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TRANSCRIPT
OF
ORAL HISTORY RECORDING

S01630

Ann Christine Lee (neé Wright) as a lieutenant nursing sister 1st Australian Field Hospital, South Vietnam 1970-1971, interviewed by Lynn Hemmings

Recorded
at: Dalkieth
on: 23 October 1993
by: Lynn Hemmings

Description
Nursing training; joining Army; working in Intensive Care Unit in Vietnam; efficiency of Triage; quality of medics; stress; burns injuries; quality of soldiers looking after their mates; discrimination and sexual harassment; leaving Army after returning from Vietnam; "nurses first Army second"; relationship between nurses and patients; use of anti-malaria drug Dapsone and links to cancer; comparison between Australian Army and US Army methods of handling wounded; comparison between Army nursing and civilian nursing; welcome home parade; leaving nursing.

Transcribed by: C.L. Soames, May 1994

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Transcript methodology

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Identification: The interviewer is Lynn Hemmings and I'm interviewing Ann Lee at her home in Dalkeith, Perth, Western Australia. The date is 22 October 1993, and the interview is part of the oral history project of RAANC nurses who served in the Vietnam War.

The way that I normally start is just by asking where you did your nursing training.

Royal Brisbane.

And how long did you ...

It was when we did a four -year training, and the last year was more or less staffing.

How long was it between finishing your training and joining the army?

I actually signed up before I finished training, and then I had sort of a six weeks holiday - or six or eight weeks - and then started, much to my mother's horror.

Why was that?

I just rang one day and said that's what I'm doing when I finish training, and she said, 'What?' I said, 'I've joined the army' - she just hung up. So I gave her a couple of days to cool off and then I rang her back.

What was your reason for joining the army?

I don't know. There was a lot on about the army and that at that time, with Vietnam going, and it just appealed to me.

Did you join with the hope of going to Vietnam?

Yes.

Was that a reason for joining?

Yes.

How long after you were in the army that you went to Vietnam?

It was almost two years.

Did you make it known that you wanted to go to Vietnam?

Mm. But the first team was up there when I joined, and they didn't come back for a few months. Then there was another team. And I actually replaced Yvonne Werndly because she got hepatitis. So I was over here on holidays, went back, and they said, 'Pack your bag, your gone'.

Was it considered to be - not a prize - but was it something that most people wanted to do, most of the nurses wanted to go?

I think a lot of them did, but there were girls there who didn't care one way or the other.

Do you know how they selected who was to go?

No. I think we did have to fill in some forms at some stage, you know, your preferences, whether it was Singapore or Vietnam or - I'm not sure if New Guinea was on it - I remember there was Singapore and Vietnam.

What area of nursing did you work in when you were in Vietnam?

Intensive care.

Had you had training in intensive care?

Only as a student - it wasn't called intensive care, it was called respiratory unit - they were all ventilators, those great big old instruments, things the size of a bed. I think we had about eight of those. And then before I finished training I did about another eight or twelve weeks neurosurgery - neurosurgery intensive care.

What are your memories of the actual nursing that you did in Vietnam?

Once the patients got into intensive care it was basically the same as anywhere else. I'd never done any casualty work, except in the army, and triage was - that just worked so well, it was just so well organised, it was fantastic.

Who did the triage? Did a nurse do it or one of the doctors?

Organised it?

Yes.

I don't know, it was up and running when I got there, and they just sort of had this great big room with stretchers and big benches behind. They were all ready to go, all points stations were ready to go, and you'd get the radio message to say how many were coming and you would just start the drips running with the penicillin in them, and a drop of morphia, and you'd just be ready to go when they ... And it worked so well because they came in - the boys would be there from the clothing store, and they just cut all their clothes off with big scissors, straight the way up - lift them up and you'd have a look at their backs to see that there was nothing wrong there, put them back down again, and then put in a CVP. As they stuck the needle in for the CVP they'd draw off a sample of blood, and they guys from the blood bank would be standing behind you and they would give you a bag of [Onique]; so they were up and running while they went off to cross-match. That worked really well.

Do you remember your first dust-off?

