thereby losing his job.

Medically speaking, as far as nursing goes, we were preparing and waiting around for the war to start. Right away we started to get soldiers coming in that had medical problems with sudden onset diabetes, car accidents, broken bones, or things like that. We still had a few patients that had been in the hospital before the war had broken out, but they had not been transferred to a nonmilitary hospital. The hospital we were in was a Saudi military hospital that used to be a transplant hospital before the military took over. I had one little boy who was waiting for a transplant, but since the hospital had switched leadership, he could not get his transplant. He had to be transferred to another hospital.

We had an eclectic patient load, and I decided I would work a couple of nights to see how everything was functioning. While I was working nights, we had two Saudi Arabian female doctors who were working with the patients on our ward. One doctor wore the complete veil and black abaya and scarf, so it was difficult to communicate. She spoke English with a thick accent, and she had the ever-present veil covering her face. You can imagine how difficult it was to understand her English. It was very frustrating working with her.

Once she examined a soldier from Mississippi who had diabetes. I will never forget the absurdity of this conversation. She was talking to another doctor in front of the patient, as if he were ignorant. They were talking about how the patient had high blood sugar, and then the doctor turned to the soldier and asked through her veil, "Do you have a family history of diabetes?" It was truly impossible for the soldier to understand her. The patient replied, "No." She said to the other doctor, "No, there's no family history of diabetes." I jumped right in and said to the patient, "Sergeant, is there any member of your family that has ever had diabetes?" And he said, "Well, my mama has diabetes, and my granddad has diabetes, and my brother's got diabetes, and, well, my cousin got diabetes . . ." And he just went on and on and on.

Well, I guess that was worth the trip because at least somebody will believe that this guy had a family history of diabetes. Who knows if the doctor was offended at my interruption because of course her face was covered. After the war, when people would ask me what I did in Saudi Arabia, I would say I was an interpreter. Then they would ask, "Really? What would you interpret?" I said, "I interpreted for people in Saudi Arabia who thought they spoke English to Americans from different parts of the country like New York or Mississippi."

The other female doctor was very interesting. She wore all white, which was very unusual. She wore a long white lab coat that went nearly

to the ground, but I could see a skirt and heels under it. She also wore nylons and a white head scarf so her hair did not show. She never wore a veil. We were working together one night and I said to her, "Why do you dress in white? Why no veil?" She replied, "My father dictates what I wear since I will never be married." I asked, "What do you mean you'll never be married?" She replied, "No one would ever marry a doctor." Like, "I'm the lowest of lows because I'm a female doctor." I asked her why, because I am so naive. She said, "It's because we have to take care of people and touch people." Since she is not going to have a husband, her father decides what she is allowed to do. Since she is not ever going to have a husband and because she is considered lower than low, he does not make her wear a veil.

I couldn't let it go, and I said, "Wow, that's interesting. How does that work? Do you ever get in trouble when you're in public?" She said that sometimes she is approached by the Matawa, which is the religious police who carry sticks and hit people if they are not dressed modestly, but when she explains to them that she is a physician and that her father has given her permission, they leave her alone. I asked her if this was her father's way of punishing her, thinking he will make life miserable for her because she chose to be a doctor. I almost felt like it was some kind of religious order, like the father was saying, "You're stuck. You're not ever going to ever have a family or be married, so I'm going to give you privileges that other women do not have." I don't know.

We were still sitting there at the nurses' station and we were having this fairly intimate conversation. I was the naive Mormon who read *National Geographic*, and I brought up an article that I read in the *National Geographic* before I came to Saudi. I told her how I read about this woman who had gone to school in Oxford, England, and had dressed in Western clothes. In the interview she said that when she came back to Saudi Arabia, she realized she really missed her abaya and veil and was happy to get back to it. This doctor and I were sitting in chairs with

rollers on the legs. All of a sudden she rolled her chair across the length of this nursing station right up to me and put her face within six inches of my nose. Under her breath she said, "She lies." Then she rolled her chair back, resumed writing, and didn't say anything else to me. I think the women of Saudi Arabia will be interesting to hear from someday.

I got called into my chief nurse's area while on my off time in the Eskan village. (Wait, what am I thinking? We didn't have off time. Who am I kidding?) During the time that I wasn't at the hospital, I got called to go to a meeting. When I arrived, our chief nurse had a few of her supervisors there whom I highly respected. They were probably all in their mid- to late forties, and some of them were Vietnam veterans. It was interesting because they were kind of all there to give me support, so it made me think, "Okay, has something gone wrong at home? What are they calling me in for?" It turned out that they called me in to inform me that my ward had been chosen to receive all the enemy prisoners of war (Iraqis) that were going to be captured, and that I would be the head nurse of that ward.

Now here's the difference. If you see the word EPW, that means enemy prisoners of war; that's the other side. If you see POW, that's a prisoner of war, and that can be an American. But an enemy prisoner of war would be Iraqi.

