

Staff

The Aldises and the Australians departed toward the end of October, but staffing was still better than it had been on my arrival. Henning had returned in September, Greg and Susan both arrived in October, and John in early November.

Greg had appeared on our doorstep looking for work as casually as if Kontum were simply another stop on the cross-country hitch-hiking circuit. He was just bumming around, he explained. Could we maybe give him something to do? Pat, taken aback by Greg's shoulder-length hair (which, along with the missing forefinger, would later get him onto the roster at MACV) hemmed and hawed. At first glance he seemed so very young, so likely to have sprung from the kind of youth movement with which, at least in the abstract, she had little sympathy. But the rest of us were delighted and in the end, with dark mutterings about hippie-types and hair, she agreed to give him a try. So Greg joined the Minh-Quy staff. Shortly after his arrival he ran into visa problem and had to leave the country. The news hit him hard. He cut his hair and for the two days before he left he wandered around a shorn lamb with hurt eyes: how could the world do this to me? We half expected him to succumb to the blow and disappear altogether, but after a brief exile in Australia he returned triumphant, visa in order, apparently prepared to stay at Minh-Quy indefinitely. It suited him. He developed a new toughness and self-reliance and willingly took over much of Glen's work at Old Minh-Quy where he set about clearing the dead wood from the staff with an efficiency none of us had really expected. Glen in turn was

able to concentrate greater effort on repairs to our in-town quarters, vehicle maintenance and scrounging.

Glen had become the Milo Minderbinder of Minh-Quy. Twice a week he drove to Pleiku with the ambulance trailing a tank for gas and through his various military contacts he supplied us with fuel for the generator and vehicles, miscellaneous office furniture, large quantities of army canned goods, occasional butter, milk, ice cream and fresh meat, and a wide variety of medical supplies. He followed Pat's principle, never say no to a donor. No matter how undesirable the donation, we always accepted (including on one memorable occasion six huge cases of bay leaves), thereby encouraging the donor to give again. Glen was always a little vague about his sources. One of his triumphs was a 100 kilowatt generator for the Old Hospital. Even Pat was impressed on that occasion and asked how on earth he had managed it. "Oh," said Glen, refusing to be distracted from a complicated chess problem, "Guess I just know the right people," In Nha Trang he reorganized our oxygen supply system, in Danang he extended his scrounge contacts, at the in-town Hospital he supplied us with running water. We were in clover.

Sue Little arrived towards the end of October. She was a nurse who had previously worked as a dental assistant in northern Thailand and who would become my roommate and close friend. Sue was new to nursing but not to overseas work in underdeveloped countries and she plunged in, achieving in very short order a rapport with the Montagnards that put me to shame. She was endlessly patient where the rest of us were sometimes brusque and demanding, and when things were slack she

clowned with the patients and the staff to their great delight. For me there was a sense of *deja vu* in watching Susan's initial response to Minh-Quy: "But how do you tell them apart? How do you talk to them? You mean you do LP's and suturing? But good lord I don't know how to do any of that stuff!" And, her first night, "Hilary, what is that?"

"Oh, Christ, Sue, I'm sorry. I meant to warn you. That's outgoing. Hear the whistle after the bang? It's going away. You'll get used to it."

Very quickly she picked up the skills and the language and learned to ignore the night time noises, but watching her reactions during the first week or two I suddenly realized how much I myself had acclimatized. So much that had initially seemed alien at Minh-Quy now seemed familiar, in so many ways it had indeed become home. There was still -- there would always be I thought -- the struggle to Be Competent, but the underwater world had gone.

John Taylor, a Harvard Medical School graduate who had recently completed his year of internship in Seattle, joined us the first week in November. John was young, bright and an excellent physician. And he soon revealed a commitment to the Montagnards that spurred us all on. In his view, the greatest service we could offer both staff and patients was education. Treatment of disease was of course important, but teaching was vital. It was an idea to which we all gave lip service, but with John's arrival we began to put it into practice and the result was a new excitement and enthusiasm throughout the Hospital.

November was quiet. The rains had stopped and rice harvest begun. There was less cho-roh in the drier weather and only the very

sick came to the Hospital during rice harvest. It meant that the patients we got often required a great deal of care, but it also meant that for the first time since I had arrived at Minh-Quy there were occasionally empty beds. Our census hovered in the 120's and 130's and perhaps a third of these were in Walking Wounded. And with our expanded Western staff, lunch at twelve and clinic over by six became the rule and not the exception.

With things quiet at the Hospital I did something I'd wanted to do for months. I took an extra day off and joined Tom for one of his village trips. Tom's program was growing by leaps and bounds and began to look like a success. He had planned carefully, not only the details of material to be taught but the selection of health workers for the greatest benefit to the village populations. Depending on the size of the village he would take two to four workers from each and they were expected to treat not only their own villagers but patients from other villages nearby. From Mang Yang, a Bahnar village of two to three thousand southeast of Pleiku, he had had two boys in his first training group and hoped to train two more. It was Mang Yang we were to visit.

The initial training of the boys took place at Minh-Quy and lasted four to six weeks depending on their progress. Then they returned to the village to start work. Tom visited every village in which he had workers once a week, taking them medical supplies, consulting on patients, bringing back to Minh-Quy those who needed hospitalization. Every six months the workers themselves were scheduled to return to Minh-Quy for a brief refresher course. I had been dubious about this

program. After all, nurses in America are trained for a minimum of two years, and if they are to be professional nurses (I was only a technical nurse myself, having graduated from a two year program) their training lasts four or five years. Tom by contrast proposed to turn out physician's assistants in a month. But there were several factors that made his scheme feasible. Perhaps the most important was that the boys who came to us as trainees were already thoroughly familiar with the diseases they were to treat. They had, of course, no scientific background, but they had lived with disease all their lives as few Westerners do. The vast majority of sick people in the Highlands do not disappear behind hospital doors to be treated by people with specialized knowledge: they stay in the village where every symptom is visible to family and friends and where, because living conditions are crowded, because there is no privacy, and because family affection is so very strong, these symptoms are closely observed. The boys who came to Minh-Quy for training needed no formal introduction to disease. They needed to know what medications to give for the symptoms they already knew too well.

They were also highly motivated, and for this the credit belonged to Pat. Had Tom appeared unheralded to set up such a program he probably would have found few takers, but Pat had achieved for Minh-Quy a solid reputation throughout the Highlands and the Montagnards, who had seen it done in the Hospital, now knew that most disease could be treated and treated effectively. Now Tom was telling them that much of what they had seen at Minh-Quy could be done by them in their own villages and they were eager to learn. In their month at

the Hospital they worked like demons. All morning long they studied medications or practiced such skills as injections and IV's with Tom or his assistant, Siu Kot. In the afternoon they moved outdoors, sitting under a tree by the clinic building, way-laying the patients before they were seen to try out their diagnostic skills and again after they were seen to check their diagnoses against those of the doctors. At night they would sit in Vincent's back room, notebooks open, memorizing the day's work, chanting over long lists of diseases and medications. They developed a remarkable degree of practical competence in very short order. The boys at Mang Yang had already achieved one real triumph: they had treated a Vietnamese child with burns of his legs and abdomen and sent him in to us three days after his injury (the earliest time transport was available) with the burns completely free of infection. The fact that Vietnamese parents had elected to take their child to Montagnard village health workers was an impressive measure of Tom's success.

Mang Yang was perhaps fifty or sixty miles from Kontum by road (less as the crow flies, but a mountain lay between) and the drive down took us several hours, partly because the Minh-Quy ambulance was slow and heavy, partly because the roads beyond Pleiku were in poor repair. We passed the usual assortment of military convoys, overloaded hondas and lambrettas, Esso tankers and Montagnards on foot like pictures one sees of Africans walking with slow purpose in the middle of nowhere. All along the road ARVN tanks were stationed with soldiers drowsing in hammocks slung on the turrets and all the bridges were guarded. The tangles of concertina wire were much in evidence and just after we left

Pleiku we passed a deuce and a half (truck) slewed over by the side of the road. "Ambushed," said Tom.

We stopped for a lunch of cold C-rations in the Vietnamese village next door to Mang Yang and then turned off the main road and bounced uphill over a narrow track to the village itself, pulling up before the high-roofed meeting house that is the center of every Montagnard village. It was here that the annual sacrifice of a water buffalo was held and in the meeting house itself the young men of the village slept from puberty until their marriage. Incest is a powerful tabu in most Montagnard tribes and extends to any known relative however distant. Adolescent homosexuality, by contrast, is looked on as a simple fact of life. Hence it is generally thought wiser to remove the village boys from the crowded quarters of their homes and the meeting house provides a place for them to sleep in safety until they marry. We parked the ambulance next to the stake to which the sacrificial buffalo was tied each year and were greeted by Tom's two health workers and a large group of villagers. The young men and many of the women were off harvesting the rice, but the aged of the village and a large number of children swarmed around us, the adults shaking hands with the two-handed Montagnard handshake, left hand holding right wrist, that is a sign of respect among Montagnards wherever handshakes are used.

For perhaps ten or fifteen minutes we stood chatting by the meeting house. It was a fine day and in the clear air the view from Mang Yang was impressive: the red tiled roofs of the Vietnamese village down hill gleamed in the sunshine and beyond rose another ridge

of mountains in brilliant shades of green. Mang Yang being a traditional village the houses were roofed in thatch instead of the cheap tin sheeting one saw closer to town and stood on their stilts apart from one another, separated by myriad little pathways and a number of sand-bagged bunkers. There were, as always, the motley array of pigs and chickens and the obvious signs of poverty, but on a bright dry-season day it was a pleasant place to be. The villagers crowded around in the usual odd variety of dress: classic loincloths, black skirts and blankets, army cast-offs and care package goodies. One little girl wore with great pride a transparent tu-tu in pink tulle and a four year old boy sported a sweatshirt several sizes too large for him that proclaimed itself to be a "Souvenir of Disneyland."

Eventually our first consult appeared, a girl wanting teeth pulled. Puberty rites here as elsewhere amongst the Bahnar involved the filing down of the four incisors, an extremely painful procedure that eventually resulted in rotting stumps. This girl was ready to have the stumps out and Tom gave her a shot of novocaine and pulled them then and there on the meeting house steps to the delight of a large audience. As Tom pointed out, exodontia is a fine way to gain confidence: it is quick, painless, dramatic and effective.

There followed a walk around the village, calling on a number of patients. Two with malaria seemed to be doing well: they would continue treatment in Mang Yang. Another young man with a high fever was not responding to treatment and had better come in to the Hospital. A patient with flank pain had the health workers puzzled. Was it perhaps a kidney problem, they wondered? Would we take him to Minh-Quy as well for Ya Tih to see? In the midst of our tour we were joined by

two more patients, a young man also wanting teeth pulled and an aged grandfather with what looked like a cancerous growth on his nose. These two we took with us to the tiny one-room home of one of the health workers where Tom went to work with the novocaine again while the health worker got out his records and a jar of rice wine. And then we all gathered around the jar, including the man whose teeth had been pulled and who now clenched a blood-stained gauze square between his jaws. Between sips of wine he would turn politely away to spit blood through the cracks in the floorboards.

Unlike the rice whiskey we had shared at Kontum Ko'nam, this rice wine was the traditional Montagnard drink. The taste bore some resemblance to hard cider and it was powerful stuff. It was made in a large glazed earthenware jar, the kind of thing our grandparents kept umbrellas in, and drunk through straw-like reeds. The reed was passed from drinker to drinker, and I was sometimes shaken on occasions such as this to realize that I was sharing a straw with someone known to have advanced T.B. or severe pneumonia. On the surface of the wine handfuls of old leaves floated and periodically the jar was replenished with water than might or might not have been boiled. On those occasions when the Montagnard staff at the Hospital knew I had been drinking the jar they invariably assured me that I would have stomach cramps and cho'roh the next day, but I never did, nor did my tuberculin skin test convert to positive.

Between sips of the jar Tom conferred with the health workers, going over the records for the past week and checking supplies. They had had a run on aspirin and needed more. There was a baby in the

village who had little white spots in his mouth. Wasn't it mycostatin we used for that? Could they have some? There had been some cho'roh-hak in the next village last week but the season was pretty well over and they thought they had enough Ringer's Lactate. Would Tom bring more dressing supplies and penicillin next trip? The villagers, pleased with their work, were planning to build them a one-room dispensary as soon as the rice harvest ended and when the harvest ended there should be two more boys available for training. There was certainly enough work in Mang Yang and the surrounding villages for four. When did Tom want them to start?

Tom listed their requests and offered advice on one or two problems, spot checking them on medication doses. Then the conversation became more general. Had there been much trouble with the VC lately, we asked? Like "How's the weather?" this was a standard conversational gambit and we talked for a while about the ways of the VC. Things were quiet in their area, but they had heard rumors of trouble further west. And then it was time to leave, despite our host's vigorous protests that we had not had enough wine. But we have to drive back to Kontum, we told him. We were invited to stay the night. And the patients, we asked? Ah yes. Well, perhaps we should take them back, he admitted reluctantly.

We loaded our patients, assorted relatives, baskets, blankets, tea kettles and firewood into the back of the ambulance and said our farewells. The villagers gathered around once more, calling goodbyes as we bounced our way back down towards the main road. It had been a good trip. I had been impressed by the abilities of the health workers

and the obvious support given them by the rest of the village. But more than that, it had been a pleasure simply to be away from the Hospital, and to see in the cheerful crowd that had attended all our movements in Mang Yang a people unconfined and in its proper setting. Immersion in hospital life can lead one to see pathology everywhere: it was good to see health.

Quiet days at the Hospital also meant time to relax and indulge in jokes and gossip with the staff. I had fallen (or been tripped) into the role of Minh-Quy veterinarian and the Montagnards were highly amused by my ministrations to Noir, our household dog, and to Pat's baby gibbon, a new acquisition whom we all thought too young to survive. In time it developed pneumonia and despite daily injections of penicillin died, to be buried with full rites, Christian and pagan, by Nglau, our wild young lab technician. It's grave was marked with a cross, but Nglau also felt it would be appropriate to chant the moi and so we had the traditional ritual: "Oh, the baby monkey is dead: Ya Hilary gave it its shots but it died anyway, oh the baby monkey is dead. Oh, the baby monkey is dead: Ya Tih paid five thousand piasters for him when she could have got him for one thousand, oh the baby monkey is dead." This was regarded by all as the height of wit and the staff were convulsed. Among the Montagnards nothing was sacred in the gloomy American sense of not to be laughed at.

Nglau was changing, a fact which we attributed to his apparent courtship of Khuch, Giao's helper up at the house. Khuch was young, rather slow, shy, lovely and very responsive to any small kindness. She cleaned our rooms and did the cooking on Giao's day off, slipping

through our lives like a shadow. She was sixteen years old and the kind of mountain beauty poets imagine. With ten year old Dich she got on well and I would sometimes come across Dich teasing Khuch and Khuch responding with husky-voiced despair, despite which I would guess that they understood each other clearly and were in many ways equals. In the past she had always walked to and from work, but now more and more often she arrived and departed on the back of Nglau's honda. And Nglau was obviously mellowing. From a fierce and defiant little hippy he had transformed himself into a sober citizen, cutting his hair and discarding his gaudy shirts and love beads. One day Hiep, the nurse, showed me a picture he had taken of Nglau posing in the sunshine of the Hospital yard with one of our less reliable aides, Thih. "Oh, Nglau," I said with mock disapproval, "You have two girl friends? Thih and Khuch?"

Nglau protested vigorously. The picture had been taken only to oblige Bok Hiep. "Thih is not my girl friend!"

Nglau was known to be looking for a wife, but he was hampered in his search by having only one leg. The other had been amputated after a mine injury on the Dak To road. Nglau got around well with a prosthesis, his limp scarcely noticeable, but few Montagnard women wanted a husband who could not work in the rice fields and Nglau's disability stood in his way. We watched with interest the growing relationship between Khuch and Nglau. She was clearly good for him, but was he, complex and difficult as he could be, good enough for her? In some ways Khuch, so much the younger of the two, seemed by far the more mature, while Nglau, bright and sensitive as he obviously was, lacked

a stability she possessed. He was, perhaps, less sensitive to others than to himself. Remembering the days of his tactless hippyhood, his sometimes painful teasing of Callixte, I wondered if Nglau might not some day cause Khuch considerable distress and regarded the liaison with concern.

It was typical of Hiep that he should be the only one of the Montagnard staff to own a camera. Hiep was a wheeler-dealer, sharp as a tack and a first-rate nurse when interested, but when bored a disaster. Hiep looked out for number one. He badgered us constantly to put in orders for him to Sears-Roebuck and Pacex, which, thinking of his salary and the needs of his wife and children, we declined to do. He wanted a watch, he wanted a radio-cassette player, he wanted a nice American suitcase, he wanted a good pen, he wanted electric hair-clippers (envisioning himself, no doubt, as a barber on the side), and he wondered if we couldn't arrange shipment of a honda from America more cheaply than it could be purchased in Kontum. He had a wicked sense of humor, of which I had been the butt one night when I was sleeping at the Hospital and Hiep was on night duty. I had gone to bed but had been awakened by the sound of vomiting on the ward and had gotten up to investigate. In the back ward I encountered Hiep giving out the midnight medications. He gave me a horrified look. "Ya Hilary, go back, go back. Many VC tonight. VC lo' lo'." The words came out in fierce, intense whisper.

I paused, uncertain. "But Hiep, someone is vomiting."

"Go sleep," he hissed at me. "Patients o.k. You go sleep. VC lo' lo'."

I retreated. I wasn't entirely convinced but it had been a first-rate performance and in any case the vomiting seemed to have stopped. In the morning I found Hiep sitting at the nurses' station. "All right, Hiep," I accosted him. "Where are all those VC?"

He burst into roars of laughter, repeating his performance of the night before, convulsed by his own wit. "Go sleep. VC lo' lo'!" What could be funnier? "VC lo' lo'!"