No, I don't know which was the first one, no. Haven't got a clue.

Was it stressful when you knew that the men were coming in?

Presumably you knew what was coming in, you just didn't know what was going to come through the door.

So even after you had been there for quite a few months?

You just didn't know what was going to come through those doors. Some of the jobs that the medics out in the field did was just amazing when you think a lot of them were just national service guys. We had one boy come in that kicked a rocket, and the mess that would be, and the had knots tied in his femoral arteries because there is nothing else this boy could do but tie knots in his femoral arteries. I wouldn't have thought of that.How he found them to start with is beyond me, and then to tie knots in them.

I've often thought it would be really interesting, actually, to talk to the medics because it seems that they did amazing jobs.

They did an amazing job, they were just brilliant, just brilliant. We found it quite stressful going to triage, but the job they had must have been a hundred times worse, and we'd had three or four years, or five years, in nursing - or more - and the ones in national service had been in about two years or less than two years, doing something they'd probably never done before.

They didn't necessarily choose to do that, did they - to be a medic?

I don't know. I think they had a choice of- they all did the same basic training, then I think they had a choice of corps and what they wanted to go in, whether they actually got into it or not - they they'd do a six months' corps training. We used to have medics going through all the time back in Brisbane training, and they'd spend half the day in a ward and half the day in the classroom.

When you said it was fairly stressful there, how did you cope with the stress? How did you manage the stress?

I think, just at the time, until I saw the patient that I had and saw what was going on, it was waiting for it to happen was more stressful than when the guy actually got there because everything was such a routine, you did all the same things and everything was ready to go. I remember one day we got the call for a dust-off and it just took ages - because it usually only took about twenty minutes for them to get there, and this was two hours we were standing out there waiting for them. That was, you were all watching because you could see them come from miles away and they just weren't coming. They got there.

Did you feel under pressure during the twelve months?

I was only there for about three and a half months.

Right. So you just went to replace Yvonne, and then ...

Well, then I got sick and I came home. It would have been alright, I think, but Nell said no, no, you've got to go home - okay.

So had you gone up there expecting to be there for the twelve months?

Yes.

How did you feel about coming home early?

I didn't like it at all, but anyhow, that was that. That handling of the stress - I don't know - once they were there and you knew what to do ... The only day - I just hate burns, I just hate looking after burns - and I'd done my six nights of night duty, and I was in the shower this afternoon and someone - I think it was Lorraine Potts actually - said, 'Is that you Ann?' and I said, 'Yeah'. She said, 'Think you are off, don't you?' and I said, 'Yeah'. She said, 'Well you are not', and I said, 'Why not?' and she said, 'You and ...' - I can't think of the Kiwi girl's name - '... have got six burns down the office ward'. I said, 'I don't want to go down there, I don't want to look at burns, I don't want anything to do with burns' - but they weren't too bad. Say 'burns' to me and I just think, oh, gross - hate it. Until you got down there and saw them, they were great.

What are your memories of the soldiers?

They were fantastic, they were just really great, and they stood by their mates - they were really, really good. They always had a sense of humour, no matter what was done to them, they were just 'Yeah, she's right, Sis', you know. Their mates are fantastic because you'll get one injured and in intensive care, and you could bet the next day his mates would be there, hell or high water. If you were working on the wards at visiting hours the place was packed; you'd go out to go down the ward and you'd come back and there were all these rifles and things under your desk because they weren't allowed to take them into ... machine guns ... 'Come on guys, it's only a joke.' I think the support they gave the patients was just brilliant.

When I first started doing this study I read all of the work that had been done on nurses in Vietnam, and there was nothing really in the Australian literature; but the American studies - I don't know if you've read anything ...

Just one.

... that has come out from America, but they really concentrate on post traumatic stress syndrome in terms of the nurses, on sexual harassment, and on sexual discrimination. So, just in your experience, do you feel at any time that - maybe start with sexual discrimination - that you were discriminated against because you were a woman in an all male arena?