Colonel D'Allesandro, who was a Vietnam veteran and one of the assistant chiefs, sat down next to me. She was very forthright when she said, "This is not a good situation to be in. I need to tell you what experiences from the Vietnam War taught us. If you take care of the EPWs, then there are some Americans who will see you as helping the enemy. Even the people at home whom you tell may wonder why you're risking your life to take care of enemies. Your staff and the people that are working for you, some of them will not be able to handle this, and you need to think through this." They did say to me, "If this is something that you will not accept, then we will find a replacement for you, but it's

the ward you're familiar with and we chose your ward." They chose it more for security reasons, not because of me. My ward was located at the end of the hospital complex, so it was easier to have it a locked area. I did feel that they were expressing a lot of confidence in me as well.

From the minute they told me about this, I felt that it was the right thing. I felt like I was one of the few people there that understood that Iraqis were my brothers. I may have not liked the war. I may have been very upset about the Iraqis. I may have hated Saddam Hussein with a passion. But at the same time, I did understand the need to offer care to those people, and I knew that I could do so in a positive way.

So we talked some more, and I went back and held a staff meeting with all of the personnel assigned to our ward. I explained our assignment and tried to prime them with the same philosophy that I had. I also told them that if any of them wanted to be replaced, they could request a transfer, and that I did not believe we were short handed. I did believe that I would be able to get other people in the unit who were willing to help. In my whole group I only had one enlisted person who was very apologetic but very honest and willing to acknowledge that this was not a place where she felt comfortable serving. It just wasn't what she came to do, to take care of the enemy. She did mention her family at home and how she would feel awkward to say that she was there taking care of the Iraqis. That was fine with me. She was transferred off our unit and we got somebody else in.

My ward master was very supportive and also really good about the whole thing. The highest-ranking enlisted person who works on each ward serves as the ward master, and they supervise all of the enlisted people, including all the LPNs and orderlies. They also order all of the supplies. They are really fabulous. In my opinion, there should be an equivalent role in civilian hospitals. My ward master and I met with the expatriates so that they would also understand what was happening.

While the rest of the hospital was waiting for patients (some wards never did get any patients) our ward was full. And this was before the war started. It was all during what are called "skirmishes." It is interesting because maybe in Gulf War II (Iraqi Freedom), with the embedded reporters, they would have had a better handle on this. But when you would read in the newspaper that there was a skirmish here or we dropped a bomb there, the real war hadn't started yet and certainly the ground war hadn't started. But I was getting patients with bullet holes through their bodies and amputated limbs. These were casualties that had been taken previously to a mobile hospital or an American combat support hospital and stabilized. It was not as if we were getting them right off the battlefield.

Remember that this was a Saudi Arabian hospital to begin with. The Saudis still owned the place, and therefore all of the enemy prisoners of war belonged to Saudi Arabian doctors or physicians. It put us into a very difficult position because the Saudi Arabians do not practice medicine the way we do. I will be the first to say that it was not unusual for us to call on our American doctors to sneak up and write an order that we requested and then sneak out. We did it because the Saudis practiced medicine in a way that we found unethical at times. I think the main difference is that they did not believe in pain management. They had pain medication, but not pain management. For example, I had a patient who had a bullet hole through his calf. You could see daylight through it. When he was to have his dressing changed (it was a packed dressing), he was to have two Tylenol if it hurt. So like I said, it was not unusual to grab an American doctor from our unit and say, "I realize this isn't your patient, but you've got to write this order for me." And they knew it. The Saudi doctors never asked us any questions; I don't even know if they read the records or saw the difference.

The second difference was that since the EPWs belonged to the host country—that is a fact in any war—I wasn't allowed to use our MPs; I

had to use Saudi MPs. I had these guards with loaded weapons sitting around my ward to supposedly guard the patients who were all in bad shape. Believe me, none of us were worried about the patients, but we still had to deal with the Saudi guards. Before we received EPWs, I made an appointment with the captain of the guards. Now think about this. I outranked him and was a decade older. In his office he offered me tea, but I had to tell him I don't drink tea because of my religious beliefs. The Saudis do seem to be respectful of people who will live their religious principles. I had been told ahead of time by my expatriate friends that if I get in that situation, I should tell them that it's my religion and they will stop at that because their religion says no alcohol. So I told him that I would like a glass of water.

So we talked, and the first word I learned in Arabic was "lieutenant colonel." The idea was that I did have a rank and they didn't have to think of me as a woman. The media did say later that was how the Saudis eventually coped with the women in the military, by seeing them by rank rather than gender. I read one article that said we were gender neutral, and they did see us that way.

Their concept of security was just so different from ours. My friend, the infection control nurse, Kathy, was so funny. Now I had the locked ward with the EPWs and my other little ward that still had a few patients, a couple of Saudis and a French soldier. One day Kathy and I were coming back through the locked door. She was coming to look at something related to infection control in my ward, and here was a Saudi guard sitting kind of slumped over in a chair with his weapon pointed at us! I mean, he was just leaning forward asleep and cradling his gun in his arms. American MPs would not do that. What happened next was kind of funny in retrospect. You have to remember that an American military person would never let anyone touch their weapon. Nobody would walk up and grab your rifle from you or even touch it.