It was Hiep along with Hrong who had been on duty on that night in 1968 when the VC had entered Old Minh-Quy. Crafty as he was, Hiep had wrapped his leg with ace bandages and poured merthiolate, a bright red antiseptic, over the dressings. "But I can't possibly walk," he told the VC, "I have a terrible injury to my leg." Hrong, meanwhile, had taken shelter in the operating room. When the VC caught up with him he clutched his chest and informed them that he had a serious cardiac condition. The VC weren't buying that. They took Hrong prisoner along with Renate but Hiep they left behind. Both Hrong and Hiep delighted in this tale. Hiep's tactics were generally considered ro'gei jt (very clever).

November passed in an unbroken succession of bright sunny days, a relaxed and peaceful month. On December fifth Helen Schuster, an American lab technician, arrived. We now had two doctors (John and Pat), four nurses (Barb, Sue, Henning, myself), a lab technician (Helen), two people full time on construction and maintenance (Glen and Greg), one on correspondence and supply (Barb Silva) and one with village health workers (Tom). We were ready to expand our efforts: we had the staff, the energy and the enthusiasm. We sailed into December on the crest of the wave.

"The First Free Elections in Southeast Asia"

It was time for another staff meeting. We gathered casually in the living room one evening in early December over beer and bourbon from the P.X. Barb Silva's parents had sent a fruitcake which she passed around: it might not be standard fare with drinks but we had demolished Glen's Fritos the day they arrived. Det and Dich played in the background, Dich turning somersaults over the back of the sofa, Det as always being a helicopter: "Chug-a-chug-a-chug-a-chug-a-chug-a -- helicopter pilot doing what? Where he going helicopter pilot?"

"What is the helicopter pilot doing, Det." Glen was making a mild effort to teach Det English grammar, to which Det's response was polite but uninterested. The lesson never stuck. "Mama, helicopter pilot doing what?"

"Oh, I don't know, Det. Helicopter pilot going to Pleiku, I guess." (Glen sighed.) "Say, what happened to your shoes, Det? Hunh? Where are your shoes? Did you leave them in Ya Barbara's room? Well, o.k., but if you lose them, you know, you're gonna have to go barefoot. For two years you're gonna have to go barefoot. Mama can't afford to buy any more shoes."

"Why two years?" I asked, pouring a drink.

Tom laughed. "'Cause Mama bought a new red Honda car last week and she can't get her baby any shoes any more!" Pat's new car, recently arrived from Saigon to replace the battered Deux Chevaux, was her pride and joy and we teased her about it mercilessly.

As always, Western staff meetings got off to a slow start. Greg wandered in and picked up a piece of screening for a fluorescent lamp from the coffee table, making room for Silva to put down the fruitcake. "What is this, anyway?" he asked.

"Is that what fell when the rocket hit this morning?" asked John.

"Yeah," said Pat. "It fell off the ceiling lamp and landed on a can of beer. Spurted all over the place. It smelt like a brewery in here. That's what happened to our CIA hero, remember? A rocket came in and knocked some plaster off his ceiling over at MACV and I'll bet he's telling stories right now about being a frogman for Minh-Quy. 'There I was, under attack while skipping stones for the CIA in the Dak Bla -- ' what an artist!"

John laughed. "Senile or psychotic?" he asked, referring to the catagories into which we occasionally grouped our less welcome visitors.

"Little of both," I told him. "Say, Glen, did you get the decadron?"

"Four boxes," said Glen. "But you know, you shook them up at 14th Med with that call."

"Oh, I know, I know. I can't get used to those damned military phones and I always forget about the security jazz."

"What happened?" asked Pat.

"Oh, I called down from CCC to ask them to give Glen some decadron when he arrived -- I'd forgotten to put it on the scrounge list. Anyway, they answered '1414' and how was I supposed to know who that meant? So I said, 'Is this 14th Med in Pleiku?'" Tom groaned.

"And then I told them who I was and that I was calling from Minh-Quy in Kontum . . . "

"'Where we have the mortar emplacements right by the Hospital . . . '"

"Yeah, well, that kind of thing."

"Charlie is listening!" said Silva.

"Well," I told her, "When the VC come into the Hospital tomorrow asking for the decadron from Pleiku we'll know Charlie was."

"Cool move, Hil," she said. "Have some more fruitcake?"

"Did you get a good haul in Pleiku, Glen?" Pat asked.

"So-so. You girls can go over the goodies in the morning."

"Sure," said Tom. "I saw Glen and Greg coming back from Pleiku. They were outside the CCC compound throwing dirt at each other to make us think they'd done some work down there."

There was a brief scuffle and Pat called the meeting to order. "Well, everyone ready? Where are the minutes of the last meeting?"

Silva sighed. "The minutes of the last meeting are down in the bottom of my drawer in the office at the Hospital."

"Oh? Well, in that case I guess the minutes stand approved as . . . "

"Approved as read?" asked Silva.

"Well, anyway, approved as written or something." ("Par for the course," murmured Silva.) "O.k., any old business? Progress on anything? Or regress? Or anything? Glen, what about the mechanics' coveralls?"

Glen, for whom the mechanics' desire for coveralls came low on any list of priorities, allowed as how he was looking into the matter and Pat nodded. Dich, still turning somersaults, flipped onto the floor and lay there giggling.

"Dich," said Tom, a note of parental warning in his voice, "Whyn't you go on over to Ya Barbara's room and play the Sesame Street tape or draw some pictures or something. Go on. Scram."

"What about Thih?" asked Barb Corvino as Dich departed. "Is she going to stay?"

Pat sighed over Det's helicopter noises. "Oh, Thih. Yeah, I guess she's staying. (Quiet down now, Det, Mama's talking.) Yeah, mainly because I can't stand to see her cry. Unless she does something really wild again and then I suppose we'll have to fire her and take it out of her hide. Actually, you know, when they owe us that much money I think we should have a chance to get some of it back."

"Wait a minute, Pat," said Silva. "Thih's paying three thousand P back this month and that's it. She's through."

"You mean she is leaving?" asked Corvino.

"Vincent's talked to her," said Silva. "She's going."

"Which one is Thih?" asked John.

I started to answer: "Thih's one of the aides. She's a neurotic . . ."

"She's a hypochondriac," said Pat. "She has to take three weeks off if she sniffles once. And sometimes she just doesn't show up without asking anyone's permission and with no valid reason."

"Why is she working for us then?" asked John.

"She's borrowed," said Silva gloomily, "Six thousand P from us."

"Oh-ho," said John. "Increase your job security: borrow money." And, "Screw it on, Silva," said Tom.

"Well now wait a minute," said Pat. "The new credit policy is being enforced, isn't it? They can't borrow over a month's salary?"

"Oh yeah," said Silva. "Thih's debts go way back."

"Yes." I said, "I told Hiep today that he couldn't borrow money for a haircut until he cleared it with you, Barb."

"Oh, Hiep! He's hit all of us for his five hundred P haircut," said Silva.

"Five hundred P!" said Pat. "Who does he go to, Kenneth?"

Corvino changed the subject. "you know, Vincent says Phach was drunk on duty again last week. We've really got to go over the policy with them again."

Phach was a nurse, a wizened gnome of a fellow who specialized in blood pressures and IV's, industrious and mildly officious, as if anxious to maintain a social standing he was not entirely sure he deserved. He was a bit the bourgeois gentilhomme. Alcohol undoubtedly caused Phach problems and Pat responded to Barb's words with quick anger. "Drunk? Phach? God damn it, I'll fire him if he doesn't shape up. I don't care if he is our oldest employee. That just doesn't go and he knows it. I wonder if he'd stick to an antabuse regime?"

"I doubt it, Pat," Corvino said. "He just hasn't got the brains. I mean, he's conscientious enough when he's sober, but this drinking business . . . "

"Now wait a sec." said Silva, "Let's have this clear. What is the policy?"

Pat answered. "That if they come to work drunk they go home without pay and that if it happens a second time they're fired. Out. Phach's got one more chance, and if he thinks for one minute his seniority's gonna protect him, he can think again. I mean it. He's out."

"Hey, what's this?" said Tom. "Does this apply to Western staff?" There was a gust of laughter around the room at his disconcerted air.

"Well . . . "

"But it should, Pat," said Corvino. "We should tell them that. Tell them it's for all of us, Western staff, too."

"Well," said Pat slowly, "Just so long as it's not retroactive. I guess we'd get by." Again the laughter. "O.k., we'll go over the credit policy and drinking tomorrow. What else?"

Henning spoke up. "Also, also, I have only two things. First is for have a Montagnard chief nurse in the Hospital and second -- what was it second? -- Ah so. Ja. I want to have someone else to help on dressings."

Pat looked startled. "You want more people on dressings?"

"For sure. Tuesday afternoon last there was nobody doing the dressings. Christian work alone and the others --" Words failed him.

"It's true, Pat," I said, "There've been several occasions lately when Henning's been by himself."

"Hut is no coming two days, Moustach he no work . . . "

Henning reviewed his dressing staff in righteous indignation.

"Well, then, somebody goofed," said Pat. "You just have to tell them that someone has to be there all the time and if they don't show pull someone from another area. All our staff should be able to do dressings."

"You know who'd love to learn dressings?" said Silva. "Rah. The cleaner. He asked me just the other day. He's really conscientious. I think he'd be good."

Henning was clearly shocked by the suggestion. "No, no, no, no. Ach, I have someone to clean also my room and toilet every day. You want for him to learn dressings, too?"

"Henning," said Silva, "These guys have all been trained from scratch. Why shouldn't Rah have a chance?"

"Look at Lung," Pat said. "He started out as our only cleaner. Now he's a nurse and physio-therapist. I think it would be all right to start Rah on dressings."

"Oh, for stop now," said Henning. "Stop now."

"But why shouldn't you try him?" Tom asked. "I mean, if he wants to learn, why not?"

"Sure," said Glen. "Give the guy a chance. It'd show the others they could step up too. Incentive. Upward mobility at the old Hnam Po'gang."

"For stop now," said Henning. "For dressings I find my own man. Not a cleaner."

"Well," said Pat, "I think the point is that for something like dressings we can't afford to go out and hire someone at a super-high price who's already learned English and all this other stuff. I mean, it maybe made sense for Tom with the village health workers where he needed an assistant with specialized training and Siu Kot was available, but a dresser ought to be able to come out of our own ranks. As I pointed out, Lung started as a cleaner. Hiao, who's now one of our best surgical nurses, started out doing a little car repair and running the generator. And Nglau, too, he started as a mechanic. It depends what they're capable of doing. They all start out doing a lot of different things and then seek their own level."

Henning glowered. For him dressings were a sacred subject and Pat's straight forward approach did little to ease the tension that still existed between them. "All right, then," said Barb Corvino. "Is Rah going to start dressings?"

"Never," Henning muttered. "I do not take a cleaner." But it was said softly.

"Well," said Pat, "Can we spare him as a cleaner? If we don't have the cleaners he can't change now. Unless, of course, we demote one of these guys Henning says isn't pulling his weight to cleaner to take Rah's place. That might work."

Hennings scowl increased.

"I think we can manage, Pat," Silva said. "I'll talk to Rah tomorrow."

"O.k., then," said Corvino. "Now, what about Henning's suggestion of a Montagnard head nurse?"

There was a general refilling of glasses and the fruitcake made the rounds again. Det had curled up halfway across Corvino's lap and fallen asleep. Dich could be heard from one of the bedrooms playing the Sesame Street tape with monotonous repetitions. "Well," said Pat, "Who would you suggest?"

Henning emerged from his sulk. "You have three," he said. "I think you have three nice candidates. Lung, Ta and Hiao."

"Henning," said Corvino, "I think those three are excellent. I would only add Hiep."

"Also. We add Hiep."

"No, no," said Pat. "I don't agree. Hiep has been very very irresponsible many times in the past. He goes through stages. At times he's very good, at times he's -- well -- irresponsible. He gets lazy and doesn't read orders properly and goofs off."

"Oh, o.k., o.k." said Barb. "I've always found him a good worker but you know him better."

"Lets us see then," said Henning. "Lung, Ta, Hiao. Those three. Ta I think for sure, and Lung and Hiao . . . "

"No, I don't think so." Pat broke in again. "I think Ta is quite good but he hasn't been with us all that long, and you know seniority means a lot. It probably means more for these people than it does for us. In fact the same thing probably applies to Hiao -- he's relatively recent compared to someone like Lung. You may not realize it, but there's a good deal of resentment of Hiao around the Hospital. Oh, they all know he's good, but he's not one of the older employees and he gets a lot of recognition from the Western staff -- because he

is good and because he speaks English -- that the others don't get. I doubt if they'd elect Hiao."

"Oh, but Pat -- !" In my mind, Hiao was clearly the man for the job.

"Oh, I know you'd like to see him elected," said Pat, answering the thought, "I'm only saying that if it is left to the Montagnards I doubt if they'd choose him. And it is a Montagnard head nurse we're talking about. Hiao's just not the type. He's relatively young and unproven and he wouldn't have their confidence. Now as far as their customs go, if we are going to have them vote on a candidate we choose, I think we should probably include Phach on the list of names." Barb, Susan and I all groaned. "Oh," Pat continued, "I don't think they would vote for him at all, but they'd want him included as a gesture of respect. After all, he has been with us longer than any of the others."

"If," I said, "You're absolutely sure they won't vote for him."

"All right then," said Corvino, "Ta's out and Phach in. Lung, Phach and maybe Hiao."

"Now," said Pat, "I think we have to define for them what it is a chief nurse does, because they have no idea."

"What I think," said Henning, "What I think, you know the problem when somebody is coming in drunk to the Hospital. I think better it is when a Montagnard tell a Montagnard for go home now, I don't want you to work anymore. I think is better than when the Western staff tell him. The Montagnard tell the Montagnard."

"Oh, fine," said Tom. "Just the job for Phach."

Pat shook her head. "No, Henning, I think the most important thing on this is that the Montagnards aren't going to tell each other these things. I think the only one who would dare is Sister Gabrielle. I mean, you get all these little personal loyalties, even when a person's no good. You get personal loyalties because they're from the same village or they're a relative or something like this. Everyone's interconnected on our staff, you know? It makes it very difficult for them to be objective about each other. Surely there are other responsibilities that could be assigned. Like scheduling staff. Making sure Henning's got enough dressers, making sure there's coverage at all times."

"Oh, but Pat -- " I had a sudden vision of one of my main quarrels with Western nursing becoming established fact at Minh-Quy. "Surely a head nurse should be someone who gives good nursing care and isn't bound down by paperwork. I mean, that stuff doesn't need a nurse. Should we really take someone who's a good nurse on the ward and say to him all right, from now on you're going to be chief disciplinarian and make out the time schedule and, you know, take him away from the ward?"

"Yeah, Hilary, but if you're thinking of the chief nurse as someone who will see that good patient care is being given, I don't think we have one person because I don't think we have anyone who really understands the concept of total patient care among the Montagnard staff. Except maybe for Yin who's not a nurse at all and illiterate to boot, and the nursing staff wouldn't go for an aide as chief nurse. We don't have a single nurse who knows what's meant by total patient care."

"Well damn it, we should," I said reckless with the effects of my second bourbon.

"Fine," said Pat. "You teach them. We've got enough staff now so that we could start doing more teaching. Start some classes. I agree, it's stuff they need to know."

"All right," said I, throwing caution to the winds, "I will." After all, why not? Pat was right. We did have enough staff. And as John so frequently reminded us they needed to learn. "I'll start next week," I announced and refilled my glass.

Pat nodded briskly. "Anyway, getting back to this chief nurse business, suppose we say for now that one responsibility of the chief nurse is to listen to the difficulties, complaints, suggestions or whatever of the staff and to either take care of them himself if he thinks he can or to ask us. Make him a kind of intermediary, something like Henning suggested but without the discipline aspect. And I think we might gradually introduce him to the concept of scheduling. It's a real responsibility and one they ought to be able to handle and it might make them more aware of the need for teamwork around the place. What about it?"

There was general agreement and Silva spoke up, "But how's the thing going to be organized? I mean are we really going to select the candidates or is this going to be a Montagnard election?"

"A free election," said Corvino. "Pat, it really should be. They should choose. They should do the whole thing."

"Damn straight," said Tom, suddenly enthusiastic. "A free election in Vietnam. Hell, we'll have the first free elections in Southeast Asia right here at Minh-Quy!"

"All right then," said Pat, "I'll tell them tomorrow at the general meeting. The nursing staff -- I guess that means the sisters, ~~the nurses~~ and the aides, -- should choose candidates. How many? Four? Heads nodded around the room. "O.K., they choose four candidates and post the names and then the next day, when they've all thought it over, they can vote. How's that?"

"I get a box," said Henning, beaming. "I make a ballot box for them and we make a committee to count the ballots. Secret ballots we will have. Free elections. Just you wait, you wait: I tell it you, it will be Hiao!"

"Maybe," said Pat, "But I doubt it myself. But anyway, it'll be their head nurse. Hope they pick someone you can work with, Hilary. With Barbara leaving at the end of the month, I guess you'll be running the ward."

I shot her a look of horrified amazement. The thought had never occurred to me. Glen grinned. "Better have some more of the old brown stuff, Hil," he said, holding out the bottle. "I think you're going to need it."

The meeting broke up late. Plans were made for Christmas, Helen announced a schedule of classes for the lab techs, Glen brought up the perennial problem of vehicle use and abuse. It was after midnight before I got to bed and then I lay awake for several hours contemplating a future as head nurse and instructor in comprehensive nursing care to the Montagnard staff at Minh-Quy. All too clearly I could see the under-water world looming ahead again. What had I done?

In retrospect it is difficult to see why we were so excited over the election of a Montagnard head nurse. It was, after all, no more sophisticated than a grade school class election and for all our talk of "free elections" I doubt if any of us were deeply stirred by the abstract idea of fostering participatory democracy. Perhaps Henning thought he was, but for the rest of us it was more of a game. And yet we were excited and I think the excitement grew out of a feeling that we were taking a step towards giving up the white man's burden.