No, I think we were treated like gold because we were women in an all male arena. I mean, they were just fantastic. I think the Australian army, being a lot smaller than the American one too ... Even back in Brisbane your medics and that ... I'd always go on duty in the morning - I had these two real characters - you'd walk in and there'd be a tin of pineapple juice and a vitamin tablet sitting on your desk, and they'd be standing there looking at me. I thought, alright, I'll take my vitamin tablet and drink my orange juice, or whatever it was - 'Now we'll have a good day,' they said. They were just great. And if we were having a formal dining-in or anything the patients would say, 'Bring all the silver up and we'll polish the silver. Didn't do a very good job of your shoes, bring them round, we'll show you how they're done.' And all this

sort of stuff. And when you did have a formal dining-in, they'd want waiters and stuff, the medics would just volunteer like crazy. They were always - I just found it was a very sort of family orientated - and the other girls and that, we'd all sit round together. I think possibly too, because there was only about twelve or fourteen of us, whereas when I was a student nurse we had 900 student nurses, so you went from being some little speck in the distance to sort of being a member of a small community. It was much, much nicer.

No, I don't think we were discriminated against at all.

And no sexual harassment?

No.

That's the story I'm hearing from all the Australia nurses, but it's really different from what you hear happened to the American nurses.

What about when you came back, do you feel that you suffered, either physically or emotionally?

No. After I came back I think it was the 8th Battalion came through Brisbane and I went to see them march past, and some of the boys who had been patients were there, and they rubbished me just as much as they did when I was up there. And then I was doing - went back to Brisbane - I was working in neurosurgery - and for some reason, I don't know why, they put me in charge of a medical ward while the sister went on holidays, because me and medicine - oh God! – 'What am I doing up here?' I went to work one day and they said, 'There was a nice young fellow with a limp came in to see you last night. Who was he?' I said, 'I don't know'. They said, 'He'll come back tonight because you are working' - it was actually one of my old patients, and he knew I was there - I don't know how he knew I was at Royal Brisbane - and he had a mate down in the orthopaedic ward. So he tracked me down and came up and saw me.

He was a bit of a character because he had a very small injury, but he must have been thrown up and thrown down because he got the DIC (Disseminated Inttravascular Coagulation) on a soft tissue injury, and ARD (Acute Respiratory Disease (or Distress))- they used to call it Da Nang lung then. So this kid had a little bit of shrapnel and done a tendon in the back of here, and a bit of shrapnel here. Wound up on a blower in ICU in Vietnam. His wife was due to deliver back here, and the medevacs back to Australia were every second Monday, but he wasn't well enough to come back when this baby was due. But he would be well enough on Thursday or Friday. I don't know whether it was the medics or some of the other guys - I don't know - whipped round the other boys who were due to go home and said would you mind waiting till Thursday, and they actually held the medevac up for him from the Monday to the Thursday so this boy could get on the medevac home to be home when the baby was born.

When I came back to Brisbane - I was working back at Yeronga - and there was visiting hours and there's this racket - because they are not actually sick, they are just tied to beds - it's bedlam, I'll tell you - and the noise level is unbelievable. All this noise in the middle of the ward, and I went there and said, 'Come on guys, quieten down', and this kid - I didn't know he was there, he had his back to me - and he said, 'Yeah, you'd better be quiet because if you don't she'll slit your throat, look what she did to me' - all these visitors, you know - some women there too - and they are looking at this kid and looking at me (inaudible) - I'll get you.

That's the sort of thing they did to you all the time. No, they were great.

How long did you stay in the army after you left Vietnam?

Only a couple of months.

So the reason you came home wasn't linked to anything

No.

No illness that you contracted in Vietnam?

No.

So did you leave the army early, or did you just stay for the required length of time?

No, I left early because I would have had to sign on again. My brother made up for it, he was national service and got out a couple of years ago.

Did he?

Because I was in Vietnam and my mother wrote and said your little brother has been called up and I thought, great. Being a pharmacist his chances of getting injured weren't great - he didn't go to Vietnam.

Oh, he didn't go to Vietnam?

No. He went to New Guinea and he ended up in Canberra, after being in Melbourne, Brisbane and a few other places. He did a lot of flitting around, Canberra and North London, the States and London, building those big mobile hospitals - you know those containers?