Kathy, with that in her little American mind, decided that we had to teach this guy. We woke him up and tried to explain to him that he must have his weapon pointing up, not at staff members coming through the door. Of course we weren't touching the weapon, but we were trying to explain this to him. The interpreter wasn't there yet, so we were using sign language and acting it out. Then Kathy grabbed his arm to show him what we were talking about. It was as if she had touched him with a hot iron, because in his mind, here was this Western woman, who was obviously a whore, touching him. At that point, he jerked back and started yelling and was very upset. Then she took his weapon and put it in the right position, and he was fine with that! Cultural differences within the military brought an entirely different perspective.

Back to the second ward I oversaw. One of the things we were told by the expatriates was that the Saudis were possibly being told that there were no such things as HIV or AIDS, just as there was officially no spousal abuse or child abuse in Saudi Arabia. These were all Western diseases and problems that did not exist in the Kingdom of Saudi Arabia. I had one Saudi patient who was there for pneumonia when we first took over the hospital. I was going through his chart one day to look up his diagnosis and treatment and to see how soon could we transfer him out, because we needed to make room for the wounded that were predicted to come in. I went through his whole chart and when I read his lab reports, what do you know, he was HIV positive.

I had an opportunity to go to the hospital in Al Khari where Ken worked to see if it could handle overflow just in case the war got bigger. I was sent with a delegation of about half a dozen nurses to look it over and see what we could set up. Our tour guide was an American nurse. She was an expatriate who was working in pediatrics. We divided up, and she took three of us into a pediatric room. There were a couple of kids running around while their mothers sat

with their faces completely veiled and their hands covered with black gloves. So I asked the American nurse who they were, and she said they were the mothers. I asked her, "Why are they veiled in here? It's just their children." And she explained, "Oh, they have to stay veiled because a man might walk by, and they cannot be seen." I asked, "How long have these kids been here?" She replied, "Oh these kids have been here their whole lives." The children were about twelve to eighteen months old.

I said to her, "Well the first thing is, you're telling me that these mothers are in here and they've never felt their babies skin?" She says, "That's right." And then I asked, "Why have these kids been in here for so long?" She answered, "The mothers will not take care of them at home." A child in the United States would have gone home with a breathing treatment that the mom could do at home or that a home health nurse could help with, but in Saudi Arabia the families would not learn to do it. Then the nurse said, "That's nothing, come and look at this."

We went to another pediatric room where a mother was holding a child that was a couple of years old, and she said, "I want you to see this one. This child is in and out of the hospital all the time with asthma and has been in the hospital with us more than he's been in the home with the family. But look at this." She pulled the child's shirt up to show the scars all over his back. The scars were at different stages and all about one-half to three-quarters of an inch long and about the thickness of a line. The newer ones were long blisters that had liquid in them. I asked what happened.

I was thinking it was some sort of weird chicken pox because nothing that I have ever seen could have given me an idea of what this was. The nurse told me, "This is the way that they treat the children when they go home. It's to drive out the evil spirits that are causing the illness. They take a wire, like a paper clip or the edge of a coin, heat it, and then touch it to the child's skin."

On that same visit we had a chance to ask a lot of questions on health care. What did they do for public health? Did they have public health? And the answer was basically no. Because the country has plenty of money, the money goes to treatment. They have these little stores—there was even one in the hospital compound—that are like our convenience stores, or the old "mom and pop" store. They are literally one little room with two of the four walls holding a variety of odds and ends for sale, like canned goods. On the other two walls would be sugar cubes. People would buy sugar cubes and hold them between their front teeth and drink their tea through the sugar cube. Needless to say, there's a lot of missing front teeth in Saudi. There is also a high rate of diabetes, according to the Americans who lived there. They said that it wasn't unusual for Saudis to have their own dialysis machines. The government would pay for the technology to treat diabetes but not for diabetes education or prevention.

Saudi Arabia was the most closed country imaginable. The expatriates there could not have anyone come visit them except immediate family members. They could have brothers, sisters, parents, or children come, but no one else. When their children reached high-school age, they had to leave the country for school. Expatriates were not allowed to attend high school in Saudi Arabia because the government did not want foreign teenagers there. If the expatriates stayed there while their kids were teenagers, most Americans would send them to boarding schools in Europe or back to the United States for high school. They were allowed to come home for Christmas and summer vacations, but they were not allowed to live with their families anymore.

When the Scud missiles would land in Saudi Arabia, there were never any casualties according to the Saudi media. Those Scud missiles never killed anybody. They would land on "empty houses." At least that was what the news reported. What the government didn't want in the news didn't go in the news. They were very absolute.