It's a perjorative term these days, "white man's burden," but it need not be an evil fact. Such aspects of it as existed at Minh-Quy were beneficent and existed with the enthusiastic support of the Montagnards. In no way did they feel themselves ready to function independently at the Hospital, although they were more nearly ready than any of us knew. But the support, assistance and charity implied in "white man's burden" is a dead end street without growth on the one side and gradual abdication on the other. It was the potential for Montagnard growth implied by this gesture of elections that excited us. Similarly, when I started my classes, I found the enthusiasm of the Montagnards -- their growth, my abdication -- more moving and more satisfying than almost any other aspect of my experience at Minh-Quy.

We held a nursing staff meeting the day after the Western meeting and presented the Montagnards with the idea of a head nurse. They were clearly pleased. "Who will it be?" they asked us. That, we told them, is for you to decide. We will have an election. You

will all vote.

There was hesitation. Gabrielle, who was translating for us, lowered her head in the stubborn look she sometimes assumed bringing out the family resemblance to five year old Det. "Perhaps you choose," she said.

"No," said Barbara. "The Montagnard head nurse will be your head nurse. You must choose him." And she outlined the role of the head nurse as we had discussed it.

"Perhaps like Chuuh at Old Minh-Quy?" asked Hrong.

"Yes, a little like Chuuh. We will help him but he must be the person you want for head nurse."

Slowly the idea gained acceptance. All right, they finally agreed, ^{you tell us the people you want and} we will vote between them.

Again we said no. That choice, too, had to be made by them. And suddenly understanding dawned and with it enthusiasm. Hrong was on his feet, making a speech, Hiep contradicting him, Hiao interjecting questions, Lung and Phach conferring in a solemn huddle, a couple of parliamentarians on the Senate floor, and Gat pulled out a pencil and paper and began to make lists. The meeting relaxed, loosened up. The idea was clearly a success. Henning produced his homemade ballot box and demonstrated voting to an eager audience. "So, you write on the paper -- what -- Bok Henning. You do not write Hrong wants Bok Henning, only Bok Henning. Not your name. Then you fold the paper twice, like so and so, so no one can see, and you put in the box. Like for Thieu."

"No," said Hiep, sharp as a tack. "Not like for Thieu. Free elections!"

"Also, ja!" said Henning, delighted. "I say fold the paper and put in the box. Free elections, nicht wahr?" It was agreed that the candidates were to be named the next morning with voting to follow the day after, and the meeting broke up amidst a great flurry of discussion and enthusiasm. By five that afternoon the list had already been posted on the door to Vincent's back room: Hiao, Phach, Pea and Lung.

Hiao was of course the overwhelming choice of the Western staff. As Pat had said, Hiao was an excellent nurse, spoke good English, and impressed us all as intelligent and responsible. I had reasons of my own for wanting Hiao elected. Where Hiao was concerned I had developed a classic adolescent crush. Susan alone was my confidante. "Oh, Sue, can't you just see him in America?" I asked her.

"Doing what?" she answered practically.

"Skiing. He's absolutely the type. Can't you see it? There he is, at Stowe, leading the advanced slalom course, skin-tight black ski pants with a racing stripe and perfect technique -- a less flashy Jean-Claude Killy. Wouldn't he be gorgeous?"

"Um," said Susan. "You don't think that's a bit far removed from Montagnard culture?"

"Well of course it is, but wouldn't he be magnificent?"

"And what about Yin?"

"Oh, Susan, this is fantasy, not reality!" And fantasy it was. Hiao was contentedly married and deeply rooted in his own way of life, but when one day I dropped an IV bottle with a resounding crash and Hiao, bursting into unrestrained laughter, blurted out, "Ya Hilary VC

rocket!" I could have been eight years old having my pigtails pulled by the boy next door. It was love -- of a sort.

From a practical point of view, if I was indeed to take over Barbara's position on the ward, Hiao would have been the easiest of the candidates to work with. I could communicate with him with no difficulty, his reactions were quick, he took initiative and used it well. He had in many ways a Western set, an interest in theory and principles. He wanted to know why. By Western standards his knowledge of anatomy and physiology was pitiful, but it was far greater than that of the rest of the Montagnard staff. Such totally alien concepts as the nervous system fascinated him. "But why?" he would ask. "How does it work?" Susan once told me of a lengthy discussion she and Hiao had had on the subject of protein. What was it, he wanted to know, and why did we think it so important? The whole theory of how different types of foodstuff work in the body was of course unknown to him. Biological concepts that we learn in grade school -- digestion, transport, caloric values, cellular metabolism -- he had never heard of. Susan and Hiao struggled over protein for hours. Finally he told her of one particular tribe that lives deep in the jungle and eats juei, the local deer, more than rice. They were, he said, bigger and stronger than the other tribes. Was that because of the protein from the juei? It was the first step towards assimilating the concept in terms he could understand. He would worry over it for days, asking questions, translating the answers into what he knew. Ultimately he would emerge with a simple but correct understanding of protein.

Clearly the election lay between Hiao and Lung. Phach's

candidacy was a gesture of respect for seniority and Pea, the pharmacist, had been similarly included out of affection and regard but was probably not a serious contender. So that in some ways the choice lay between the new world and the old, between the modern and the traditional. Lung, slow, cautious, deliberate and to my eyes often inscrutable, was very much the village elder. Hiao and I had attitudes in common and communicated easily, but Lung belonged to another alien world with which communication was a complicated, sometimes baffling process. Lung would listen, impassive, perhaps acknowledging my speech with a grave nod, but I never knew how much had been understood, and if understood whether with approval or disapproval. Lung was steady, responsible and respected, but I still hoped for Hiao's election.

Meanwhile I made a start on my classes. For half an hour each morning, before John and Pat started their rounds, I met with the aides for nursing-teaching rounds, assigning patients for back and mouth care, discussing ways to prevent bedsores, turning and ambulating the post-ops, practicing such skills as the passage of naso-gastric tubes and obtaining urine specimens with a catheter. Yin, Hiao's wife, was the star of this group though all were eager, willing, and vastly entertained by their new prominence as students. There would be endless giggling disclaimers -- "Oh, Ya, I can't do it. Oh, anat jät!" -- followed for the most part by careful and conscientious imitations of my every gesture as I demonstrated techniques for them. Their grasp of the theoretical basis for what we did was nonexistent and though I tried to keep my explanations simple these were usually greeted with round-eyed

non-comprehension, but the skills themselves were quickly assimilated and put to good use.

With the nurses we had more formal sessions, reviewing the diseases seen most frequently at Minh-Quy and the medications used to treat them. It was at first rocky going. My simple statement at the start of a class on cho'roh-hak that sixty per cent of the body is water drew looks of blank incomprehension. "But what is that, Mademoiselle," asked Lung diffidently in French. "What is per cent?"

"Well . . ." I hesitated and Hiep helped me out. He weighed 105 pounds, he told me. How much of that was water? A pint's a pound the world around, I told myself, and answered, "About sixty pounds, Hiep. About thirty IV bottles like this one." Hiep shot me a look of sheer amazement and gingerly poked himself while the others eagerly reported their weights and asked how much was water. So we made slow progress. I offered a simplified description of the distribution of water in the body -- all of it news to the Montagnards -- and then moved on to the symptoms of cho'roh-hak. Here they were on familiar ground and spoke up freely. Patients with cho'roh-hak, they knew, all had dry mouths, sunken eyes, skin that if pinched failed to return to its normal shape and low blood pressures. "All those things happen," I told them, "Because there isn't enough water in the body. It is water that makes the skin firm and the mouth wet and water and blood together make the blood pressure good. So what do we do to make people with cho'roh-hak better?"

"Give them water!"

"Yes. How?"

"With IV's!" Vast delight all around. How wonderfully clever they were getting. But there were pitfalls to come, for I had next to explain that dextrose IV solutions were no good for fluid replacement. To this end I had each of my students taste our most common IV solutions, some sweet, some salty. This caused vast amusement: imagine drinking IV's! And then I told them that water will only stay in the body if there is salt with it. They must always use saline IV's to treat cho'roh-hak, never dextrose.

It was too much. Perhaps they were not so clever after all. "But Ya Hillary," said Hrong, with devastating logic, "Why do we ever use dextrose and water then?" There we stuck for half an hour. I had meant to cover much more material -- electrolytes, pediatric fluid therapy, signs of fluid overload -- but that would have to wait. The little we had discussed so far was so new, so alien, and yet so interesting that no more could be absorbed. Finally we settled that dextrose and water was a good way to give medicine, not a good way to replace lost body fluids. But the basic question still remained: "Why does the salt water stay in the body," asked Ta, puzzled but eager. And it was Hiao, the "Westerner" among them, who gave them the answer that made sense.

"Look," said Hiao, "The next time you get a cut or a scratch, lick it. Taste the blood. It will taste salty like the saline solutions, like Ringer's Lactate. It will not taste sweet like dextrose. Taste the blood. The salt water stays in the body because

it is like body water." It was a stroke of genius. The message got across.

We returned to the ward and the boys put in a superb afternoon's work. Leaning was a stimulus and a source of great excitement to them, and their performance on the ward directly reflected this. I found the classes exhausting and emerged from these struggles to communicate across so many barriers utterly wiped out. The boys, in what I took to be a plea for an equalizer (a quid proquo: my shaky grasp of Bahnar against their shaky grasp of medicine) insisted that I teach without a translator, and the effort to communicate scientific concepts in a language with no scientific vocabulary and which I spoke at best haltingly was doubly fatiguing. But the classes were clearly well worth it. The boys and I emerged from each session with a heady sense of our own cleverness, and all of us worked better for our adventures in learning.

John meanwhile embarked on teaching projects of his own. Reiterating his conviction that teaching should be our primary emphasis, that we were there to do ourselves out of a job, he began to make rounds with a Montagnard to pick up his orders rather than a Western staff nurse. "Look," he told us, "It may go more smoothly if you do it, but you do the Montagnards a disservice if you take on any jobs they can do themselves. How else are they to learn?" And rounds with John were always a learning experience, irritatingly slow for the Western staff but full of interest and illumination for the Montagnards who accompanied him, Ta and Hiao.

The first day Hiao made rounds with John I went with him to

supervise. The second day he went alone, returning with a long list of IV orders and treatments which we organized together. On the third day I was busy with a class when rounds finished and by the time I got back to the nurses' station I found all of John's IV's labelled and ready to go and Hiao, clipboard in hand, issuing orders to the other Montagnard staff. He greeted me with a triumphant grin and, slapping the clipboard down, proclaimed, "Ya Hilary, I have done all this!" It was true. Of all John's orders there remained only a cast to window and an LP to do. The rest Hiao had taken care of. It was another instance of Western abdication and Montagnard growth, and both of us glowed with pleasure.

In the midst of this ferment of excitement over learning, the first free elections in South-East Asia took place at the Minh-Quy Hospital. The date was December 10, 1971. Henning's ballot committee tallied the votes and announced the results, a triumph for tradition. Phach had one vote, Pea three, Hiao three, and Lung an overwhelming twenty-eight. I had hoped for Hiao, but it was, as promised, a Montagnard election, and the village elder carried the day. And indeed had Hiao been elected I think he would have found the job extremely difficult. For all his brilliance, he lacked the authority the Montagnards wanted and needed in their leader. Lung would have difficulties of his own as he slowly defined for himself just what his role was to be, but he would always have the trust and allegiance of his staff and his leadership would be remarkably free of petty jealousies and personality conflicts. I suffered for Hiao on the day following the election when he seemed unnaturally quiet and withdrawn,

but by the end of the week the miraculous Montagnard optimist had reasserted itself and his alert interest and delight in learning had returned. And working with Lung I began to appreciate the cautious, steadfast quality that had made the Montagnards choose him. Shortly after his election he came to me puzzled and concerned. One of our dimmest young recruits, weary of taking temperatures, wanted to learn medications. I asked Lung what he thought, and he shook his head slowly. The boy was not yet ready..

I was called away at this point ^{and} ~~and~~ the problem slipped my mind, but at noontime I became aware that Lung and the recruit were making a round of the ward, taking blood pressures together. It was an ideal solution to the problem, one which Lung had found for himself and for which he was taking full responsibility, teaching the boy himself. It was the first of many intimations that the Montagnard staff had chosen well.

As December progressed our census rose again. We had a sudden increase in plague and typhoid cases and our lives became complicated by the activities of a doctor from Highland Affairs in Pleiku who organized a series of badly needed trips to Dak Pek, an enclave of primitive Jei tribes well to the north and accessible only by chopper. Dr. Zerzavy delighted in toiling up and down the rugged hills of Dak Pek, seeing patients and referring the sickest (and/or those he could get organized for chopper transport) to Minh-Quy. Often of an evening around six or seven o'clock we would have a sudden onslaught of ten or twenty Jei patients, chattering away in a language no one spoke with

any facility at Minh-Quy and sometimes very sick. And noontime siestas were frequently sacrificed when Bill Rose of Vietnam Christian Service or Père Dujon arrived from the Tan Canh/Dak To area, their land rovers crammed with sick patients. Bill had a talent for locating the sickest of the sick and bringing them in in the middle of lunch hour. "For Christ's sake Bill," I complained one day, "It's one-thirty! Can't you get either an earlier or a later start?"

"Well, you know, I figure you're used to my schedule," said Bill. "We stopped off downtown for a couple of beers to get the timing right. I was afraid if I got in before noon the shock might be too much for you."

So Minh-Quy seethed with activity and between classes and patient care we were all extremely busy. We thought of ourselves now as a medical center, a teaching institution with satellite clinics (Tom's health workers, Zerzavy, Bill Rose), committed to both the extension of health services and the growth and development of our Montagnard staff. It was an exciting time. And it was a time in which I feared renewed confusion, a return to the old underwater world of my early days. Miraculously that confusion never came. It was gone for good, as I realized one Thursday afternoon when, with no clinic and Barbara off duty, Sue, Henning and I had the ward to ourselves.

Overtly, there was nothing remarkable about that afternoon. It was all routine. There was the usual trickle of non-clinic

admissions and the usual problems arose on the ward. For the sicker admissions we ordered lab studies ourselves without waiting for John to make his evening check, and two obvious plagues we assigned to beds and started on the plague regime. Meanwhile I remembered to do the other things I should be doing: to check an output, turn a post-op, ask the aides how the babies were nursing, look over the elevated temps, make IV rounds, see if Hen (rapidly developing hospitalitis) still had diarrhea, chat with Ner, take Anh out to visit the monkeys -- so many nursing tasks usually so difficult to keep in mind. But that afternoon as I moved from patient to patient I had a new and exhilarating sense of control, of competence. John, arriving at five to see if he was needed, glanced at our admissions and began to reel off orders for lab tests. "Mm-humm," I said, smug and self-satisfied, "They've been drawn." And Sue commented with distinct irritation, "You are having fun aren't you?" It was true. I was having a grand time. No half-forgotten tasks nagged at the back of my mind. I knew what I was doing.

Towards the end of the afternoon I paused to check on our new plague admissions. They were holding their own but one, a little girl perhaps five years old, looked utterly miserable. I squatted by her bedside making silly faces. "You can't smile? You can't laugh? Why are you crying? I'm going to cry, too. Have you ever seen a Ya My cry? Doesn't it look silly?" She watched cautiously. "Look!" I said, finding a used syringe in my pocket and holding it out to her. "Do you want it? Oh, oh, oh, don't give me a shot! Oh, terrible pain!" And suddenly she broke into giggles, threatening me

with the syringe while I cried out in mock terror. It was a moment for me of sheer elation. I could talk to these people. Not just to issue orders or ask what disease they had, but to talk, to chat, to clown with a child and, most wonderful of all, to make that child laugh. It was communication across all the gaps: generation, class, culture. For the emotion it engendered there really were no words.

That Sunday Greg and I took the jeep out to Kon Mo'nay Ko'tu to go swimming and I tried to tell him something of my recent feelings. Kon Mo'nay Ko'tu lay just beyond the Old Hospital to the east of town where the Dak Bla had cut a lazy sweep under a mud bank forming an islanded sand-bar. Here one could like in the sun and watch the village life on and above the bank. As always, the scene was filled with activity and laughter. Upstream someone was throwing grenades into the river to concuss the fish and after each explosion, while the water surged, delighted children swarmed into the area, catching the stunned fish bare-handed. Across from our island an elderly couple pottered around their dugout and one or two women knelt beside the water, washing, studies for Gaugin. Little processions travelled the steep trail between the river and the village, chattering amongst themselves, and from the top of the bank children dove with abandon into the muddy water, cutting the air in arcs.

A few days earlier I had been for a chopper ride courtesy of the dust-off boys. They had taken me over for a cautious look at the triborder (Cambodia, Laos, Vietnam -- minutes away by chopper) and then

swung back over the jungle to return in the glow of late afternoon. Seen from the air, the Highlands were a wild and beautiful country: long stretches of matted green over the rugged mountains, deep defiles for rivers with a glimpse of white water shadowed at the bottom. I saw occasional isolated thatched roofs, lonely cleared land, and wondered who lived there and by what accommodation with the jungle and the VC. I had it on the tip of my tongue to ask the boys if they didn't get homesick or lonely flying and then had a sudden clear vision of life at home: picky day to day commitments and responsibilities, traffic jams and squalor, the awful American anxieties over politics and taxes and race and drugs and youth and (yes, that too) Vietnam, the persistent nagging fears of robbery, loss, deprivation, illness, death. This as we flew back low over the city, doors opened to land and everything a whirl of noise and wind rushing past. It was sunset, and the land stretched out in shadows, so green, with pastel houses and mathematical rice paddies, placid cows, groups of little asiatic figures homeward bound. A country at war, an awful war, a corrupt country, an unquestionably dangerous place to be and I had rarely felt so free in all my life.

This was the experience I tried to describe to Greg as we drove home from swimming, pausing briefly to watch a volley ball game in progress at Kon Mo'nay So'lam. Greg, so much older than he had been two months ago, nodded in silence, watching the game. "Look at them," he said. "Aren't they tremendous?" The volley ball players leapt like dancers, smashing their fists into the ball, throwing their bodies into wonderful contortions, laughing, triumphant. "Sometimes"

said Greg, "When I finish up at the Old Hospital I stop off here after work and play with the guys from Kon Mo'nay. They can play rings around me." We drove slowly on, thinking our own thoughts, and after a while Greg said, "Yeah. I know what you mean. That's about the way I feel too."