Yes.

I don't know what he's doing. But now he is out of the army - he and his wife are both pharmacists in Canberra.

Because of your time in Vietnam, how would you have felt had he been sent to Vietnam?

It wouldn't have worried me too much because being a pharmacist he's not going to be out in the field somewhere - but Trish was beside herself the whole time because she was up there and Pete was up there - her younger brother.

Is this Trish Ferguson?

Ferguson, yes. Every time there was a dust-off and it was the tankies - and quite often it was the tankies - she'd just get beside herself because she knew quite a lot of them. Even if she knew it wasn't Peter it could have been somebody she knew, and she used to just get really upset. So they tried to keep her out of triage and stuff like that.

Did you talk much about your time in Vietnam when you came back?

Yes, yes, I still talk about it quite a lot, the things the boys did. I was actually talking about it the other night - can't think what it was now, something funny I'd done. But even the medics you got in intensive care, on their first day on they were making the beds and I said, 'What are you guys doing? They didn't teach you to make beds like this'. What they used to do, they used to put the top of the sheet just to the top of the bed and tuck a mile in down the bottom.

Why did they do that?

Watch this - every time they (inaudible) the bed they'd take all the sheet out and (inaudible).

Never heard of that, it's quite a good idea, isn't it?

(Inaudible)

Did you put a stop to that?

No.

Did the nurses have much control over what the medics did?

Oh yes, you did, but I think most nurses were sort of - we were about the same age, anyway, as most of the medics. It was more a routine type of thing. The only nurses that got into trouble with medics were the ones that tried to bully them; the boys would just did their heels in and that would be that. But I didn't see any of that in Vietnam - saw it back in Brisbane with one of the girls we used to have working in my ward. And you just knew, if she was on the weekend you'd come back on Monday and the nurses would be upset, and the medics would be shitty, and the patients would be. You'd just think, oh Lord! Even Matron used to say to me, she'd say, 'I don't come round here till you've been on duty for at least an hour - it gives you time to clean up the mess.' 'Thank you.'

One of the things you said before was - and the other people have said to me - that the nurses put nurses first and army second.

Yes.

Was that true?

Oh yes ... yes, definitely nurses first and army second sort of rule, well, that's alright for the boys, but you do it our way. Some of the older ones who'd been in a long time were much more military minded than what we were. I mean, even marching. We had to go to Healesville, to the School of Army Health to do this, to teach you to march - military law and all - I mean, it's just laughable. We just stuffed our faces because that's where the Catering Corps did their final exams too. We were so fat when we got back. But marching: I can still hear the RSM trundling down the road behind us saying, 'Ladies, slow down; slow down ladies', because we all marched too fast, much faster than the boys do.

Because you were nurses you were probably used to walking really fast.

So we never did anything quite right. No, it was great. I keep telling my daughter, ‘Duntroon's waiting darling, Duntroon's waiting.’

So you would be happy for her to go into the army?

Oh, well, I keep telling her it's the only people that are going to make her pick up her junk off the floor and tidy her room. It would suit her down to a tee, absolutely. She told me the other day she was going to be in the army during the week and a nurse on the weekends; I said, 'I don't think it works that way, sweet'.

Is she going to do nursing?

Oh look, she's eight years old, she changes her mind every thirty seconds.

I thought she might have been older.

No. I keep telling her she's going to PLC on Year 5 and Duntroon, Year 13.

I might do that with my daughter too.

(inaudible), she loves pomp and ceremony, and dressing up. She just loves those guys, they'd be right up her alley - can't think of a better place.

Some of the other nurses have said that they thought the nurses in Vietnam held things together.

I think that's true, I think the boys that were injured and that expected you to be there, and I think the medics were like somebody there. I think a lot of the boys, when they came in and were injured, they sort of looked on you as family; the medics were mates but the nurses took the place of mum and the sister, and all the rest of the stuff, and I think they depended on you a lot.

And did that put a lot of responsibility on to you?