I have saved the stories about the patients for last. The Iraqis came to the ward, and they were absolutely terrified. We had an interpreter assigned to us from Kenya who was very good. He spoke Arabic (the language for the whole Gulf area) and very good English. He would go with me when I visited each patient as they were admitted. I usually introduced myself and made sure they understood that I was the highest-ranking military person there, that I was their nurse, and that while they were there, they were patients and we were health-care providers. They were not soldiers and we were not soldiers, and we were there to take care of them and give them the very best care that we could. That was our way of thinking.

The Saudi Arabians really didn't feel that way, because we were in their hospital. I had a burn patient who should have been down in a burn ward, and I had orthopedic patients who should have been in orthopedic wards, but they were not allowed anywhere but on our EPW ward. I could speak for us as a staff and tell the patients, "We respect you as patients. What has happened before and what will happen in the future, we have no control over. But while you are here, you will be given the best medical care that we can possibly give you." Eventually we heard things like how they were told that they should never be taken alive and that if they were taken alive, the Americans would torture them and kill them. I guess they thought they were there for medical experiments, because they were scared, so we reassured them. Of course a lot of my medics were their age. They were young too, and so they would develop a rapport with the patients. My staff was excellent. They were very good with the patients. It was kind of the old-fashioned open wards where you might have six patients in a room. It took a while to gain their trust, but we did a good job taking care of them. They were then sent to specialists all over the city for eye or limb repair or whatever was needed.

They had some interesting things to teach us. When the truce was called, the Iraqi patients

would say, "You must kill Saddam Hussein. You must kill him!" We replied, "We can't do that. The war is over, and we're not going to do that." But they kept on insisting that we do it. I asked them why they said that, and they answered, "Because we can never go home again. We cannot go back to Iraq because if we do, Saddam Hussein will kill us!" When I asked why, they said, "Because we were told not to be captured." I told them, "You guys are not the ones that surrendered. You didn't surrender. You were unconscious when you got picked up." These severely wounded men replied with desperation in their voices, "It won't matter. We were told not to be taken alive, so we will not be allowed to return to our families."

I don't know what happened to them. I've looked in the papers at different times trying to find out what happened to them. Did the Saudis keep them as EPWs? Did the Saudis allow them to stay in their country? I can't imagine that, but did they get sent back to Iraq? If they did, what happened to them then? I don't know. When we said to them, "We can't kill Saddam Hussein. The war is over, and we're at peace now," they told us, "Well, get the Israelis to do it."

When I first got there, I talked to one of the little boys that I told you about who needed a transplant. He was not sure how he felt about the war. He was not against the allies but he kind of thought that it wasn't good to fight against the Iraqis because Iraqis were Arabs too. This was very confusing for him. We were always trying to convince him that we were the good guys and that Saddam Hussein was really evil. Now at the time, Israel was not a part of this conflict. They were affiliated with the allies and were even suppliers for the war effort. The night came when the Scud missiles hit Israel completely unprovoked. I went in the next day, and I said to our boy, "Well, now what do you think? Aren't we right about Saddam Hussein? Look at that bombing. What do you think of that missile attack on Israel?" And he looked at me, completely serious, and said, "Well, at least Saddam Hussein did

something right." The hatred in that part of the world is just unbelievable.

Anyone who was Jewish was counseled to have their religious affiliation taken off their dog tags in case they were captured. I had a friend there whose brother was studying in Israel through the University of Michigan. We were able to call the United States easily, so she would call Michigan and then they could then put her through to her brother. She did that, but as soon as the operator answered in Israel and it was obvious that was where it was, the call was cut off and she could never make that call again. Somehow the Saudis knew, and there was no contact allowed with Israel. It was interesting because if you had Israel stamped on your passport, you weren't able to enter into an Arab country. The expatriates who were there and wanted to visit Israel only visited on their final trip home.

All the Christian chaplains who wore a cross as their military insignia were told they had to remove it while in Saudi Arabia. The International Red Cross symbol is a red crescent there because of the Crusades. Those people do not forget. If they do not allow crosses because of the Crusades, why are they going to forget what happened in 1946? They're not going to. All of the American Red Cross and the navy hospital ships that went to the Gulf wore a red crescent, not a red cross. The international organization's name is the International Red Cross and Red Crescent, and the reason is that they will not forget the injustices that were done during the Crusades. So they are not likely to forget something that happened a mere fifty or sixty years ago. When people think there will be peace in the Middle East, I'm a fatalist. I just say, "I'm sorry, I don't see that happening because these people never ever let go of a grudge. They cannot forgive."

As far as taking care of the patients, they were very cooperative. Most of them were very low-ranking foot soldiers. We asked them why they had joined the military and they explained that the soldiers had come to their homes and asked them if they would like to join the military.

Then they explained that they would kill their wife and children if they didn't want to come, so they joined. And that's how they told it.

There was one gentleman who might have been an officer or a higher ranking enlisted Iraqi who actually had scars from wars with Iran. He was a career military person, probably the only one we had, and he had this strange wound. Now I've taken graduate-level anatomy and physiology, and I never could imagine what caused this strange wound. It didn't affect his organs, but it was all in his muscle tissue. It was as if somebody had taken a scythe to the side of his body. It was some kind of shrapnel injury. We had a lot of those kinds of wounds that we had to pack and take care of, and I hadn't done bedside nursing for years. I did some there, but my staff worked extremely hard, and they did a good job.