Oei Xo'nep: Stay in Peace

Christmas was upon us.

Christmas at Minh-Quy was always celebrated with parties for staff and patients given by the Western staff, while at New Years the Montagnards put on a party for us. Pat, who was a kid about Christmas, tried to make each year bigger and better than the last, and we embarked in an all-out effort to make this year's Christmas party the best ever. This would be a special Christmas for Pat. Det's younger brother, Wir, who since their mother's death in a VC attack had boarded at the orphanage, was coming to live with us. He would be Pat's second adopted Montagnard child: "A present to myself," she said casually, glossing over her deep satisfaction at the prospect.

As the day grew closer we were all harassed with preparations. Glen and Barb popped thirty pounds of popcorn, Sue and Helen scoured the market for toys for staff children. Greg went down to Saigon to purchase sweatshirts for the Montagnard staff, Silva and a pilot friend of hers carted blankets in from Old Minh-Quy to be given out with the sweatshirts, I made cards for everyone and wrapped presents for patients on the mistaken assumption that the Hospital census would be 150 (it was 200) and Tom organized games for the employees' children; water balloons, bobbing for apples, tug o' war, and pin-the-tail-on-the-water-buffalo. Down at the Hospital the weavers were putting in overtime. Our cards to state-side friends would include a sample of their skills, a woven bookmark with the word xo'nep on it, the Bahnar word for peace. And there were other weaving projects hidden from our eyes, blankets, loincloths and

skirts for the Western staff. The nuns began to disappear of an afternoon, busy at sewing and embroidery. If called back to the ward they would hastily conceal their handiwork and come running, all giggles and blushes, while we stared blandly into space pretending to have noticed nothing.

It seemed most unlike Christmas: a succession of clear bright days and cool nights with the brilliance of a New England Indian Summer rather than harsh December. And, of course, there was no let up in the Hospital work. Our Jei census continued to grow as Zerzavy persisted with his medcaps and Hrong took to chanting as he gave out meds, singing gibberish in a perfect parody of the cross between Vietnamese and Sedang that appeared to be Jei. Mixed in with the usual batch of advanced T.B. and malaria one evening we received from Dr. Zerzavy a newborn of perhaps four days whose mother had died in childbirth. This baby was a love. It arrived scrawny, miserable, crusted in filth, kept alive thus far by the father who devoted himself to chewing up sugar cane for the child to suck from his mouth. He brought with him a large supply of cane and throughout the baby's brief stay with us before transfer to the orphanage he never stopped chewing. Françoise, (called for the occasion from a mountain of embroidery which both of us pretended was invisible) organized a bath and bottle for the child, and it guzzled the latter in short order and fell fast asleep, wrapped in a clean pink blanket and the picture of healthy and contented infancy while the father, dazed by this sudden turn of events, crouched at the side of the bassinet persisting in the task he had set himself of shredding and chewing sugar cane. Our intervention in that case was one of the simplest and most satisfying forms of saving life. Motherless infants rarely survived in the Highlands.

By Christmas Hen and Ner were both out of traction but neither one was ambulatory. They had graduated to immobilizing casts, and while Ner took his continuing bedrest with equanimity (consoling himself with religious tracts), Hen had developed a first class case of hospitalitis. Nothing went right for him. Like Prim, he suffered from all the minor complaints and he badgered us constantly with them, his morning report now converted into one long grumble. This personality change, combined with a drastic crew-cut, had transformed him from the PhD candidate in philosophy to a sulking storm trooper and despite the slow healing of his bones John was seriously contemplating changing Hen's cast again and letting him try crutches. "If we don't," he said wearily, "I'm afraid he'll just take off and uih kle one of these nights, and then what'll become of him?" We debated the question back and forth, finally deciding that we could probably wait until his wife, now very pregnant, had her baby. They had only one living child of four pregnancies, and it seemed likely to us that Hen would not uih kle until his wife had delivered safely in Hospital.

Angry at the world, Hen had cut off all his hair, but Nglau was growing his again and I asked him about it one day while giving out staff immunizations. "What, Nglau, you're letting your hair grow long?"

"Yes!" he answered fiercely, slapping his chest where dangled a tin mandala on a chain. "Me hippy!" From which I deduced that the course of true love was not running smooth. Helen, observing from her vantage point in the lab, supported my conclusions. "Darn him anyway," she said. "He's so bright and so very erratic and he's doing lousy work these days. Has he broken up with Khuch?" Neither of us quite dared ask Nglau directly.

Meanwhile we continued submerged in preparations for the holidays. It would be a two day affair: staff party on Christmas eve, party for patients and our own Christmas dinner on Christmas day. I wrapped presents (a handful of candy, package of cigarettes and bar of soap per patient) in a frantic effort to keep pace with the soaring census and Helen and Susan despaired of ever sorting out the employees' children. "Look at this, Sue," said Helen. "Chu Deo's got eleven! Eleven kids! And I don't know if the five year old is a boy or a girl!" To which Susan's weary reply was, "Oh, let's forget the kids and just give his wife a supply of Enovid." With three days to go Pat decided that we weren't doing enough for the patients. "Vincent's got some care packages left," she said. "Why don't you see if we can't give a toy to every child in the Hospital?"

I stared at her in amazement. "You mean the sick ones, Pat?"

"Oh, what the Hell, try and get toys for all of them. Spend some money if you have to. These kids don't have anything."

So we ended our preparations in any orgy of buying and wrapping for the mass of children who milled around Minh-Quy and whose numbers defied estimation.

The great day dawned clear and hot. Greg organized the mechanics at the ice-cream churns where they produced gallons of soupy vanilla while Glen arrayed himself in a Santa Claus suit -- scrounged, of course -- and circled the Hospital grounds ho-ho-hoing all over the place as mothers shielded their children's eyes from the awful sight. The party for the employees and their children rapidly degenerated into a free for all of spilled ice cream and burst water balloons and wild high spirits.

Everyone got into the act including Vincent's dogs who scented good hunting in the dusty Hospital yard. Pat gave out presents amidst the chaos trying desperately to sort them so that those who lived farthest away would get their gifts first and be off the roads by dusk when the VC emerged, and by the time we staggered up to the house night had fallen and the Hospital grounds looked like nothing so much as the aftermath of a tornado. On Christmas day the guests arrived, Dr. Zerzavy, Dr. Connelly of the AMA's Visiting Physician Vietnam program, and Dave Gatti, the surgeon from]4th Med (now officially 67th Evac) who had paused en route to do an emergency spleenectomy on one of our patients. Dr. Zerzavy was immediately pressed into service in the Santa Claus suit, which he filled to perfection, and we made rounds, dispensing kool-aide, donuts and presents to the patients from a stretcher, while his face grew crimson in the ninety degree heat and I wondered about the odds on apoplexy. Up at the house Pat sat surrounded by a bewildering array of Sears Roebuck toys while the children, Det and Wir, played under our dry and droopy Christmas tree. Wir had diarrhea, copious and indiscriminate, for the entire two days of Christmas and, with his orphanage background, spoke only Vietnamese which meant that of us all only Giao the cook could communicate with him. But he was a stalwart little guy and neither the diarrhea nor the language barrier stopped him from thoroughly enjoying his Christmas. Corvino threw herself into an orgy of cooking (the nuns had been fattening a turkey for us for weeks) and produced a classic American Christmas dinner of which Glen, Susan and I had only a taste because we were downtown looking for more presents, this time for all the aides who had mysteriously turned up to eat with us. It was two days of total chaos and a howling success.

There was a brief lull after Christmas filled with the usual Hospital concerns. Hen's daughter, his one surviving child, abruptly came down with measles, very nearly the last straw for Hen. "At least," said John, "That will keep him in the Hospital." But he watched over the little girl with concern almost equal to Hen's, dreading the possibility of measles pneumonia which, amongst the Montagnards, was often more devastating than plague. Fortunately the child had a light case only, and as she regained her health Hen's depression lifted if only marginally.

Meanwhile Pat, Gabrielle and the Bishop (Monseignor Seitz, the only remaining French Bishop in Vietnam) busied themselves with arranging Anh's adoption. Pat had had her way there. Anh would not be returning to the uncle who, Pat claimed, molested her, but would go to a new family, and the little girl, ill so long and now so pert, cheerful and mischievous, was herself delighted at the prospect. She had picked up Bahnar during her long hospital stay, and like Hen had become a self-deputed member of the staff, reporting on the ills of others and helping the aides at their daily chore of washing down the beds. We would miss her sadly when she left at last.

By some miracle New Year's day was quiet at the Hospital. Rounds ended early and the afternoon brought a splendid jar party arranged by the Montagnard staff and held in a dusty corner of the Hospital yard. All the staff had put on their traditional finery, loincloths and tight fitting embroidered black vests for the men, black skirts and blouses with woven trim for the girls, and despite an occasional anomaly (Gat's psychedelic apple-green knee socks) they looked fine. Lung delivered a formal speech, Pat responded, the staff en masse sang a song of praise

composed for the occasion and we were presented with our gifts, a wonderful array of Montagnard skirts, blouses, loincloths and blankets which of course we all had to don immediately. My skirt, a handsome length of black cloth with purple, green, red and yellow trim, bore a message woven around the hem: "Oei xo'nep," they had written: "Stay in good peace all the time while alive, each day becoming better than the year before: O Ya, all of us greet you very respectfully." My thanks seemed more than usually inadequate.

It was a superb party. Not only the staff but the surrounding communities had supplied jars, including Ner's village of Dak Ko'dem and Hen's of Plei Ko'bey. The dusty Hospital yard was gay with parachute silks and carved wooden ornaments, and as we sampled the jars we were entertained by the gong players and the Montagnard mummers from Kon Hring, an ageless, sexless couple in gunny-sack dresses, floppy white gloves, and grotesque masks, who danced shuffling around the periphery, engaging in mock battles, amusing, archaic, vaguely threatening. Hiao, in his traditional outfit, was a splendid sight and I drank a full measure (an inch and a half off the top) at Yin's jar to atone for my evil thoughts. In no time at all we were all reduced to a warm and mellow haze of good fellowship and simple pleasure, in the midst of which to my sorrow I elected to make one last round of the ward before abandoning myself to the festivities. On the floor of the entrance hallway I half stumbled over two young men, battered and bleeding from a VC mine. It was the end of the party for me. John swung into action (the rest of us were in no condition to be much use) and organized the departure of one patient to Dave Gatti back in Pleiku, while the other went back to our own O.R. There the New Zealand surgical team from Qui Nhon, our guests for the

party, scrubbed and coped. And I went up to the house and had an unforgivable scene with Pat.

In fact I was probably as angry with myself as I was at her, but I had had far too much rice wine to be reasonable and I dumped all my frustrations at the spoilt party, at the endless demands of Minh-Quy and at my own sodden state squarely in Pat's lap. "It's your God damned Hospital," I hissed at her while the gong players circled the yard serenading us. "Why the Hell aren't you down there when you're needed? Why the Hell should our guests have to cope? God damn it, why should you be up here enjoying yourself when there are sick people down there!" And then, appalled, I fled to my room in tears. Pat followed. "You know, Hilary," she said gently, "Why shouldn't I have fun today? The Hospital is in good hands. There are surgeons down there who know ten times better than I what to do. Why shouldn't I have fun? There have been so many years when I've been alone here, when I couldn't relax and drink the jar and enjoy myself because there might be casualties. Today there are other doctors here. And you know, these are my people. It means a lot to them. These are my people and they love me." My humiliation was complete.

Sometimes of an evening Susan and I would talk about Pat: what made her tick? How had she done it? How did she keep going, year after year at the back of beyond, in the middle of nowhere, with a war on? In some ways that night gave me the answer. Pat had two things that many people in Western civilization seem so desperately to lack: an area of proven competence and her people who loved her.

At home Pat was billed as the Schweitzer-Dooley of Seattle. I

had come to Kontum prepared to meet an autocrat and the professional demands and occasional displays of temper had at times reinforced that expectation. But she was not a prima donna. She was a human being who had her priorities absolutely straight, and these included a certain standard of care at the Hospital, the welfare of her boys, Det and now Wir, and a recognition of her own need for professional and social satisfaction. She was isolated in Kontum and being a social person made social demands on her staff (bridge, scrabble) of an evening to which we were sometimes too tired to respond with much enthusiasm. She was also an extraordinarily competent medical practitioner and thus made professional demands on all of us that were at times difficult to meet. Since the standard of care at Minh-Quy was to her a "given" (albeit one which required constant surveillance) she rarely gave praise or thanks. You do not thank people for breathing or eating or sleeping: those also are "givens". In time most of us came to recognize that our labors would be met with no conventional forms of gratitude but rather with an acceptance of our own areas of competence which meant far more than facile praise. But it was a tough lesson to learn. There had been several occasions, as during our surgical orgy, when I had been sadly at odds with Pat, but after New Years I came to see her not as a personality to conflict with but as a person to care about. I had lashed out cruelly at the autocrat that evening and the human being had responded generously, not with a rebuke but with a plea for understanding. "The Hospital is in good hands. Why shouldn't I have fun? These are my people and they love me."

The village of Plai Nao, across the river from the Hospital and Kontum Ko'nam, gave us a separate party of its own over the holiday season in gratitude for the care Minh-Quy had given to so many of the villagers. Plei Nao stood on a high bluff facing north with a fine view of the Dak Bla and Kontum, a neat and tidy village, solidly built and laid out with more precision than most. It was a brilliant day of sun-light, scudding clouds and gusts of wind raising dust devils, and the village was en fête for us. All along the central pathway were jars tied to stakes, twenty or more of them, the stakes themselves bedecked with tropical flowers, and once again the traditional dress of black cloth brightly embroidered was much in evidence. The gong players met us on arrival, playing in formal procession around the jars as we sat and drank, and breaking off for speeches. The young girls danced, a slow, absorbed line, little fingers linked, moving with small ritual steps, and without much urging Pat joined them, relaxed and happy. There were broad smiles all around, great pleasure at the sight of Ya Tih dancing with the girls of Plei Nao. Perforce she had to sample each jar and extol its merits, and as she sat over the wine chatting with old friends from the village, the mothers brought their children, shy and a little reluctant, to be inspected and to thank her for her care. This one had had the infectious disease of the rat (plague), that one fever (malaria), that one cho'roh-hak. Now they were well. Bo'nê ko'Ya. The gongs, solemn and insistent, played on in stately rhythm, and the wind tore at the flowers decorating the jars. A day of gusts and gleams and laughing, innocent pleasure. Barb Corvino, moving from group to group, exuded an almost painful happiness, an intense young figure with an air

of collecting this moment -- and this -- and this -- to save in memory. She would leave Kontum two days hence. Gabrielle watched over us all like a mother at a children's party. She refused to join us at the jars, but several bottles had been siphoned off and put in the jeep. These would disappear into Vincent's back room and not be seen again. "Oh, Gabrielle," I said, shaking my head. "You will drink later with the other nuns?"

"No, no, Ya Hilary," she answered. "It is for the others who could not come today. For the nurses at the Hospital."

"I think it is for you and Vincent and Françoise and the sisters!" I said, and she laughed at my wicked suggestion, shaking her head.

Susan and I left early and reluctantly to see to clinic, stopping on the way back at CCC and persuading Mike Dwyer to come with us. That day it seemed to both of us appropriate that Pat should stay with her people. Dwyer could cover in her absence. The village held such warmth and laughter and happiness: it was an occasion to cherish and prolong, in fact and in memory.

For me the party at Plei Nau marked the end of the good times. There were no dramatic changes at the Hospital, but throughout January there was a steady increase in the burden of work until by the middle of the month we were back at the level of activity that had worn us all down during the great surgical orgy. And there was a new anxiety: we were running out of money. Fund raising had always seemed to us, inundated as we were by patient care, a minor concern, and we had always assumed the money would be there. Now, abruptly, our primary financial resource,

Kontum Hospital Fund in Seattle, informed us that the money wasn't there, and we threw ourselves into a tedious round of fund-raising activities. And for me there was the added responsibility of running the ward. Barb Corvino had departed on December 30th, seen off by very nearly the entire Hospital staff, Montagnard and Western, all of us biting back tears.

There were compensations. Shirley Chu had returned to start her midwifery program on the very day Barb left and her arrival was a great relief to Susan and myself since neither of us had much confidence in our ability to supervise deliveries. And in mid-January Dr. Louis Braile, chairman of the board of Kontum Hospital Fund, arrived to ease both the burden of work and our tension over finances -- and other matters.

For the old quarrel between Henning and Shirley still rankled, and while they pointedly avoided each other at the Hospital both complained at length and bitterly to me. "It is not possible you talk to Shirley? She take Hiao when I need him, she leave her things in my treatment room -- ! Ah, no, it is too much, too much." And, "How can you put up with him? He's so arrogant. You'd think nothing went on here but his precious dressings! And he leaves his dirty old stuff in my clean delivery room. Can't you talk to him?" It was the kind of personality conflict occasionally found in well staffed Western hospitals where there is time to indulge it. At Minh-Quy it was a constant background irritant for which none of us had time or energy.

Dr. Braile, a general practitioner, was one of the few KHF board members to have seen Minh-Quy in action, having already spent two tours in Kontum with the AMA's VPVN program. He had ^{an} _{inner} strength and ability

to take things calmly as they came which served us all well in those difficult days. Within hours of his arrival he was functioning not only as a physician at the Hospital but as a confidant to the staff in our various conflicts and frustrations. "But what am I going to do about Henning and Shirley? They just can't work together. And is KHF really going broke? We've got to keep going, Dr. Braile, you know that. We've just got to!" This from me, from the others similar anxieties. Dr. Braile listened, posed questions of his own, distributed judicious praise and support. His approach was casual and low-key and he treated us all with a courteous interest that was wonderfully effective.