No, I don't think so, I think you are used to running wards and things. The boys still joked with you and that, but I think they were really pleased to see nurses there. They were pleased to see you in uniform - they were quite happy when you were on nights and you wore greens, but during the day you wore the ordinary dress with the veil. When medevac girls used to come in, the poor RAAF girls - I used to feel so sorry for them because the boys - the patients that were going home - they'd look at these birds - 'They are not real nurses' (inaudible) - because they used to wear flight suits.

I can remember when I was working at Brisbane, we had to go up to Amberley to pick up a whole lot of these guys that had been medevac-ed home - there were three or four ambulances, and all this sort of stuff. And we'd wanted to wear jungle greens, and our CO who'd been in Vietnam said no, you've got to wear your grey dress with veils on - we thought, he's crazy - in the middle of Amberley, you know; the wind was blowing a thousand miles an hour and it was just dreadful. So we went out when the Hercs came and they lowered it down, and we walked in and some character down the back screams, 'Hey, look fellas, real nurses' - that's why you came dressed the way you did.

One boy who'd been quite seriously injured at first didn't want to come home because he didn't want his parents to see him; then the day the RAAF came to pick him up he said, 'I don't want to go with them, they're not real nurses'. And I don't think it helped any: they came in and they used to put these priority tags, like luggage tags, on the fronts of their shirts. That's what they used to say to us when these boys were going home, because even if you were off duty you had to be there when the boys' buses were leaving.

Did you?

Oh yeah. We'd all howl and the CO would keep saying, 'You are not coming next time; if you girls don't stop crying you are not coming.'

Is this in Vietnam?

Yes. The boys would be crying, we'd be crying - 'Can't we go with them?' - You used to feel a real idiot, but every second Monday, there you'd be, howling your heart out.

Did you keep track of what happened to many of them?

No.

It seems as if you had an intense relationship-

For a short time.

-for a very short time, and I guess they were replaced so soon-

So quickly.

-by very similar.

Because most of them were only there less than the two weeks because the medevac was every second Tuesday.

Are there some that you still remember, those individuals?

Oh yes.

Which ones do you remember? I'm not interested in names, but I'm just wondering why you remember some of them.

Well, there was one boy that was really quite severely injured and I was with him as soon as he came into ICU. He was one of the ones who wanted - 'Come home with me, I don't want to go with them'. You do wonder what became of him because it all depended on his family once he got back home, how well he did.

There was another young nice guy - and I don't quite know why I remember him, but I just tended to remember his name more than his face or anything else. They came over here just a few years ago. There was a thing in the paper about this little boy was putting a wreath on an

Armoured Corps - what do you call them? - and this little boy was this guy's son, and it said that this boy had died. So it said where he lived, the suburb, so I got it out of the phone book and I rang his wife. I said, 'Look, you are going to think I'm crazy, but what happened to Phil?' and she said, 'Oh, we've got photos of you'. So they obviously remembered us too; his wife said, 'He used to call you his lifesaver'. It really wasn't that bad.

Did he die early as a result of his injuries?

No, he died from lymphoma which they say was caused by the Dapsone. But then you read studies of it, the Dapsone study here, that says that isn't right, but that's what his oncologist told him, and there was the repat oncologist, because he developed a lot of allergies after he came back, and then he got the meningitis, and he was never well again, but it shouldn't have been his injuries, it had to be something else. Two years before he actually got the lymphoma I think his doctor at repat had written in his chart that I would not be surprised if this lad develops lymphoma - but then the study says no.

It's hard to know, isn't it.

But if the Dapsone caused the lymphoma in the military then why doesn't it cause it with all these people with leprosy because that's what they treat that with. Maybe it does and you just don't know - I don't know.

So you are part of that Dapsone study are you?

No, I just got a copy of it. They are putting out about that study they were doing about nurses and illnesses, and cancers, and all this sort of stuff.

Where somebody came and interviewed you, is that the one?

Well, they actually sent round a form, and then when it came to actually collating all the information they'd lost them.Yes, that sounds perfectly (inaudible) - just about right. So then somebody came round and saw me, and she brought round the Dapsone study and one of the studies on American nurses with cancer, or American nurses and causes of death post Vietnam. I think they had it a lot harder than we did.

It seems from what I've read they did.