We also had one Iraqi civilian who had been a taxi driver. He said he was driving his taxi in Baghdad with his sister when they were hit by some sort of mortar or missile or shell. His sister was killed, his taxi was destroyed, and he was burned terribly. He found himself lying on the road and was picked up by Americans and put into the American medical system, which he was sure saved his life. He became an enemy prisoner of war, even though he was not a soldier, because there was no place else to put him. I have to hand it to the GIs who picked him up and put him into the system and to the people who kept taking care of him too. At some point they could have shipped him back or just left him on the road. He was terribly burned to the point where it took four of us at least two hours to change his dressings every day, and that was only after we got good at it.

I did not take a patient load, because I tried to help with all the patients so I would know what was going on with all of them. The first time we changed his dressing, I chose to be a part of that team, and I got the interpreter to come into the room. I told the interpreter that it was important that he be there for a good share of the procedure to explain to the patient what we were

doing and why and try to get his cooperation as much as possible. Again, the pain management was horrendous, and we medicated him with whatever we could get, but it was not enough. It was a bad situation. We were changing his dressings, and partway through this incredibly painful procedure he said, "You take better care of me than my family would." When we finished his dressings, he offered me his son in marriage! He also said that I could come to Baghdad where he would give me a ride in his taxi and give me pork. We thought that was the funniest thing, but because they don't eat pork or pork products and they know we do, so they somehow think that pork is very special to us. He would go out illegally to get pork to give us.

On this same day, partway through changing the dressings, one of the other medics came in and said, "Colonel Walther, this patient that you changed the dressing on this morning is really complaining, and I don't know what he's saying. I don't know how to help him, and I don't know if it's the dressing or if something else is going on." I was kind of feeling bad because I was the who changed his dressing. I was working on another case, but I told the medic that I would be there as soon as I was done. Evidently the patient kept complaining, and nobody could quite figure out what he needed, and of course I was tying up our only interpreter.

The interpreter that day was not the one from Kenya. He happened to be a Kuwaiti citizen who was married to an American. He was visiting his in-laws in North Dakota when the war broke out that summer, and he could not return to Kuwait because of the war. He did not know what had happened to his family, his business, his home, or anything, but evidently the American government made a deal with the Kuwaiti government. The American government said, "Let us put your citizens into our military to serve. We'll give them a high enlisted rank, and we'll pay them." We all suspected that they were making as much as an American general by

working as interpreters, since the Kuwaiti government also paid them. They could be used in any place because they were very fluent in Arabic, and since they were in the United States when the war broke out, most were very fluent in English.

This interpreter was a great guy, and he wore an American uniform. His name was Abdul, but he went by Abe in his American life. Abe went with me to see the complaining patient. It would always confuse the patients when they would see an Arab in an American uniform, so I told Abe to explain who he was and what he was doing and ask the patient what was wrong. So Abe started talking, and even though I did not know the language, I could still hear familiar words. I could hear him say his name and my name, and I could hear him ask questions.

Then Abe gets into a discussion, and all of a sudden the patient starts shaking his head, saying, "No, no, no, no!" The patient started to weep. So I said, "Whoa, what's going on?" And Abe said to me, "Well, when I told him that I was from Kuwait and that I was here to help him, he said he just cannot let me help him because the Iraqis have done terrible things to my country and to my people and to my land, and he can't accept this help from me." Here was a man who in the morning had to bite on a towel for pain management when I changed his dressing, and now he was weeping because his enemy is offering to help him.

I had to shift into army mode and say to the interpreter, "Look, you tell him that we're here to help him and I'm your commanding officer in this situation and you have to do what I say, so you're going to do it." So the interpreter got this different voice and said it, and we found out that the patient wanted his bandage adjusted, which we did, and all was fine. We walked out of the room, and I said, "Abe, how do you feel about that? You don't know where your parents are, you don't know what's happened to your business, you don't know what your life's going to be like, how do you feel about helping these Iraqi

patients?" And he said, "You know, the Iraqi soldiers don't know what's really happening. It wasn't their choice. They hardly have an opinion about it. They're not like American soldiers. American soldiers all want to tell Schwarzkopf what to do. American soldiers all think they know exactly what's going on and exactly how it should be done, but the Iraqis aren't like that. They're victims just like I am, and so I have no problem helping them. It's true that when I took this job I thought I would be interrogating prisoners at war. I didn't know I would be working at their bedside, but it's okay, I can do this."