Meanwhile there were growing rumors of impending military activity. On January 16th Tom informed us of the latest MACV scuttlebut: there were said to be twenty-four thousand NVA massed at a distance of two hours by foot from Kontum and the American Military were contemplating evacuation. A few days later John announced at lunch that we were in for a mock alert. "Are we supposed to do anything about it?" Susan asked.

"I don't suppose so," said John. "My only plan is to make it through clinic."

There was a huge crowd for clinic that afternoon, a milling mass that seemed to fill the Hospital yard, while on the wards I was immediately confronted with a variety of emergencies. At first I was too preoccupied to notice the gunfire, a sharp rattle from the street outside. And then it was an outburst, a great blaze of wicked sound rushing closer, surrounding, enveloping the Hospital. The yard was sucked dry of patients in a dusty breath, the ward mobbed. I argued with myself: got to get this IV going . . . that's coming closer . . . mock alert . . . maybe

. . . they're going to kill me . . . the IV . . . no place to hide . . . the floor . . . what good does that do? . . . patients . . . so vulnerable. The noise broke over the building in waves. Slowly, silently, the Montagnards settled to the ground. There was no hysteria. They knew all there was to know about being under fire. I wondered what the bullets would feel like. The gunfire was deafening.

Nglau broke the news to me: "Ya Hilary, uh ko'dei Viet Minh. It is only to get ready. The VC do not come now." He yawned elaborately, self conscious as the only one of us still on his feet and working: "It is very boring."

I answered bitterly, "Man, you're a cool head, Nglau," which he took as a compliment, missing the caustic tone. I was furious. How dare the damned military interfere with Minh-Quy, with me, with caring for patients in this fashion. All afternoon the rattling gunfire continued in sporadic outbursts and I went about my work shaking with rage. Tom, returning from MACV, reported that the alert had gotten out of hand: "Christ almighty, they damn near shot down the Province Chief in his observation helicopter!" He roared with laughter. I was not amused.

That night I arrived at work to find the edict had gone forth. Gabrielle sat waiting for me at the nurses' station: "You do not call Bac-sy tonight." I was taken aback. There was still some shooting in the streets and the occasional angry buzz of helicopters usually silent after dark, but it seemed no less safe than usual. Still, I know better than to argue with Gabrielle. "Right on," I told her. "We'll take care of any problems. You and I. O.k.?"

She laughed and continued to write her letters, a self-contained,

powerful little figure. "Bo'né lo' lo'," she said. "You understand. Thank you. The Bać-sy laugh, but you understand." I didn't understand at all, but Gabrielle was not to be trifled with. "O.k, Ya Gabrielle," I said, and went off to make my usual rounds.

And of course it was a bad night. At two the boys called me for an old friend, a meningitis patient who, after weeks of illness, had seemed to be responding at last. Now he lay with his head cradled in his mother's lap and though he still breathed his mother was chanting the moi. One touch of his chest told me his problem: pneumonia. Suctioning brought up vast quantities of the creamy, foul smelling sputum characteristic of a pseudomonas infection, a kind of pneumonia that is always difficult to treat. I told Lung I was going to call the Bać-sy. He stared back, giving me his most impassive look, and shook his head: "No." About Lung, as about Gabrielle earlier, there was an atmosphere of authority that brooked no argument. With both of them I was up against an absolutely unmoving determination. On no one's orders but my own I put the patient on a staggering dose of penicillin and gentamycin, and for the rest of the night I sat with him, suctioning him every hour until he died at six.

The day that followed was a nightmare. Casualties drifted in all morning and the afternoon brought another massive clinic. I don't suppose we could have had more than twenty admissions, possibly only fifteen, but they seemed to come in an endless stream. Zeke, the clinic translator, was at my elbow every time I turned around with yet another admission chart: "Doctor, sir, this man very sick. You give bed?" Zeke was epileptic and mildly brain damaged and his English, which was vivid, had

been learned at CCC. We were all, regardless of training, "Doctor sir" and any patient, whatever his age or sex, was "this man" and usually "very sick." Zeke had endless energy and enthusiasm and minimal intelligence to go with it. He was as eager and as clumsy as an overgrown puppy, and he generally appeared in the midst of some delicate procedure, dropping the admission chart onto a sterile field or grabbing my arm just as I got the needle into the vein. Having then destroyed my IV Zeke would comment on the gushing blood with his standard words of disapproval: "Oh, number fucking ten," and, entirely unabashed, "I sorry, doctor sir." The one and only high point of that afternoon occurred when, tried beyond endurance, I commented sotto voce to Zeke's departing back, "That's right, Zeke, you go back to clinic. Because you, Zeke, are number fucking ten." The entire ward burst into roars of laughter and I realized with horror that they had understood me.

For the rest there was nothing humorous about the afternoon. I gave bed: to malaria, diphtheria, plague, head injury, burn, tuberculosis, pneumonia, cho'roh-hak, malaria, measles, wound infection, tuberculosis, plague, pneumonia, meningitis . . . On and on it went. Meanwhile the crises multiplied: All the IV's ran dry; a drunk passed out in the back ward; I ran out of beds (for the third time), snapped at Helen and apologized in tears; one of our mothers-to-be (not, thank God, Hen's wife) went into frank hemorrhage and had to be transfused while John completed the abortion that had begun spontaneously; and a woman in labor, newly admitted, ruptured her membranes and the cord prolapsed, the complication Pat had warned me of so many months ago, a life-threatening situation for the baby. Shirley coped with that one, thank God, holding

the baby's head away from the mother's pelvis while John went to call dust-off. A chorus from the ward persisted through all the crises: "Ya Hilary, Ya Hilary, ji deh! Ya Hilary!" And Dr. Braile (Pat was in Saigon on business) kept admitting. "Doctor sir, this man very sick, you give bed?"

At seven-thirty Susan, whose day off it was supposed to be, came down and forced me up to the house to eat. At eight-thirty I returned to find that the fetal heart on the baby whose cord had prolapsed had gone. The child was dead, a sad ending to a life scarce begun. At nine came the last of the admissions -- to sleep on the floor and the X-ray table and in the treatment room. I made cursory IV rounds, called for hot sweet tea for myself, and collapsed at the nurses' station where I found Dr. Braile too weary to get into the jeep and go home.

"Quite a day," he murmured. "You must be exhausted."

"You too." I poured him a cup. "Tea?"

He nodded, tired, thoughtful. "They say there's fighting on the Pleiku road." We sipped our tea. "Hilary, what kind of a future do you suppose Minh-Quy has?"

"Oh -- " I paused, unsure of what the question meant. "Are you thinking of KHF?"

"Partly, I suppose. It's hard for them having no concrete assurances of the future. There's a feeling sometimes that this is a pretty fragile operation, what with the war and the uncertainty of continuity here. Oh, I know, I know," he continued at a gesture of protest from me, "I know what we'd all like to see here, The Minh-Quy Medical Center, the satellite clinics, the public health and preventive medicine programs,

concrete, specific training for the Montagnards, all that. But what happens if the road is cut? Or if you have to leave? What then?"

"But if we close down today because of what might happen in the future, what happens to the patients?" I asked him. "Some may die anyway, but if we close now because of a hypothetical threat, dozens of them will be dead by tomorrow for sure."

Dr. Braile nodded, acknowledging the point. "And the strain on all of you?" he asked.

"Oh, we're young enough to bounce back," I said, hoping from the depth of my fatigue that it was true. "Look you arrived at a tense time and we all dumped a lot of problems on your lap. It may have given you a somewhat distorted view. Sure, there are tensions and strains, but those pass. We blow off steam if we have to, or the work eases, or someone new arrives. But there are over two hundred patients in this hospital. Christ, the way clinic went today there are probably three hundred. It's a going concern with its own momentum. You can't stop a thing like this just because Shirley and Henning don't get along or the work's hard or the VC might cut the Pleiku road or money's tight in Seattle or we've been too busy for P.R. work. None of that stuff is even relevant to what's really going on here. What really matters is -- well, Hen, Ner, Anh -- " Drunk with fatigue, I was waxing rhetorical. "I mean you see it, don't you?"

He nodded again. "I see it. I'm down here in the woods with you, looking at the trees. But that's hard to communicate at home where nothing's visible but the forest." He paused, considering the conversation. "And if this offensive materializes? If you have to leave? If Pat has to leave? Can the Montagnards carry on?"

"Mmm." It was like Dr. Braile to pose the tough questions. "Not yet. Not indefinitely. For a time, perhaps. John thinks that's really our main job, you know. He may be right. But, Dr. Braile, those are ifs. There are ifs to anything. If you reason that way you wind up never even getting out of bed because you might fall down the stairs. If we close tomorrow our patients will die."

"Yes, he said, granting the point, storing it away for future reference. "Well, you need some sleep. So do I, I guess. I hope they don't call you tonight." But of course they did. With so many patients so acutely ill, rest was out of the question.

As I had predicted to Dr. Braile, the work did ease, but there was little relief from the fear of attack. Colonel Wood, the MACV C.O., decent, concerned and troubled, arrived one evening after dinner to tell us we should prepare to evacuate all non-essential Western staff for Tet, the second week in February. With him was an old friend, Hoagie, the sergeant who worked with the people's militia. Wood gave us a soldier's talk, a none too subtle mixture of warnings and sugar coating. ARVN's come a long way, he told us. They (the NVA) can't take Kontum. We'll fight outside the city. You'll be the first ones out if there's trouble. We've laid it on the line to the Province Chief. Minh-Quy comes first. But of course, we won't evac you all unless we have to. We're kicking their shins already and we really think ARVN can do it. Hoagie was franker: "If I come to get you," he said, "You'll be ready to leave. If things reach that point, you'll want out."

Afterwards Susan and I discussed the situation together. Our talk with Colonel Wood had been inconclusive. We had agreed to send

some staff to Nha Trang until after Tet: Greg, Helen, and Silva would go, and with them Det and Dich. Wir, his adoption incomplete, would return to the orphanage. Pat adamantly refused to leave, and John, Henning and Tom were equally firm. The rest were undecided. We would discuss the matter with the Montagnards the next day.

"But damn it," Susan said that evening. "Why should we have the right to go? What makes us so special? What gives us such privileges? They can't go. They've got to stay here and take what comes. Why should we be able to leave?"

Sue, less self-protecting than I where caring was concerned, was caught in an emotional bind. From the first she had been sensitive and responsive to the Montagnards, generous with her affections. How could she leave them now? "It must mean so much to them," she said, "And what gives us the right to go?"

"Yes," I answered, fighting my own battles, "But if we go, we can come back. And if we stay we may be endangering them. Or adding to their burdens. You know they'll worry about us, try to protect us."

Sue said, "Maybe that isn't what matters. Maybe what matters most is just to be here. Oh, Christ, I wish I weren't so scared." We were both, when we had leisure to think about it, terrified. One of our patients had recently been knifed to death and Susan and I, against all reason, were both convinced the VC had done it.

Phach had brought us the news, arriving in the middle of lunch hour on his bicycle, breathless with the exertion of riding so fast. "Ya! Ya! Bed nineteen has cut herself!"

"Wha-at?" Pat drawled in response, her two-syllabled word of

surprise or disapproval. Susan, Dr. Braile, Helen and I leapt into the jeep to go see what the problem was. At the Hospital we were met with cries from the other patients: "She is dead!"

She lay wrapped in her blanket, a worn piece of tan cloth, the colors of the woven trim faded with use. Drawing it back, we saw first the hole in her neck, a deep incision into the trachea. Then the abdominal wound came into view. It gaped open, the full length of her stomach, an ugly gash out of which intestines spilled onto the skin and lay in yellow loops still bubbling with gas. There was little blood in the wound, but a puddle on the floor beneath the bed. Yin said helplessly, "I thought she was asleep. Her blanket was over her head. She looked asleep. Then I saw the blood dripping."

The Vietnamese police came, questioned the woman's husband, Phach, Yin and the other patients, and left satisfied that it was a suicide. Pat agreed. "Be reasonable, Hilary," she said. "How could anyone get to her? The ward's jam packed. It must have been suicide." But I was not convinced. I could see it so clearly. The initial neck wound, cut through the vocal cords so that she could not cry out, and then that vicious thrust to the belly, the message clear to all of us: "Look. We are here. We can come right into your hospital and this is what we can do."

On the day after Colonel Wood's visit, Pat opened the Montagnard staff meeting with a few business matters and then moved on to the military situation. We realize, she told the Montagnard staff, that the situation is serious. I will stay in Kontum, she said, and probably

those who watch the sick people will stay. The rest will leave early in February for Nha Trang and take the children with them. She compared the situation to the Viet Minh occupation of '54 and Tet of '68 and told them she thought the Hospital would not be hit, the major military installations being on the other side of town. However we would start stockpiling supplies in case we could not get out to the warehouse at Old Minh-Quy and Glen and Greg would make sure we had gasoline and water on hand. The staff were silent. Tom, looking half asleep, said, "Ask them if they think the VC will come to Kontum."

At first only Lung answered, rather diffidently: he did not know but the VC said they were coming to Kontum. "Where do they say it?" asked Pat. "Who do they say it to?"

"Last night," said Lung. "In my village. Three VC came into the village and told us to turn in our guns. They will use them in the attack on Kontum. They will not hurt the village. They want only to take Kontum."

This was the first shock for Pat. "Do you believe it?" she asked.

Tom, still watching the situation develop, said, "That's what they told me in Plei Po'du the other day. And all last week in the villages north of here, up around Dak To area. The VC are collecting guns to use in the attack on Kontum. They say they'll leave the villages alone."

We watched Pat adjust to this. "Well," she said, "It won't be any worse than Tet of '68." She grinned at her staff. "If worse comes to worse I'll put on a habit and pretend to be one of the French nuns.

I'll pretend I'm Sr. Marie-Renée!" Very quietly Gabrielle told her that the nuns were planning to put on lay clothes. They felt the habit would jeopardize them. Again, the shock hitting Pat was visible. "Do you believe it?"

Siu Kot, Tom's assistant, spoke up. They claim, he said, to have a hundred planes on the border -- "Planes?" asked Pat -- and over fifty tanks. Meanwhile Shirley was caucussing with the nuns. Now she spoke up. "Yes, yes!" She was vehement. "They say you should go. If you go, you can come back, but if you are killed, what will happen to the Hospital?" Pat began to have a baited look, at bay. Shirley, on her feet now, called out, "They are right. You should go."

"And the patients?" asked Pat.

Vincent answered, tough as nails. "Let them die. The important thing is for you to live. We will watch the patients here. You must go."

"But we can hide in the villages if we have to," Pat said, "As the Vietnamese did in '54."

"What villages?" It was Hrong, the irrepressible grin gone from his face.

Pat's head came up as if in response to a blow. "hunh?"

Lung said, "They will come for you in the villages. The ARVN will tell the VC where you are and they will come for you."

From the back of the room Vincent added, "It is not like '54 or '68. The VC are different now. You do not know what they will do. They will not let you live."

"Do you want us all to go, then?" Pat asked, incredulous. "All

of us? Me, too?" And the affirmative was immediate; "Yes," like a sigh of relief from all sides. Pat, usually so decisive, hesitated, head down, stubborn.

"Tell them we can't decide now," I said. "Tell them we have to think about it."

"yes," she said, "I supposed that's what I'll have to tell them." But she stumbled over the words of her answer. And suddenly Chu Deo, the clinic registrar, was on his feet, leading a burst of spontaneous applause and on that note the meeting ended. Pat, I thought, looked suddenly aged and drawn.

I went up to the house and sat talking to Glen on the veranda in the glow of an evening sun, a quiet evening, the hills green under a few insubstantial clouds. Glen was a good listener, thinking, weighing responses, tuned in to the conversation. We agreed that probably all of us should go. We thought it likely that few of us would. "It's been so peaceful here," said Glen. "So easy to forget the war." He was right. All those signs of war I had found so horrifying when I arrived were only parts of the landscape now. I had forgotten that there was a war and that it could come to Kontum. The excitement of the months past faded before that threat; the election, the teaching, my own increased confidence, the growth of the Montagnards. My fine speeches to Dr. Braile were forgotten. War was a fact and it was coming here. I was scared. I wanted out.

Helen, Greg, Glen, Shirley, Silva and the children left for Nha Trang on February 4th. Dr. Braile, homeward bound, and I followed on the 7th. Pat and Gabrielle came to the airport to see us off and I could look at neither one directly, face to face.

"It Just Isn't Fun Any More"

Nha Trang was a coastal resort, set on a great sweep of beach on the South China Sea. We played on the beach, swam, sailed, ate out in luxurious French restaurants and were all utterly miserable. Only Glen and Helen managed, at whatever cost to themselves, to maintain a semblance of equanimity. The rest of us, in our various ways, plunged into profound depression and it was a huge relief, after Tet, to return to Kontum. There had been no attack over the holidays.

On the surface Minh-Quy was unchanged. Hen's wife had had her baby, a healthy little girl large for a Montagnard, Ner still studied his tracts, Anh had gone to her foster home and seemed to be thriving. The ward bustled with activity. The census was up but Susan reported that on the whole they had managed very well over Tet. Tom had moved back into the Hospital and Henning had come into his own and performed like a trooper, emerging from the treatment room to help out on the ward, his fits of moody irritability vanished. But the experience of Tet had brought us all a new awareness of war which continued to hang over us and was frequently reinforced by external circumstances.