They had much bigger hospitals. The thing is too, I think a lot of the American military, and the soldiers, are from very low socio-economic, and a lot of them are sort of borderline criminals to start with. I think that that is very stressful for them because, I think...

I know some of the nurses that used to visit the American hospitals said that in the triage area it was very noisy in the American hospitals - screaming and shouting.

Oh, they were dreadful, they were the worst patients in the world.

Whereas I get the impression in the Australian hospital it was pretty quiet.

We got the odd American patient. one of our medics one day just told him to shut up - good, glad you said it for I was going to. And they were a mob of panic artists. They brought in a

whole lot of their wounded one night without telling us they were coming, they brought them to us and we didn't have triage open, we didn't have our pad lights on, so they just about dumped the choppers down the ditch. And then, instead of waiting for us to get triage going, they brought all these stretchers down and put them down the middle of the wards - those great old Nightingale wards. We had all these stretchers in the middle of the ward, and people screaming - they brought in the dead with the wounded - it was just an absolute mess. And our chopper pilot who did a lot of our dust-offs was an American, and he walks down and he looks at this lot and he says, 'I'll be sleeping down in the officers' ward. Ring me when they've sorted this lot out will you?' - Because he had to fly them back up to the American hospital.

We had a few Americans, not very many. I remember one young officer, we had him there - he wasn't terribly badly injured or anything like that - and he was due to go back to duty he said, 'Can I stay here?' - dreadful - it was the noise.

Did you see 'Born on 4 July'?

No - I don't think I did, no.

It's with Tom Cruise and he played a Vietnam veteran, and they showed a lot of the American repat hospitals. It was really distressing to watch.

I can't remember whether I saw it or I only saw bits of it - you tend to see bits of things around here, you know, never the whole thing. I can just about recite 'Top Gun' but I don't think I've ever sat down and seen it. I'll be doing things here, and it will be on here, but ...

I know some of the nurses said they found it really hard to watch 'Born on 4 July' because it was so close to the truth in the American hospitals. It was really upsetting for them to watch. Did you see 'China Beach'?

Yes, I saw a few episodes - I did actually not watch that. I saw one episode where some helicopter pilot - dust-off chopper pilot - went on a bit of a joy ride actually, and ended up standing on a landmine. I thought, oh, that's just a little bit close to the truth. That was very good when I did see it, the few episodes I did watch. But I rise early in the morning at four thirty-five and I go to bed early, and it was on always too late for me. I'd always think I'll watch that to night, then I'd think, oh, I'm going to bed.

So sometimes things are a bit close to the bone?

If I'd watched it more regularly then maybe it would have been, but I always had good intentions to watch it and then it used to fade before it came on.

Did your time in Vietnam change your feelings about war?

Um, no, not really. They've changed now, now that you've got sons of your own. They are pretty useless to start with. Maybe that one would have gone differently if the Americans hadn't had so many people at home to employ, that's what I thought was going on, if they'd kept all the people in employment.

Did you have strong political feelings before you went there?

No, no, it was nothing like that, it was purely that I thought they made great patients and it's the sort of nursing I liked.

So you saw it as a nursing experience-

Yes.

- rather than a military experience?

Yes. If I'd stayed in and had to do more military exams or military law and stuff - I mean, what a waste of time. I suppose it was sort of stuff you would have had to know, but like a lot of those things, you just sort of go in. Something would happen and somebody would have to be charged on your ward or something; you'd think, oh God, ring the RSM, he can do it, anything rather than you do it, you know. As far as I was concerned that wasn't a nursing problem.

What about nurses carrying guns and things like that? I mean, I know you didn't-

No.

-but did you ever feel that that was something that you wanted to do?

No, no. I think we had our job and they had their job.

Was nursing in the military very different from nursing in a hospital?