When I came home, I told a really dear friend of mine that story, and she said it reminded her of Romans 12:20: "Therefore if thine enemy hunger, feed him; if he thirst, give him drink; for in so doing thou shalt heap coals of fire on his head." Now I'm not saying this is vengeance, but at the same time it doesn't say if you do kind things to your enemy, he'll do kind things to you. Or if you do kind things to the enemy, you'll be blessed. It says, "for in so doing, thou shalt heap coals of fire upon his head." And I saw the coals of fire heaped on this guy's head when he was weeping. He had been wounded, I saw daylight through the calf of his leg, and I could change that dressing with him literally biting on a towel and taking Tylenol, but when the Kuwaiti citizen offered to help him in his pain, he wept. So dramatic! That was probably one of my biggest learning moments. There was a lot of learning that happened gradually during those four months, but that one was a dramatic lesson in five minutes.

The Saudi Arabian doctors would determine when the patients had to return to the prisoner of war camp. We developed a wonderful relationship with these patients. Now remember, I had only been there a couple of months, and these guys were treated and evacuated while we were still there. When the first group left, they were lined up and handcuffed to be transported to an EPW camp. As they were leaving, they shook our

hands, including mine. A few of them shed tears as they left us. I couldn't help but feel that maybe they were tears of fear for where they were going, but that wasn't the moment for those kind of tears. I realized that they were actually saying good-bye and crying.

I can't help but think that one benefit of war is getting to know people. When I was a child, my father worked for the federal government, and we lived for two years in Milan, Italy. Our maid was married to a man who had fought in World War II, and of course my father had fought in World War II. And I thought, even as an eleven-year-old, how odd it was. Here these men had fought on different sides of the war. The husband, Gildo, was an enemy, but he just loved Americans. It was so obvious. He loved us, and he would come and talk to my parents about America. He had been a prisoner of war and at the time had eaten better than his family who had been left behind. He was actually taken to the United States as a POW and had been left to work on a farm. He loved America, he loved Americans, and he had nothing but positive things to say about being a POW.

What was the reason I was chosen to be the head nurse of the EPW ward? It was an incredible experience for me because I was allowed some wisdom to help my staff cope, and I was blessed with truly excellent staff members who were willing to work with a "brotherhood of man" attitude. When I look back, I can say, "I know there were forty prisoners of war that left loving Americans. I know there are forty Iraqis that knew Americans loved them." I know that the whole experience that we had was for a reason. I preached the gospel in my own little way in a country where the expatriates couldn't believe that I didn't get sent out of the country for doing so.

Well, I'm divorced. I came back from the Gulf in 1991, and my divorce did not take place until 1999. I'm not going to say that the war was a direct cause of my divorce, but it certainly added to the stress of the relationship. I think one of the

most difficult things is it changes the family dynamics completely when someone is mobilized. It happens especially when you're a reservist. Even though you know that the potential is there, it's not like Mom or Dad are on active duty and they regularly and routinely go six months to Okinawa or they get deployed for short terms on a regular basis as an expected thing. When a reservist who has been in the reserves for twenty years and has never been mobilized is finally mobilized, there is no practice for that scenario.

So now we had a change in our family dynamics. I can remember sitting at the dinner table after we were told of our mobilization. We were talking to our children, who ranged in ages from three to fifteen years at the time, and one of the school-aged children said, "Well, Mom, [we were reassuring them that Dad was going to stay at home to take care of them] who is going to make money if Dad's staying at home to take care of us?" When I told her that I would be paid, she asked, "Can you make enough money?" I replied, "I make more money in the reserves than your dad makes in his job." It was a foreign idea that Mom could make money too. Our dynamics changed immensely because now I was making the money and Dad was at home. He wasn't as good with money as I was. Financially, things didn't go as well as they could have. I think my husband did a good job, and I think his heart was in the right place. I do believe that he really loved his children, and I think he tried very hard to stay organized and make sure that they had the care that they needed. Physically he took good care of them.

My then-fifteen-year-old is now working on her doctorate in sociology, so she has all kinds of interesting insights into family dynamics. I think that as a child she felt a huge burden, especially spiritually because she took all the kids to church then by herself. Their father did promise to make sure that they got to the church, so he would drive them to the church, but he didn't go with them. She had this role then at this very young age to get these kids to church, and I'm

assuming she was also making sure they were dressed appropriately.

The second daughter found time to rebel. She would sneak out and do some of those petty shenanigans that adolescents do since I wasn't there to keep a close eye and to be as strict as usual. My husband did write me a letter while I was over there, and he said, "I will tell you the area that has gone down. I've been able to keep track of everything, but I cannot keep control of four kids at school and still take care of this three-year-old at home. I just have to accept that I have my limitations." So that was tough. He did realize what a hard job it was and that he was not super good at it. I think in some ways when I look back, he had some of the same reactions that housewives have, like, "Why don't I get more recognition for what I'm doing?" I got all the glory. I came back and I got the homecoming and the kudos and that sort of thing. I'm sure there were people who said to him, "Well, what a good husband you were to do that. What a good dad you were." But it wasn't as visible. Nobody asked him to give talks or speeches. Because he wasn't a member of the Church, he was very negative about receiving offers made by the ward to help bring in food. I think he felt that it was like they were saying that he couldn't do it, whereas he could have just kicked back and taken some of the help that was there for him. He wasn't comfortable letting people serve the family, and I'm sure it had something to do with his own relationship to the Church as well.