Driving north one day with Tom and two television reporters to visit Dak Ri, a village west of Dak To where Tom had two health workers, I got my first real view of the military at work. We rounded a bend in the road to find an APC (armored personnel carrier) slewed into a ditch and beside it a green body bag conforming to the outlines of its dead contents. From ahead of us came the sound of mortar fire. The reporters were eager for news and so we nosed our way cautiously down the

road, passing a group of Montagnard mercenaries from whom we got conflicting reports. It had been an ambush, one man dead and five wounded, three were dead and fifteen wounded, there were ten VC, twenty VC, fifty VC. Whatever the facts, the ARVN were out for blood and we stopped to watch, the reporters trotting briskly down the road to the scene of the action, Tom and I remaining prudently with the jeep some fifty yards away. Mortar shells were being lobbed into an open area of scraggly underbrush, spotter planes circled overhead, fires smoldered on all sides, apparently in an effort to smoke the enemy out, and little military men trotted this way and that, seemingly at random, guns at the ready. Directing the whole operation was an ARVN officer who stood atop another APC very upright, very correct, gesturing with what appeared to be a silver swagger stick. The whole affair had a cinematographic atmosphere. I half expected the legendary D. W. Griffith to arrive and move the cameras into position. Tom said, "I suppose we really ought to be down in the ditch," and so we got out of the jeep and sat feeling foolish by the side of the road while the sun shone brightly and the ARVN circled back and forth like bird dogs chattering to each other, and the shells continued to burst. Despite the cinematographic effect it was oddly lacking in drama. Mr. Griffith had not yet appeared to pull it all together. At any moment someone in authority would call out "Take twenty!" and all the little military men would put down their guns and produce lunch boxes containing sandwiches of Wonder Bread and tinned chicken salad -- just a bunch of guys out on a job, like hard-hats the world over. After a while, as the search for VC moved further from the road, Tom

said, "Well, I guess we might as well go on," and, dusting off our blue jeans, we climbed back into the jeep and drove to Dak Ri. It was as casual as that.

For a time, too the incoming increased. One morning a rocket landed two blocks away, sending those of us at the house into the bunker, Giao shaking and praying, Wir wide-eyed in fuzzy yellow sleepers, Khuch and Det alert and interested. There were a few more distant bangs and then a loud whistling that caused Pat to reach for Det and say in anger and despair, "Oh, God, here it comes." But that one was a dud and after a while Giao and Khuch decided that the breakfast eggs were probably overcooking and wandered back to the kitchen and we followed. The nuns told us of a young man who had come to the convent asking where the house of the Americans was. The sister at the door said she didn't know but would find someone who did. Then she sent for the People's Defense Force, the juvenile militia Hoagie worked with, and they took the young man prisoner. He was with the VC. And for the first time since I arrived at Kontum we could hear the B-52 strikes, shaking the house like a minor earthquake although they were still miles away from us.

Thus, although Kontum remained quiet, the war was with us and could not be forgotten as it had been before Tet. But often it subsided into the background. Classes started again and I began to give out tests on medication dosages which were a great hit. I was pleased to see how well the boys did, but more than that I was overwhelmed by their sheer delight in being tested. They greeted the tests with enthusiasm, compared results with alert interest, relished the errors of others and

were entirely unabashed by their own. The tests invariably ended in a joyful free-for-all discussion of mathematics at the nurses' station: "No, no no. It is wrong. You must divide. not multiply here. If you multiply you will kill the patient!" "Aah, yes, yes, I forgot! It must be divided!" And they would teach each other while I looked on, bemused but stirred by their excitement.

On Sundays I usually had the Hospital, staff and patients, to myself. The other Western nursing staff took Sunday's off and while Pat or John made cursory rounds and were available on an on-call basis, it was essentially a day of rest for them as well. I took my day off on Saturday and so was always there to cover the Hospital on Sundays. I enjoyed it. If I stopped to think about it it was of course absurd that I should be responsible for a place the size and complexity of Minh-Quy, but by and large the Montagnards gave me all the support I needed and I rarely troubled to question my expanded role. Often Sundays were rather like the quieter nights of night duty, a chance to do a little off-the-cuff teaching, to chat with the staff, visit with the patients, clean house, play with the babies. A chance, too, to sharpen my skills, for Sunday was honda accident day when the CCC graduates and Saigon cowboys mounted their motorcycles and rode off in search of whiskey and eventually wound up with cuts and lacerations on our doorstep, convinced they were dying and smelling of xik. My suturing ability improved dramatically over a series of Sundays, but that aspect of the day was depressing. One saw the coming generation of Montagnards, the ones most likely to survive, and they were not attractive.

Unless he was working nights Lung was generally on duty on Sundays and often it was a time when he and I could discuss some of the problems he faced as chief nurse. Lung had loosened up and chatted with me far more freely these days an appealing smile lighting his oiled mahogany face. Unfortunately I found both his Bahnar and his

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were entirely unabashed by their own. The tests invariably ended in a joyful free-for-all discussion of mathematics at the nurses' station: "No, no no. It is wrong. You must divide. not multiply here. If you multiply you will kill the patient!" "Aah, yes, yes, I forgot! It must be divided!" And they would teach each other while I looked on, bemused but stirred by their excitement.

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The aides returned the charts to me in paroxysms of mirth, pointing to the missed medications while Tom shouted down the ward the Bahnar equivalent of, "Shape up or ship out, Smith!" and all the patients roared with laughter. We left work late that day, but I returned home contented. Beh, I had found, was after all making progress. He had done well. And I had thoroughly enjoyed the contact with the patients, their generous laughter, their apparent joy at my presence amongst them.

There was, then, no real change in the staff or in the patients. The boys remained eager and excited by any prospect of learning, the patients were still wonderfully gay and dauntless for all their deprivation, poverty and illness. There was the same clutter of baskets and tattered lines on every bed, the same naked brown children still tumbled underfoot, Vincent's dogs still wandered through the aisles, Hiep was still ro'gei, Hrong still grinned, Gabrielle's strength and energy were undiminished, Gat still trotted to and fro puzzled and conscientious, Hiao's flashes of quick intelligence still continued. And yet somehow it was all changed. Somehow I had lost touch and as March progressed I found the pleasure of simple contact with the Montagnards steadily decreasing. The good times came less frequently and when they came brought with them a vague threat, a sense of foreboding. Walking to and from the Hospital on those March days under skies heavy with rain soon to fall, we would smell smoke in the air and watch ominous brown clouds rising from the hillsides where fields were being burned for cultivation. The smoke blotted out the sun, casting over Kontum an eerie, end-of-the-world glow, adding to our sense of impending doom. "I don't know," said Susan, "It just isn't fun any more." She was right. Somehow the spark

had gone. Perhaps it was the new awareness of war that came between the Montagnards and me (my new awareness: theirs was as old as their lifetimes.) Perhaps it was the tension that still existed between Shirley and Henning. Perhaps, having been through Nha Trang, I was laying the groundwork that would protect me should such a situation recur, deliberately keeping my distance. Perhaps I was tired. We were expecting a new nurse from Switzerland, Rita Lampart. Once Rita came, I promised myself, I would take a week's vacation, go to Penang, lie in the sun without thinking, and hopefully return with some of the pre-Tet enthusiasm and a renewed ability to find what Susan called input at Minh-Quy.

In the mean time such small satisfactions as came my way had about them an already nostalgic aura, as if they were remembered pleasures rather than present contentments. Once, crossing from the dining room to my bedroom on a night of rain and lightening I came across Giao crouched in the grass, trying to tell Glen something. Glen stopped me for translation. "Bih," said Giao. "Bih lo' lo'!" and she looked at me eagerly. I told her I didn't understand. "Bih, Ya! Bih. Like this." She gave a graphic demonstration of a bih undulating through the grass and I remembered that a bih is a snake and we all laughed in delight at communication. "Hâm, ya!" cried Giao, and she went on to tell us about the many big snakes -- as big as her leg which she clutched repeatedly to drive the point home -- so big -- that she had seen of late. All the while she giggled like a girl. Montagnards and Vietnamese both like to eat the bih, she told us, but when she saw them, big like that, in the grass, she felt sick. "Oh, ji klak, ji deh," she told us, hugging her stomach and making vivid gestures of vomiting in the grass and hugging herself

again, shivering and laughing. Glen and I were delighted with this performance and I went on to my room feeling more at peace with my environment than I'd felt for some time.

And then we were rocked by scandal. Callixte broke the news to Helen with a coy little note one afternoon in the lab: "I know something you don't know." It seemed that Nglau and Khuch had been having an affair, with Giao providing the improbable setting for their meetings at her house. Now they had decided they wanted to marry and Khuch's parents were violently opposed because of Nglau's missing leg. The parents appeared one day at the house, an upright and respectable Montagnard couple, their blankets wrapped tightly around them like cloaks of dignity. There was a long conference with Pat and then Khuch was taken back to the village for three months of isolation and chastisement.

"But Pat, why?" I asked.

"Because you cannot harvest rice with one leg."

"But he has an assured job at Minh-Quy."

Pat's answer was practical and calm. "I can't guarantee that job, you know. If the VC take the Highlands in the next year or so -- and they may well do it -- we will probably have to leave. There will be no jobs for any of our people. They may not even live."

From Pat, that was a thunderbolt. There was an awkward moment of silence and then she went on, apparently unaware of any contradiction, to a cheerful discussion of her plans to move the Hospital back to Old Minh-Quy in the near future.

So the war was always with us. Henning began to receive

communications from the German embassy urging that he leave the Highlands and he was taking them seriously. He was scheduled to go to Djakarta for a conference on health care in developing nations towards the end of March, and he thought it likely that he might be unable to return afterwards. Partly, I think, he was influenced by the enduring conflict with both Shirley and Pat: the drama of Tet over with, he had once again retreated to the treatment room and it was Shirley who now helped Susan and myself on the ward stealing time from her midwifery program to give us badly needed assistance. Henning remained in unhappy isolation, and though occasionally the old German endearments would still issue from the treatment room to delight Callixte and Christian, more often these days what came to our ears were howls of rage.

"Henning!" I snapped one day. "Don't yell at the patients."

He rounded on me with, "Just you waits, just you waits, it happen too to you. I tell it you, one day you too will yell. When it is hot and the boys do not work well and Ya Tih is angry, you too will yell. I tell it you." He had me there. Already I had caught myself on a number of occasions enraged and storming on the ward. I had no rebuttal to offer.

Before Henning left he had the pleasure of observing Pat unleash her temper in my direction, an event I had been waiting for with some dread ever since my arrival at Minh-Quy and one which caused Henning vast delight. I had mishandled Pat's little red Honda car and she let me have it, hot and heavy, one morning by the nurses' station. "Christ almighty Hilary, what got into you? Don't you have any sense

at all? What have you got for brains in your head? Good lord . . . " all this at top volume while Henning and the Montagnard staff watched barely suppressing grins. To my surprise, I also was having a hard time keeping from laughing and the sight of Henning's relish of the scene didn't help. In fact it was not nearly as bad as I'd expected to be on the receiving end of one of Pat's tantrums. There was, as the Montagnards had long since discovered, enough affection mixed with the exasperation to take the sting out.

An then, suddenly, we began getting reports of heavy fighting around the DMZ, near Quang Tri, and, closer to home, the VC cut the Pleiku road.

The struggle for the Pleiku road shifted back and forth. On the days when Glen could get through he doubled his scrounge efforts, never knowing which trip might be the last. Several times he started off in the morning only to find that the road was closed again.

One day a little boy arrived with a leg injury and no pulses below the wound. This meant that major blood vessels were involved and vascular surgery would be necessary, a delicate procedure with which we were relatively inexperienced. I went off to MACV on a chopper search, but there were none available. Everything that could fly was up in the Tan Canh/Dak To area where there was heavy fighting and although Dr. Gatti was willing to take the patient there was no way to get him to Pleiku. In helpless frustration I burst into tears. The boy would probably live but he might well lose the leg and it was all so unnecessary. An experienced surgeon could patch him up in short order. Gatti was

ready and waiting. There was just no way to get the patient to him. Colonel Wood, arriving on the scene at this point and finding me choking back sobs, asked what was wrong: "Is it something personal? Family trouble? What is it, Hilary?" He was weary, obviously much occupied, very gentle and concerned, and his concern only made it all the harder to control the crying. Somehow I managed to blurt out an explanation. "I don't think I can honestly tell you it's life-or-death," I said. "It's just that he's only a kid and he's in trouble and they could take care of him so easily in Pleiku if we could just get him there. I mean, we can try here, but the risk will be much greater if we do." Colonel Wood nodded, less in encouragement to me than in recognition of the toughness of life and war. "We'll try," he said. "We'll do our damnedest to get a chopper to you. But I can't make any promises. It's pretty hot up there." It was all he could say and I knew that he would indeed try, but for him the military had to come first.

Both Glen and Tom expressed wry amusement at my report when I returned to the Hospital. "Well," said Glen, "I guess you pulled out all the stops." And Tom shook his head in mock admiration: "Crying on the shoulder of the MACV C.O.!~~*~~ Christ, it'd never work for me, but you may have just done the trick!" In fact it was Glen who did the trick, closeting himself in Silva's office with our radio until he finally located a chopper limping back to Pleiku that agreed to stop off for the boy.

Tom's comment had been flippant but he knew from his own experience what we were up against. He had told me once of the last time he had cried, back in his Special Forces days. He had been out on a patrol when fighting broke out, a cross-fire between VC and Special Forces with a village

caught in the middle. Crouching behind a pile of underbrush Tom watched a child of nine or ten ("Dich's age," he said, telling me the story) dart suddenly in front of him to collapse within yards of his hiding place with multiple abdominal wounds. Tom went out for the boy and brought him back, taking a couple of rounds in his medic's pack as he dragged his patient to the scanty protection of the underbrush. The boy was already in deep shock and his first need was clearly an IV. But on opening his pack Tom found the rounds he had taken had punctured all his remaining IV solutions. The fluid ran uselessly out on the ground and he watched, helpless, while the boy died of internal hemorrhage. It was a similar sense of helplessness that faced us now.

When I first arrived at Minh-Quy I had agreed not to sweat the small stuff, not to agonize over individual tragedies beyond my control. I told myself that if we weren't here there would be nothing and that to try to offer everything would be only an exercise in frustration. You do what you can, I reasoned, and if there are things you can't do you simply cut your losses. Even to do something in this place, at this time and for these people was to do a lot. That was before I came to see the Montagnards as individuals. I had tried to observe the mourning chant, the moi, as a sociological phenomenon but increasingly it had come to mean a person dead whom I wanted desperately to live, a human individual gone despite our best efforts. Now it began to look as if the moi in future would mean people dead to whom the best efforts were simply not available -- for want of time, for want of equipment, for want of skills, of staff, of transport. For want, in fact, of peace.

It is one thing to fail when you have offered a patient all the resources of medicine available to him. That is merely sad. But to fail while knowing what will cure the patient, to fail because resources once available are gone, because you are helpless to do what you know full well will save life, is more than sad. It causes an overwhelming and intolerable anger, a frustration that can tear you apart. It was that which loomed ahead for us as the spring offensive finally began to materialize.

Rita Lampart, the Swiss nurse, arrived at the very end of March and was instantly plunged into work. Casualties were up and still the medical patients arrived in an endless stream: plague, meningitis, measles, pneumonia, cho'roh, malaria, typhoid and T.B. There was at the Hospital a sense of urgency, and so little time. There was no time for classes, no time for giggling with Christian and Veronique, no time to tease the pediatric patients into smiling, to play the guitar, to listen to the boys' tape cassettes, to reassure the worried patients, to praise the post-ops as they staggered back to health. We were as busy as we had been at the time of the mock alert, as busy as the surgical orgy. And once again we were doing surgery: a general surgeon with VPVN had arrived for a week and Pat had lost no time in putting him to work. It was lucky he was there. April 1st brought the war closer than it had ever been before.

The mortar rounds and bombing started early, shaking the Hospital and rattling the glass in the windows. It sounded incredibly close. An underground NVA complex had been discovered near Paradis, perhaps half a mile off the end of the Kontum airstrip and equipped with antiaircraft

weapons. This was the target. Staff and patients gathered in sober groups in the Hospital yard and those who lived at Paradis were told they could go home but returned within the hour, unable to get through. Glen and Greg brought in the workers from Old Minh-Quy which was too close to the action for safety, and the laundry was done in the Hospital yard and spread on our barbed wire fences to dry. "Got any projects for me, Hilary?" Greg asked. "I think I'd better keep these guys busy." We set them to work making parallel bars to use in rehabilitating patients who for one reason or another needed to learn to walk again. The laundry gleamed in the sunshine, the workers bent to their task, and the whole earth shook with falling bombs. And the casualties came in.

It was my day off, but I had come down to the Hospital to try to sort a huge pile of drugs and equipment stacked in the yard, the result of an all-out scrounge effort on one of the few days Glen had managed to get through to Pleiku. Rita, Susan, Shirley (no time for midwifery today) and the Montagnards were swamped, and though it always annoyed Susan when I worked on a day off, I wound up helping with the casualties. A few arrived on foot but most were carried in the rough litters the Montagnards made, a blanket slung on a single pole. They were dirty and torn and bloody, the blood dripping through the blankets their wounds packed with dirt and cow dung to stop the bleeding. Sue unwrapped a rough bandage around the leg of a little boy and the leg came off in her hands. Rita turned a patient on his side to look for wounds of the back and found both buttocks blasted away. White faced we went on with the work, moving through a nightmare to which there was no time to react.

All elective cases were cancelled and Pat and the surgeon started in on what proved to be a five-case day, all emergencies, lasting until eleven o'clock at night. John cleared dozens of beds for casualties. Hen and Ner both limped out on crutches to sleep in the tents and dozens of others went with them. A closet that served as our only isolation room for pneumonic plague was emptied and set up with dressing materials and IV's as a two-bed back-up emergency room, supplementing the stretchers in the hall. In no time it was filled. Lung was superb. In a matter of minutes he had his own disaster plan organized and triaged the patients as they arrived. With almost no direction from the Western staff he had each patient settled with a chart, an IV, and a test for tetanus anti-toxin sensitivity as quickly as they came in. X-ray was working overtime, but Marie-Thérèse came out to help us with the casualties, washing wounds and applying temporary dressings with brisk efficiency while our only other technician ran X-ray single-handed and did a heroic job. We all donated blood and went on working.