No. I think the difference is I think that you felt part of a family - it was more personal. The other nurses were like sisters and your nurses and medics were sort of part of the team, and everybody was there for the boys. They moved heaven and earth for those kids, the boys, and they were always so appreciative, the guys - they were just great. We had this mob of - you know the burns ones I was telling you about earlier - and they were due on the medevac home on the Monday. I'd gone off duty - I was up having a shower or something - and he comes down - 'You are wanted down the burns unit ward' - and I thought, not again, I've just come out of there. I said, 'Do I have to go down' - 'Yes, you've got to go down the burns ward, you and ...' - I forget this other girl's name, she was a great bird. Went down there and somehow these patients had organised with the girls from Red Cross for the RAAF flight, when they brought over the medevac flights, they gave us these great big bunches of flowers. So we were all blubbering again. (inaudible)

You were saying you'd cry if the boys went home, or if they gave you flowers or something; could you actually cry over a patient though? Did you ever have times when you felt like you wanted to break down because of the injuries and the trauma that you were seeing?

Didn't have time at the time - no, we just didn't have time, we had things to do and we just did it.

Just from talking to some of the other people it seems some people - not all people, but some people - probably suppressed a lot of things while they were there and distanced themselves a little bit maybe from what they were seeing and how they were feeling -

suppressed their emotions.

No.

So when you came back it wasn't as though you had to deal with unfinished business?

No - find something decent to eat - chocolate milkshakes and meat pies, I lived on them for a week, much to my mother's horror.

Do you think it influenced your life or your career?

No, I just kept doing this; I did the neuro intensive care in Brisbane, then I came over here and went straight back into intensive care. I think - I don't know, maybe I was pretty organized anyway - but yes, maybe it did something for my organizational skills, you were sort of-

Did you go to the Welcome Home March?

No - the first one, no. Katie was very tiny when that was on. No, I didn't go to that one, I only went to this last one.

What was that like?

Oh, it was great, I had a wonderful time. I remember, on the assembly area where everybody was assembling, and you sort of look and try to find somebody that you might recognise. We were over here, and they had young air force men and soldiers in their little summer uniforms, and [Gillian Mills] looks at this young lad, she says, 'Look at him, isn't he lovely? He is lovely, isn't he?' 'They all looked like that once' - I've got a theory about that' and between us and them is the SAS, and she looks and she says, 'Oh, my God, they still do.' It was really funny. Actually, there was a photo in the paper in Canberra of one of the boys that had been my patient, and I thought, no wonder I didn't recognise anybody - there was a beer gut and a beard. I thought it was great, I really enjoyed it.

Are you still nursing?

No, I gave it up when Katie was about ... oh, I suppose I gave it up four years ago - after the kids were born. We went to Canada for a year, then we came back, I had Jonathan, then I went back to work and got pregnant with Kate - and I have lousy pregnancies, I just chuck up all the time, so I gave it up again and went back when she was about eight or nine months old, doing a couple of nights' night duty in intensive care. Then I transferred to the private hospital intensive care unit and worked there for a couple of years. I suppose I gave it up - oh, it must be four or five years ago now.

Do you think you'll go back at all?

No. Once they brought in the career structure, I just hated the career structure. Suddenly you didn't have a charge nurse; I mean, how anything can run without a charge nurse - somebody has to be in charge, for God's sake. And we found we would have no (inaudible) sets, and half a dozen balloon pump catheters, you know, and the intensive care unit had to go down and borrow a (inaudible) set from one of the wards, I think. But we had all this expensive equipment because somebody would come in doing the order and it was different people all

the time; they'd look and think, oh, we've only got three of those, I'd better order some more. So you cop a few more thousand dollars worth of unnecessary equipment that comes into the place. Your basic stuff - I don't think anybody even looked at it. It's just always there so you don't think it's running out because it never runs out - and that sort of stuff.

I don't know, I just found it disorganised, a lot of it too because we were working - I was only doing two shifts so we didn't get level 2, we were only level 1, but you are still probably the senior person on duty on that shift. I was quite often told, 'Are you coordinating today?' and I just said, 'No, I'm not' - this is the deputy matron, she said, 'But you are the most senior person here', I said, 'Yes, but there are about five level 2s out there. If you want me to work as a level 1 you can pay me level 1, but if you want me to work as a level 2 then I'm not coordinating'. But then I was told I was disruptive ... please yourself, I don't care.

END OF INTERVIEW

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