Before I left, the ward had let me know they would be supportive. I think it was more of my friends in the ward that were supportive because it wasn't an organized effort. There was a member of the bishopric who gave me the counsel and advice that I needed. Back then, the Church didn't make brown garments for women, but they did for men. So that meant I was going to have to either wear my white garments and a brown t-shirt on top of it and then my army long sleeve jacket in the desert, or do something else. Additionally, because the military didn't know

where we were going initially, we were told that white was not a good color to take because that was the color reserved for royalty. We might be hanging our clothes out to dry in a village or someplace where that would not be seen as appropriate.

When I talked to the member of the bishopric about this, he said, "Let's use common sense. First of all, there is nothing wrong with you using a man's shirt." As far as the pants, he said, "Why don't you go ahead and dye them if it's a matter of not being able to wear white." So I went ahead and dyed them. He was a very smart man, and I thought that was very good counsel. I truly don't know what all the military women in the Church do about these things. I don't know what the percentage is of the female members of the Church in the military. I do feel like I had plenty of support from individual people in the Church acting in official and unofficial capacities such as the group leader who took care of our spiritual well-being, the counselor in the bishopric who gave me good counsel, and the Relief Society officers and presidency who wrote to me. In fact, they sent me taped Relief Society lessons. My children had good teachers at church, so that was all in place.

I think I felt a little forgotten by the Church as a whole; that is why this project is exciting. There is so little written about women in the military. There is so little counsel given to the women in the military. It's like the guys from the Salt Lake unit who were bearing their testimonies in Saudi Arabia. Women in the military were invisible to them.

I have had people say odd things to me in relationship to the Church and the military. In the military, I had people who got to know me and would say, "I've known Mormons before, but you're not a regular Mormon, are you?" It made me want to say, "What have I done that would make you think I'm not a regular Mormon?" I said no to the coffee at lunch, and I said no to the beer that was passed around the officers club, and yet they were saying that I wasn't like

the rest of the Church members they've known. What does that mean? I am a card-carrying member. I have my temple recommend with me at all times. I am as doctrinally sound a member as you will ever find. But maybe what they were thinking was that I am not as culturally a Mormon as other people whom they may have met, perhaps because I'm not from a member family. When I talk about my parents or my extended family, maybe there are things that I say that aren't what someone who had grown up in the Church would say. And I don't have pioneer ancestors. I am the pioneer. So maybe there is something about Latter-day Saint women in the military that creates a doublethink for some people. I think it has to do with the cultural perceptions about what a woman should be or what she should not be. Perhaps a Latter-day Saint woman in the military seems incongruous to people.

There's another thing that is really weird. I used to always dye my hair. When I got to Saudi Arabia, I found the same color, but my hair became lighter than ash brown. I was using the same color on my hair just to cover the gray. When I came back, I had someone say to me something about being a blonde, and I said, "I'm not a blonde." And they said, "Yes, you are." I guess I was blonde by then. Before I left, the Miss Clairol shade that I was using kept my hair very dark, but when I came back, people would say I was a light ash blonde. I guess my hair got lighter from the stress or situation.

One day I saw one of my interpreters from Kenya walking across the compound, and his wife was completely covered like an Islamic woman in Riyadh would be. She was totally covered in black, and she was walking about six steps behind him. When I saw him on the ward, I said, "I saw you walking across the compound with your wife. Why did you move here from Kenya?" He said, "So we could live the religion in a more pure form." "How does your wife feel about that?" I asked. His response was, "Oh, she's fine. This is a good place for us to be."

Then I said, "You know, the hard thing for me would be that I would not be able to have any male acquaintances. I wouldn't be able to have any men that were just my friends. I wouldn't be able to work with men. That just seems so odd to me." And he said, "Well, that's the way it should be. Men and women should not be friends because that's not appropriate. You should only be friends with your spouse. That's the only person of the opposite sex that you should have anything to do with." But I said, "Look at us. We're friends." And, oh my word, you would have thought by the look on his face that I had just made some horrible sexual innuendo because he just looked at me and said nothing. We were interrupted then, and we never returned to that topic. I would have loved to know what he would have said. He gave me a big, beautiful Koran before I left, he spoke with me, and he talked to me about his family, so he did consider me a friend. But maybe a part of it was that I was gender neutral. I had a uniform on.

When I came back, I went to work up at the army for a couple of weeks. We got out in such a hurry that we weren't going to have medical coverage, so I said I'd work up there day to day as much as I could since my husband didn't have a job. He quit his job because we thought I was going to be gone for a year. I asked for as many duty days as I could. One of the things I did was put together and file all the clippings that had come in and made copies for myself.

I got there on the night of the 13th, and then I had my vaccination, which was the anthrax vaccine. They didn't tell us that at the time, but we knew what it was. When the military wanted to give us an immunization while we were at war in a foreign country that threatened biological warfare, we didn't really care what was in it, we just wanted to get it. If they tried not to give it to me, I would have thrown a fit.