In a lull between cases, Pat and the surgeon went out to the yard with me to survey Glen's stack of offerings. It was a day of brilliant sunshine and gusts of wind, and through it all the angry sound of battle shaking the ground. Pat grubbed through the boxes of surgical supplies in great good humor at the sight of all those goodies. "Hang on to this," she said, unearthing treasures, "And this." She waved a hand at three or four crates of clamps and other instruments. "Those. Stack all those back by the O.R. Françoise'll kill me for cluttering the place up but I want to go through them myself. Just pile them any place back there." And then she vanished to tackle the next case, surgical greens billowing

around her in the wind. Incredibly, she seemed unshaken by the noise, wholly absorbed in the work. I organized the boys from Old Minh-Quy into carrying cartons back to surgery and returned to the casualties where Susan stopped me, tight-lipped. "This is your day off, damn it. You take it."

But what kind of a day off could I possibly take? For a while I ran errands to the Bishop's compound and MACV where the GI's said that even using napalm ARVN had made little headway in the morning's action. The word -- napalm -- chilled to the bone. "What happens next?" I asked.

"Oh," they told me, "We'll give it a try this afternoon with the cobras. We'll get them out of there." And who else would they get out of there, I wondered. How many more casualties?

At the Hospital, when I returned from my errands with a supply of sandwiches (no one made it to the house that day for lunch), Susan remained adamant. The casualties were stable, the situation slightly eased, I was to take my day off. So I walked up to the house where Barb Silva was packing for her departure in two days' time. "Gee, it seems wrong to be going now, doesn't it, Hil?" she said with a sigh. "Here, can you eat some of these jellybeans? The ants will just get them if we don't finish them off." And for most of the afternoon we stood on the narrow little back veranda eating jellybeans while the sun shone brightly and the cobra helicopters, vicious and efficient war machines, pursued the NVA. We could see the cobras quite clearly, perhaps a mile away, swinging into the attack, diving, releasing their rockets in a puff of black smoke, and then pulling up, wheeling away as the air carried the whine and thump of the rockets striking to our ears. Seconds later they

would dive into the attack again. There seemed to be little response from the ground. The NVA were there but lying low. There was only the angry buzzing of the cobras, like wasps in the sky, and the remorseless sound of the rockets scarring the earth.

With the strange inconclusiveness that seems to attend such encounters -- at least in Vietnam -- the cobras flew home at dusk. It was the end of the fighting. The next day was quiet and peaceful, with only the aftermath -- a few late casualties wandering in, a legacy of post-operative patients and new dressing changes -- to deal with. Perhaps the NVA had taken enough of a pounding to force them back for now. The news broadcasts carried no comment on action in the Kontum area: they were more concerned with the city of Quang Tri now taking rockets in at an average of twenty an hour. We wondered if it would be our turn next.

Meanwhile Chuuh brought word of the burning of Kon Mahar, his village and Vincent's, some twenty miles to the east of town. Over half the houses had gone in one night, set on fire by the VC. Meanwhile Bill Rose brought us yet more casualties, a land rover full of injured from a rocket attack on Plei Or. They jammed the entrance hall and the treatment room and we slid across the floors on a thick morass of blood and dirt and discarded dressings while the patients sat on and under the stretchers, quietly waiting their turn. They were superb. Christian and her crew of dressers were hard pressed to keep up with the need for fresh bandages and we missed Henning although Shirley, displaying a skill at treating wounds I hadn't realized she had, did much to fill the breach. Minh-Quy looked like becoming a surgical treatment center.

I rarely saw the Montagnard staff do better work than during

those early days of April. What was needed now was not so much the flashes of brilliance I had admired in people like Hiao, but steady teamwork, endless hours of hard, grinding labor, and this they gave us with no urging. I would probably have compromised my standards on those long afternoons, taking less time to clean the wounds, slapping on dressings for the sake of getting it done, but the Montagnards shamed me into careful work. They continued to give meticulous care, working sometimes until seven, eight or nine at night to get through the backlog of torn and bleeding people waiting so patiently for their attention. Lung still gave yeoman service as a triage nurse, cruising steadily through the wounded, getting things done. Hiao debrided and sutured, debrided and sutured far into the night. Christian and Veronique were towers of strength and Gabrielle evaluated the patients with an eye at times far sharper than mine. "I think perhaps this one next, Ya Hilary. Very sick." And "Perhaps Ya Tih will want blood. I ask Ya Callixte."

Barb Silva departed amidst incoming rockets, crushed that the airfield was too dangerous for a proper send-off. Only Vincent went with her to the plane, and as Silva was hustled on board by Glen -- "For God's sake, get on that plane. That's incoming!" -- Vincent crouched in a ditch by the side of the runway. It was no way to leave. On that day Colonel Wood's helicopter was shot down near Dak To and for an anxious twenty-four hours we thought he might be dead or captured, but he escaped with an injured ankle, barely pausing in his work to have it seen to. And to send word to Minh-Quy that it was time to get any staff we could spare out of Kontum.

This time there was little talk of fighting outside the town or

of ARVN's increased ability to hold the NVA at bay. It seemed likely that Kontum could be taken, certain that the fighting when it came would be in the city. And so once again we met for the now familiar round of discussions: who would go, who would stay. John and I were both due for a vacation and would go. Greg, hating his position as one of those who could be spared and wanting nothing more than to stay, volunteered to go as well. From Greg, it was another sign of strength. Susan, in deep distress, announced that she would go. And there we stuck. Glen bullied, argued, cajoled and threatened. Foreseeing a future and more urgent evacuation, he felt too many were staying and said bluntly that unless more people volunteered to leave he would go himself. Shirley and Helen dug in their heels: they would not put themselves through another exile like the last, they would stay. And Rita said gently but with decision. "But I have only just come. I think I will stay awhile."

Once again Pat took the line that it was an individual decision, that all of us should feel free to go, and yet she seemed to Susan and myself to be repressing anger and a sense of betrayal. One could hardly blame her. "Look," she said, with a touch of defiance, "If need be the Montagnards and I can run the place alone. We've done it before." And so they had, but what an extraordinary burden of work we would be leaving them with; the endless dressings, the newly injured, the continuing stream of medical patients. It seemed a far greater defection than our trip to Nha Trang at Tet, and yet despite my experience of Nha Trang there was no question in my mind of staying.

It is a harsh analogy and one which those outside the medical professions may find difficult to understand, but it seemed to me that

we were in the position of those who care for a dying patient. There comes a time, if the course of the disease is slow and painful, when, however undemanding the patient, however courageous, stalwart and even cheerful he is in the face of his inevitable death, one wishes the end would come. There are those stronger than I, nurses who work willingly with the terminally ill and derive from their work a well-deserved sense of satisfaction, who may not experience this feeling, but I lack their courage. Faced with a patient mechanically existing, dignity eroded by disease and pain a constant part of life, I find myself, even while tendering the best nursing care I can offer, wishing the thing would end, the suffering cease. From the depths of a fatigue which I knew was distorting my judgement, I saw Minh-Quy in this light now. How could the Hospital survive the destruction I felt sure was coming? How could there be anything ahead but pain and disintegration and decay? I did not want to see it happen. I did not have the strength to preside at the death that seemed inevitable.

Some still functioning intelligence could see that this was very shaky reasoning, but it was helpless against the force of the feeling. In glimpses of the future I envisioned the problems of surviving such a defection. I might have misjudged the situation. Suppose Minh-Quy did not succumb? Could one return after such a betrayal? How did one face those left behind? If one did not return (and that seemed to me increasingly likely) how did one live with oneself? Or suppose one day Susan and I, vacationing in the peaceful sun on the beaches of Penang, heard the impersonal voice of a newscaster announcing that Kontum had been bombed back into the stone ages? Kontum and all its people:

Gabrielle, Hiao, Lung, Hrong, Hen, Ner, Anh, Gat, Hiep, Françoise, Vincent, Nglau and Khuch and all the rest. Thus I had glimpses of the future pain I was ensuring myself by leaving, but I repressed the thought vigorously and effectively. I bolstered my decision to leave with justifications that in the end would prove inadequate but that sufficed for the present. I was no hero. What good did you do dead? It was better, surely, to preserve a life (my own) that might be useful in the future, if not at Minh-Quy than elsewhere. This time Susan agreed. In the months to come both of us would find we had made the wrong decision. We had opted for personal survival and the avoidance of pain, emotional as well as physical. Neither of us would live with that decision peacefully in the future. But at the time it overrode all other considerations: we had yet to learn that mere existence is not what matters most.

Our last morning at the Hospital was eerie. I seemed to be seeing it all as I had first seen it: the iks and noms in the yard, the endless and apparently uncoordinated activity, the laughter of the patients, the thronging mass of children, the tattered dress of the Montagnards, Gabrielle feeling the hot chest of a child listless with malaria. "It is good you go," said Gabrielle, pausing to give me a quick smile as she made efficient rounds. "I think perhaps you are very tired. Rest well and come back strong again. When you come back we will have a party -- many jars." My heart lurched. I did not think I would be coming back, but I smiled and gave her a cheerful response. "Listen," said Susan at eleven, "It's fairly quiet. Let's go." And so we left, feeling nothing but an overwhelming sense of relief. The accounting lay ahead. We never

even thought of it, we never thought at all as our plane lifted off the ground to fly over the green hills of the Highlands, away from Minh-Quy.

Exodus

In fact it was not until the end of May that the NVA took Kontum, but all remaining Western staff were evacuated on April 26th. Weary, fearful and depressed, I had left for home from Penang, but Susan returned to Kontum and she had been back for less than twenty-four hours when the evacuation occurred. She wrote, describing the departure. Tan Canh had fallen and the NVA were advancing on the city, using the refugees fleeing before them as protection against air strikes. ARVN had broken on the battlefield, retreating in disarray. Colonel Wood briefed Pat and the Bishop agreed with his gloomy assessment: Kontum was a lost cause. And so there was the hasty packing with Pat desperately sorting papers all night long, the last sad meeting with the Montagnards, the decision that Hiao and Gabrielle should run the Hospital, and the farewells. "What will we do if the VC come?" asked the Montagnard staff, and Pat's bleak answer was "Apinh Ba Iong" (Ask God). And then the departure amidst a wild barrage of incoming. The airfield was hit, the tower lost (hearing of this I recalled an afternoon when Silva and I had sat in that tower chatting with the comptroller, a pleasant boy, blond, very young: he must be dead, then), and in the end it was our old friends the Pleiku dust-off who carried out the majority of the staff, risking a heavily overweighted chopper to do so.

"Pat has been beautiful the entire time," wrote Susan, "Beautiful in that she was so shaken and torn apart that she was expressing all the love stored up for her kids and the Montagnards openly. Horrible as it was, I'm still glad to have seen her at the last this way."

We all thought it was the last. Most of the staff came directly home from Saigon. Only Pat, John, Tom and Rita stayed behind, watching to see which way the fighting would go. And for reasons best known to themselves, the NVA delayed. Early in May, all four of the remaining staff returned as far north as Pleiku. From there John and Tom managed to find transport back to Kontum and to spend a few brief days with the Montagnards. John's letter to Dr. Braile describing the situation in Kontum is worth quoting in full.

"You're missing an exciting time," wrote John. "It must be hard getting incomplete and contrasting reports about such significant events involving Minh-Quy and we have the same problem here in Pleiku. To fill you in on the present:

- (a) Left in country: Pat (Dr. Pat Smith), Tom (Coles), Rita (Lampart), and myself, Det, Wir and Dich.
- (b) Kontum: only intermittent shelling, mostly at the airfield, expecting an attack any day and little hope of an ARVN victory. Air-evacuated to Pleiku are about 10,000 people who worked with Americans (and families) including about 1,000 Montagnards.
- (c) Pleiku: uptight, expecting an attack too, but not seemingly as imminent as in Kontum. The road between the two, the exit for the Montagnards should the fighting start, is closed 6km. out of Kontum, but an operation today is aimed at opening it.
- (d) Minh-Quy: Western staff evacuated 4/24. As nothing had changed much as of last weekend, Tom and I went back up to visit daily, sleeping in Pleiku at night. The three days up there were three of the finest of my life. We weren't expected and many of the staff thought we were not

planning to come back. When we got off the chopper, as Tom put it, 'God and Jesus Christ couldn't have gotten a warmer reception.' Tears, yelling, hugging -- overwhelming.

"Tom went to scrounge rice and to recover certain valuables left in the evacuation. I made rounds with Gabrielle. I have always felt that Minh-Quy was the best hospital in Vietnam: this is their finest hour. Care was almost as if the Western staff were still there. Gabrielle and Hiao were in charge and competent, though lacking confidence. A child with meningitis presented while we were there and Gabrielle asked me to see him. When I turned the responsibility to her she examined him, decided he needed a spinal tap, did the tap and started treatment, all on her own. Not bad for less than a sixth grade education. For those who would argue that such deportment is expected and that any less would reflect some inadequacy on the part of the staff, consider the pressures:

- (a) Not one Montagnard had taken off work and all were working incredibly long hours. When the USAID Public Health Officer visited the Hospital and asked who among patients and staff wanted to be evacuated, he found only one, a patient who came from Pleiku. Contrast this with the fact that the Province Medicin Chef is currently nowhere to be found. The Vietnamese nurses at Kontum Province Hospital left before evacuation was offered, and now Pleiku Province Hospital has lost most of its nurses, too.
- (b) Since they have worked with Americans and are known to the VC the Hospital staff are a definite target and they know it.
- (c) Gabrielle's father was killed several days before. Her brother, Det's father, was taken prisoner. Her mother was dying on the Minh-Quy

ward. Françoise, Callixte and Nglau all lost both parents, too. I didn't get a chance to learn of others, but one can imagine . . .

(d) The tension of awaiting the strike of an invincible, vindictive army cannot be expressed. This apprehension, coupled with the crushing personal losses these people have suffered, gives the Minh-Quy wards an almost surrealistic air. A sense of finality pervades Kontum. Bill Rose, one of the true heroes of the Highlands, smuggled thirty-two Montagnard orphans onto the crowded, chaotic airstrip, and persuaded a U.S. Army sergeant charged with keeping refugees off the planes to let them on. His authorization? He was a 'representative of the Smithsonian Institute, evacuating survivors of a race that faces extinction.' They had no trouble boarding.

"Irrespective of what happens now, Pat's thirteen years here, the work of all the others serving here and in the States, all the frustrations and compromises, and all the good will, will have accomplished their design. If the next few weeks should bring the death of Minh-Quy, as well they may, I am confident that the end will be swift and with all the dignity so characteristic of the Montagnard way of life."

This was written on May 5th, eleven days after the evacuation of the Western staff. In Kontum attack seemed imminent. There was little to halt the NVA advance: surely they would strike within a day or two. And yet the lull persisted and Pat, ever practical, took advantage of this brief respite. As John had written, Pleiku Province Hospital had lost most of its nurses and several wards were virtually empty. Undaunted by the size of the undertaking, Pat proceeded to evacuate Minh-Quy's patients, their families, and about half the Montagnard staff, better

than five hundred people, to the empty wards of Pleiku Province. I was not present, but I can well imagine the scene, Pat organizing the massive move with as little trepidation as if it were merely a family outing on a summer Sunday. "Hell, the buildings are there. We might as well use them. Let's see, we'd ought to be able to get some chinooks out of the military . . ." It wouldn't have occurred to her that the military might have other uses for their big chinook helicopters, that army red tape might stand in her way, that Province Hospital might offer resistance. The obvious thing to do was to evacuate the Minh-Quy patients to Pleiku. Therefore it would be done. And therefore it was done. On May 12th, in four hours, the move was made and the Minh-Quy Annex established in Pleiku.

The nuns stayed behind, as did many of the stars of the Minh-Quy staff, Hiao and Yin, Lung, Hrong and Nglau among them. In Pleiku it was Ta, Pea, and Tom's assistant, Siu Kot who supervised patient care at the Annex, with the help of some of Minh-Quy's established staff as well as many of the village health workers now without villages to care for. And John became medical director. Pat, priorities straight as ever, had decided to bring the boys home to America. She was determined in this crisis that they should get out of Vietnam and become U.S. citizens. "I feel," she wrote, "The kids come first at this point, since they really represent something for the future, whereas I feel anything here is a very temporary sort of thing . . ." Meanwhile, at the end of May, the long awaited attack on Kontum came at last. The NVA encountered little resistance. Large areas of the city were occupied, including the Bishop's compound and all of the eastern edge of town where Minh-Quy

Hospital was located.

Throughout the period of occupation those of us at home gleaned what news we could from the media ("Foe Occupies Hospital Again," read a headline in the Boston Globe, with a sub-head written reassuringly large: "THIS TIME THEY SHOOT NO PATIENTS." But did the media really know?). John's letters to Dr. Braile were our one sure source of information. Through them we learned of the total isolation of Minh Quy for several days as ARVN dug themselves into foxholes at the Hospital gates, where once the peddlars had sold ices, and fought on the street corner outside the operating room. A rocket crashed through the kitchen roof, fortunately injuring no one. A nurse was captured. The B-52's made nightly raids over Kontum. And still Gabrielle, Hiao and the others looked after the patients, diagnosing, prescribing, performing the minor surgical procedures alone. They had no Western staff to help them now. In a real and terrible sense, Minh-Quy had become a Montagnard show at last.

An early letter from John quoted a note from Gabrielle smuggled out of Kontum on May 31: "From the 25th to the 30th we thought every one of us was going to die. We are afraid all the time: afraid of the VC, afraid of the planes. We saw the VC kill two people in the street outside of the Hospital. We are very afraid. We cannot eat anything or drink anything. We cannot go to get water" This was at the height of the fighting. Four days later she was writing, "Do not work too hard. Be sure you eat well and get enough sleep" By then the fear had receded enough so that she could express her concern for John. It was a real concern, but mingled with it I suspect was her

recognition that she and the Hospital needed John healthy and functioning. She was not going to let Minh-Quy go under, and though she must have realized by then that she and the others could carry on alone in a crisis, she was also working to ensure continued Western help when the crisis eased.