One day we had four Scud missile attacks, and I never wrote another thing on this calendar. I just said, "This is too depressing." I wasn't going

to write down things that I didn't want to remind myself of. I didn't want to deal with that.

A young man from the air force brought us some leaflets. What would happen was they would send the pilots up with these leaflets and drop them. It would say, "This is your first and last warning. The 20th Infantry Division will be bombed. Leave this location now." I mean they actually sent these out to warn the people. This was the craziest thing—the most humane war in the world. I had a problem with that because it was like our air force guys would go up, and some of them would get shot down when they were trying to warn the people that the guys with the bombs were coming the next day.

One day one of my roommates was sitting in this common area, painting her toenails, when a guy walked in and asked what she was doing. She told him she was painting her toenails, and so he asked her why. She told him, "Because when you have to dress like this all day it's nice to take off your boots and look down and see that you've got painted toenails." And he said, "Is it hard to do? What does it feel like?" Then he asked her if she could paint his toenails. So she talked to me and we decided that we would have a toenail painting party. Anyone could come that wanted to have their toenails painted. I asked Ludona to bring us a bunch of nail polish. We thought we had better invite a couple more girls because there might be a lot of guys. All these folks showed up, and we painted all of the guys' toenails, and what was so funny was that men's toenails are huge. You can draw pictures on them. So we painted all those toenails. The guys were so crazy about it. About a week later, we found out that we were going home, and one of the guys came to me, and these are grown men in their forties, and he said, "You know, when we go home, I just might have a hard time explaining my toenails to my wife. How do I get it off?" With a totally straight face, I said, "Oh, it just has to wear off." I never did tell him how to take it off.

But I think that was a real typical kind of activity that you would find because there weren't

movies to go to and there weren't companionships. We knew that we should be in a group and that we shouldn't be one on one, yet what were we going to do? Other companies would all just be sitting around on the floor trying to read a training manual because that's what they were told to do. I do think that you have to go into something like this thinking, "Okay, we all agree on one thing. We all agree that we're going to go out and give the best medical care possible under whatever circumstances we find ourselves in. We're not going to have it as bad as some people or we're going to have it worse than others." I think that even at the young age of thirty-nine, most of us were fairly philosophical about that.

The one scare that I truly had was with a medic who was about nineteen years old. He worked with me on the ward, and I had known him for a long time because he was in the reserve detachment a year before, but he wasn't that much older than my own kids. My oldest was fifteen. He was a 91B, which is a field medic. Now when the military came through and asked for volunteers for field medics, he asked me, "Do you think that I should do that?" And I said, "No, I don't think you should do that because that means you go out into the fields with the troops, and I don't know if you're well-trained for that and you are needed here, so I think you should stay here and help me."

Well, he passed it up then, but they came back again when they needed more volunteers. This time he decided that he really wanted to go. And I said to him, "You don't want to do this. They're not giving you orders. They're just asking for volunteers." And he said, "I really think I should do this." Now here was this young man who probably wanted to do what was right and wanted some glory and thought that since everyone else was going, he shouldn't be the wimp and not go. So he went out with the people in the field, and I think that was my most maternal moment. I felt the most nervous about that.

They came back about a week later, and he came to me and said, "I will do anything, *anything*, if you get me out of this." So I told him, "From

now on, you will take all my advice and never doubt me again." And he said, "Yes, ma'am." So I went to the company commander and told him that if anyone else volunteered, they could take my medic's place because he was ready to come back and work with the EPWs. And he said okay because he knew we were a lead group, and he wanted to keep my people happy. If somebody wanted to work with me, they helped with that sort of thing. This young medic of mine said it was a grueling experience. I don't think he saw action, and I don't think that was an issue for him, but I think it was the tension, the dirt, and the heat that did it. I cannot describe to you what the desert is like. Of course I haven't spent much time in a desert, and maybe this is common, but I thought it was going to be sand. I'm from the beaches of the Oregon coast, and I'm thinking sand, but the desert was like talcum powder. It was the same consistency as talcum powder, and it was everywhere. It would get in our mouths, our eyes, and in our ears, and that was just while standing and waiting for a bus. We had a place to shower every day, but we had to be like that for many hours.

The other thing we did over there was a mass-casualty exercise. We did moulage with whatever we could find: ketchup, toilet paper, or Vaseline. We made it incredible. I felt like a real moulage artist because we did it without the goodies that are usually in a moulage kit. These mass-casualty exercises were really good training for people because we didn't know how long we were going to be there or what kinds of things we were going to see. Even though we would be on duty for twelve hours and then off twelve hours, there was still time to do training and give people things to do. When the helicopters came in for the training exercises, our surroundings became black. We couldn't see our hands in front of our face because of the dust rising in the air. We could hear them, but we could not see even our hands. We didn't dare move for fear of getting mowed down by the helicopter blades.