And it did ease. Miraculously, after about a week of occupation, the NVA withdrew to the surrounding hills. No one knew as yet if it would be a permanent withdrawal and the B-52 raids continued night after night, but the town, a ghost town now from the Vietnamese point of view, grew relatively quiet. John was able to make quick chopper trips by day to check on problem patients, and the Montagnard refugees and casualties poured into Minh-Quy. John's letters now were full of admiration for the accomplishments for the Montagnard staff: "They have been thrust into new and incredibly difficult situations and all have come out well . . . they have learned how well-trained they are, have gained much confidence . . . they have shown remarkable competence, have taken a lot of responsibility and handled it well . . . Montagnard staff are carrying the ball as always." Throughout the early part of that summer the military situation remained obscure. And with no certainty of a safe future, amidst the doubt and anxiety, the Montagnard staff continued to keep Minh-Quy intact.

It was a dreadful time for those of us at home. What we all called re-entry, the return to civilization, was known to be bad at the best of times. With the added burden of anxiety for our Montagnard friends and the sense of our own defection, it was devastating. From the New York Times I later clipped an article on the problems of returned

veterans that seemed vividly pertinent. A psychiatrist was quoted as comparing the difficulty of the Vietnam Veteran to those of a boy at an amusement park. "He has spent an exhausting day on the scariest, most dizzying thrill rides with apparent success, but he finds it impossible to step aboard a moving merry-go-round. His equilibrium has been upset and he can't perform a simple task of balance. When he pukes, the people watching him can't figure out why such a simple exercise is so unsettling."

I had returned to typical middle-class American comforts. Life was safe, well-ordered, with abundant leisure time. My old job at the local medical center (real beds and clean white sheets and the hushed solemnities appropriate to a hospital) awaited me, but I found it impossible to return to work. My friends greeted me with, "How awful it must have been for you! What did you eat? Was it terribly hot? God, you must be glad to be back. Hey, have you heard the latest . . ." and they would chatter on in meaningless gossip. Others embarked on speeches about the perfidious Americans, the suffering Vietnamese, the noble NVA, assuming my total agreement. The wish to puke was very strong. Only a very few could understand and patiently tolerate my loss of equilibrium.

Glen and Susan and I corresponded at length. It was Susan who sent me a clipping from the, Chicago Tribune which very nearly did me in. This was in June, and by some miracle ARVN had managed to retake Kontum, although the NVA still threatened and the future looked precarious. The reporter, Wayne Thomas, had journeyed to Kontum and helped to evacuate refugees on American Chinooks. He described the total chaos of evacuation

and the patience of "half a dozen little blue-clad nuns" waiting to send their critically ill from Minh-Quy, Kontum, to the Minh-Quy Annex.

"The nuns' ambulances were slow to approach but the Vietnamese farmers ringing the field edge were not. They shoved the injured aside. However, the sergeant, his three enlisted men and I manhandled a path open and the stretchers began sliding into the belly (of the chinook). The walking wounded were boosted in, and about 40 more women and small children were shoved on.

"'Come on, sister, get your nurses up here,' the sergeant called.

"'We stay,' she said. 'More in Hospital. Can't go.' The sergeant gave a thumbs-up sign to the cockpit where both pilots were peering aft. The big bird lifted away. The slamming rumble of another 130mm. round falling just north of the field was almost lost in the jet roar." I recognized Gabrielle as clearly as if I could see her, tiny, compact, unswerving in the midst of the chaos.

This clipping was the final straw for Susan. Within days she was on her way back to Kontum to the dismay of her family and many friends. From Seattle, where he was preparing to start pre-med studies, Glen wrote, "Well, it looks like ya Susan is really going back. Just got to start that last IV, I guess." But both of us know how much starting that last IV could mean to anyone who knew Minh-Quy.

Susan said afterwards that the decision to return had been one of the best she'd ever made. From Pleiku and Kontum she wrote long glowing letters describing the miracle of the Hospital's survival and the undiminished warmth and gaiety of the Montagnard staff. Gabrielle,

she reported, looked skin and bones, "But definitely sprouting wings these days from her unwavering devotion to duty." The situation remained tense, it was not yet safe to move the Annex back to Kontum, but Western staff, working long hours, shuttled between the two branches of the Hospital by helicopter and all were impressed by the growth and responsibility of the Montagnards. They had survived, they had brought the Hospital through, they had learned to their surprise and (I am sure) amusement, how strong they were. Western abdication, Montagnard growth, had both taken a giant step forward. From Pleiku John, now bedridden with hepatitis to his extreme annoyance, wrote that now, now, was the time, if ever, to concentrate all efforts on education, to prepare to hand the Hospital over to the Montagnards who had so clearly shown their right to it.

The gradual and incomprehensible easing of the military situation continued, and in September the Pleiku Annex returned to Kontum. And at this point I began to get letters from Gabrielle asking when I would return. They were full of warmth and affection and cheerful gossip about the Hospital (Khuch was pregnant, she reported in one, and in the next, Khuch and Nglau were married). They all ended the same way: "We all think of you, we all talk of you all the time. Ya, i h uih Kontum laio'?" The simple translation was "When will you return to Kontum?" but it meant more than that. "Uih" in Bahnar means literally "return to where you sleep", hence, come home, return to the place where you belong. The appeal was irresistible. I renewed my passport and applied for a visa.

Oei Mă Lő'ng: Stay Well

"One day we see two VC right behind the Hospital. Right there!" Hiao, pointing out the treatment room window, showed me the spot. "Ya Gabrielle, Ya Françoise, they run and hide under the table, but I watch. Then the chopper come and" - he stuttered out the noise of an M-16 sub-machine gun - "and they fall down" - grabbing his chest and writhing in vivid agony - "and they are dead!" He turned, grinning. "Right there, it happened." I stared at him in amazement. He was for all the world an adolescent boy recounting the events of the latest John Wayne war flic.

In the early days of my return to Kontum I was besieged by war stories. I was a new audience and the Montagnards, exhilarated by survival, delighted in pouring out the details of their ordeal. Occasionally, as with Hiao's story of the death of the VC behind the Hospital, I was disconcerted by their delight in what were to me macabre events. Often I too was amused. Sr. Vincent, taking advantage of the panic of the Vietnamese, had bought herself a Honda from a fleeing family for the ridiculous price of about \$7.00. This was clearly as ro'gei as any of Hiep's accomplishments, and Vincent took quiet, solid pleasure in her sharp dealing. One day a Vietnamese had brought his son to the Hospital to be seen by a doctor and Gabrielle had informed him firmly that the only doctor was Bać-sy Hiao. The Vietnamese had departed, unwilling to trust his child to a Montagnard and doubting Gabrielle's claim that Hiao was a doctor. This story had a double edge. It was vastly amusing that Hiao had been given the title of doctor ("Uh

ko' si Bac-sy!" cried Hiao, laughing at the very thought; "I am not a doctor!"), amusing too that the Vietnamese had seen through Gabrielle's exaggeration of his status. It also served the man right that he had refused treatment on the grounds of racism. Typically tough minded, even Gabrielle seemed unconcerned over the fate of the child. But on another occasion she had been called to Province Hospital as a consultant on a post-partum hemorrhage in a Vietnamese mother. "Ya Hilary," she said with scorn, "They do not even give pitressin! I give pitressin, I get blood for them. The woman is cured."

For two days the fighting raged so fiercely that no one was able to leave the Minh-Quy ward. They had no food and, worse, no water. "You couldn't even get across to Vincent's store room?" I asked, and was told that there was a constant crossfire between the buildings and none had dared to take the risk. Once I tried to compliment Gabrielle on her extraordinary feat in keeping the Hospital going. "But Ya Hilary," she objected. "I do not work well. I am too frightened. At night I give out the midnight medications at nine o'clock, I am so frightened." And Hiao added, "Ya Gabrielle, Ya Francoise, they cry and pray, cry and pray all the time. But I am not afraid." At which Gabrielle rounded on him with, "Oh, no, you are not afraid, Bac-sy Hiao!" and the laughter echoed through the wards.

It was good to be back. At the Hospital many things remained the same. Vincent's dogs had survived the occupation and still trailed after her wherever she went. Sanitation had not improved and the yard was still besmeared with iks and noms. The same patients presented with the same diseases, underwent the same miraculous cures, and departed

full of smiles and gratitude. There were even a few familiar faces among the inpatients; Khoi, a paraplegic who had been with us before the occupation, and Ymoi, a Jei lady, who I remembered as deeply suspicious of modern medicine and who now, like so many Minh-Quy patients, had become a part of the Hospital population and made her home with us. (Of Hen and Ner I could find no news: their villages lay now in VC territory.) And there was always the same laughter and gaiety amidst the poverty.

Other things had changed. Circling to land at the airfield on my first day back, I had been shocked at the sight of the hills around Kontum. Once washed in peaceful green, they were now a succession of sandy craters, the legacy of the B-52 strikes. Whole buildings were gone and the streets, always pockmarked, were now next to impassable. The refugee population of Kontum was swollen beyond belief. Much of the province now belonged to the VC and NVA, and daily little streams of people arrived from the jungle where they had been in hiding for months. As patients, they always presented with the same syndrome: malaria, intestinal parasites and protein deficient malnutrition. We had seen these diseases singly before the offensive, but never in such a devastating combination. On their charts we recorded these patients as "dropped from the forest" which was both a definition of their disease and an attempt to safeguard them against another future Communist take over. To label them as refugees, we felt, might jeopardize them should the VC and NVA come again. As it was, we had daily battles with the local Chu Hoi center, the camp for processing refugees, over who must stay in the Hospital and who could go through

the red tape of residence at Chu Hoi where their status as non-Communists would be established. Occasionally we mounted rescue missions, storming the center and returning with an ambulance full of "dropped from the forest" patients in need of Hospital care.

Across the river, near CCC, a teeming refugee camp was now in existence, breeding disease. Marylu (named for the wife of a departed American advisor) had at one time only two functioning wells for a population roughly estimated at twenty-thousand. Typhoid raged in Marylu along with all the other diseases, and Tom's health workers made daily trips to the Hospital with patients from their now vanished villages. But our attempts to vaccinate in Marylu were resented by the Vietnamese public health department and when we argued with the officials that there was clearly a typhoid epidemic in the camp, they wanted statistics. "Statistics!" snorted Pat. "That's worse than Vietnamization, that's Americanization! Hell, they've only got to take a look at our ward and they can see their statistics! Oh, well, go through the discharge book, Hilary, and get them their figures. If we don't get some typhoid vaccine up here damn fast, by God I'll take it to Congress. I'll write the President!" Pat's vigorous partisanship had clearly not changed at all.

Many of the changes reflected the new abilities of the Montagnard staff. Gabrielle, for instance, now saw patients in clinic as a physician's assistant along with Pat and Edric Baker, the New Zealand surgeon who had now joined the Minh-Quy staff. She took her new responsibilities seriously. Obscure diseases still had to be referred to Pat or Edric, but the simple and familiar cases of measles, malaria, cho'roh-hac and plague she could cope with herself and did. Watching over the ward on a

clinic afternoon, it gave me vast pleasure to receive Gabrielle's orders scrawled in Bahnar on the patients' charts and to put them into effect. It seemed appropriate that I should work under her direction. "Ya Gabrielle ro'gei jat," I commented to Vincent one day, and Vincent replied soberly, "Perhaps. But I think she is more experienced than ro'gei. She works very hard. That is good." It was new to me to hear such adult judgements of each other from the Montagnards, and I took it as another sign of their growth.

Lung remained chief nurse at Minh-Quy but it was clearly Gabrielle who wielded power, and under Gabrielle I served as staff nurse. In many instances I retained my special status as a Western advisor -- Gabrielle was always receptive to suggestions and recognized her own limits clearly -- but the daily assignments that came my way were often formulated by Gabrielle. Initially she made her requests through Pat or Edric, perhaps unsure of my response to what were basically orders from her. In time she came to seek me out directly to ask that I take on the projects she envisioned for me. She knew precisely what she wanted. She did not need me on the ward: that could now be handled by the Montagnard staff. Instead she wanted me to teach. Like John, she knew that education was the *sine qua non* for Minh-Quy's survival. She had seen it work once; she wanted to be sure it would work in the future.

Sometimes, too, I was asked to act as arbiter in staff problems, and this role caused me great discomfort. Thus one day Gabrielle and Vincent called me into solemn conference in Vincent's back room. The problem was Hiep. He wanted to "do bad things" with one of the aides, a new staff member, very pretty and a very promising nurse. Ai, the aide,

felt she could no longer work at Minh-Quy. Tearfully she had announced to Vincent that she must return to her village because Hiep was "not good." Gabrielle and Vincent eyed me expectantly: what should be done?

It was a messy situation. Hiep, of course, denied the accusation with all the righteous indignation he could muster. Thinking back to the night of the "VC lo' lo', many VC" I didn't believe him, but he was a competent nurse, at times an outstanding nurse, and we were short on nurses. Ai was new and inexperienced and we had enough aides. Reluctantly I let her go back to the village and put Hiep on probation. With Ai we agreed that should Hiep do poorly during his probationary period, he would be fired and she could return.

And at this point Hiep made a disasterous mistake. For some time we had been suspiciously low on tetracycline and plasmanate. Then came word that Minh-Quy medications were showing up on the black market. The Montagnard staff agreed that there was a thief amongst them, but none were willing to name names. In the end, it took Pat's authority to get at the truth. With a promise of complete confidentiality she interviewed each staff member individually and by the end of the day Hiep was fired.

"Was there much of a scene?" I asked, thankful that Pat had been there to do the dirty work.

"Oh, you know Hiep," she said. "He didn't even deny it. And I think it was a relief to the others. He was always too Westernized for them. For me, too, if it comes to that. Never trusted that character."

So Ai returned, delighted to be back, and with Yin as her guide

and instructor quickly became a valuable as well as charming member of the Minh-Quy staff.

There were other staffing changes, but the basic crew, the old reliable core, remained the same. Lung still supervised the ward, sober and conscientious, Hrong still flashed his irrepressible grin, Gat still organized his mental lists, Phach was still the bourgeois gentilhomme. And Nglau, the married man, still limped briskly through the wards, drawing bloods, or studied slides under the microscope, occasionally still, a little too quickly.

One set of slides Nglau always subjected to the most minute scrutiny were those of his daughter. For Nglau was now a father, and if the responsibilities of matrimony had once seemed too much for him, the responsibilities of paternity were clearly his meat. Like all Montagnards, Nglau cherished his child, and the slightest cough, the suggestion of a fever, caused him to come running: "Ya Hilary, Ya Hilary, you see my baby? My baby sick!" And, being a lab technician, he often took it into his head to treat the child in the only way he knew, by drawing blood to examine for malaria parasites. It was fortunate that the little girl was healthy. She stood in some danger of exsanguination at the hands of her devoted parent.

Khuch was scarcely changed. She remained a shy young mountain beauty with only a hint of the added dignity of motherhood. The marriage seemed to be going well. Only occasionally I caught glimpses of a lasting tension between Nglau and his in-laws. "Ya Hilary," he said one day, "You tell me we are too busy for me to have the afternoon off?"

"Well, in fact, Nglau, I think you could have the afternoon off.

There's no clinic -- "

"No, you tell me it is too busy."

"But -- " clearly I was missing something. "What's going on Nglau?"

"Khuch's father, he ask me to come drink the jar this afternoon," said Nglau, utterly unabashed by his own deviousness. "You tell me it is too busy for me to go." And he limped back to the lab, satisfied that he had a gilt-edged excuse for avoiding Khuch's parents.

Western staff when I returned consisted of Ed Baker, the New Zealander, Rita, and Bill Rose and John Havicam. John was an ex-Seabee and a carpenter, quiet, self-contained and immensely competent. And Bill was our old friend from VNCS Dak To who had labored so long and hard during the offensive. VNCS took a dim view of Bill's refusal to leave the Highlands during the fighting and the result had been Bill's departure from VNCS and decision to work for Minh-Quy. From Minh-Quy's point of view the breach with VNCS was a godsend. Bill and John between them shouldered the responsibilities that had once been Glen's and Greg's and Silva's and they gave yeoman service in their respective roles. Ed, Rita and I meanwhile looked after the patients. Gabrielle now covered half the ward on her own, consulting with Edric only over problem cases. The other half belonged jointly to Ed and Hiao and Ed continued John's tradition of teaching rounds, grooming Hiao for the role of physician's assistant. All of us looked after the walking wounded and saw clinic patients, and here again I frequently found myself turning to Gabrielle for advice and assistance: "Gabrielle, there's nothing I can put my finger on, but I think this baby's sick. What do you think?"

"Yes." She considered the child carefully. "Maybe measles. You admit?"

I admitted. The next day there was a scathing note on the chart from Edric: "No measles rash! No Koplick spots!" But three days later the child had broken out with a vengeance and Gabrielle and I shared a quiet triumph which Edric generously agreed we deserved.

It was a good staff. Ed was conscientious, thoughtful and concerned, Rita gentle and persistent, but Pat was sorely missed. Having settled the boys in America she had returned to supervise the move of the Annex back to Kontum. Then she had had to travel to the States once more to fulfill fund raising obligations. En route home she had been stricken with a severe gall bladder attack and her first stop in the States had turned out to be a Seattle Hospital where the gall bladder was removed. Louis Braile had assisted in surgery, and on her next return to Kontum Pat took great pleasure in telling us all that Dr. Braile had to have the heaviest hand with a retractor she had ever encountered. She also delighted in displaying her scar to the Montagnard staff which they in turn found wonderfully amusing.

It was Pat when she returned who filled me in on some of the events of the occupation, and in particular on the story of Father Dujon, Minh-Quy's professional POW. He had remained in Dak To when the fighting broke out and had tried to do what he could for the injured. In his house he established a kind of amateur Red Cross station, sheltering wounded civilians opposed to the communists. One day, heading for home, he became aware of several VC following him. He knew that if he went into the house he would be leading them to

potential prisoners, so instead he climbed into the back of his land-rover. One of the VC approached and asked what he was doing, to which he replied, "Oh, I always sleep in my land-rover," and then and there, surrounded by watchful VC, he curled himself up on the floor and promptly went to sleep. "Dujon, how could you sleep?" Pat had asked him, to which he had simply replied, "I was very tired."

On another occasion, he had been walking towards a minor battlefield south of Dak To when he abruptly found himself face to face with an NVA tank. The tank halted and the driver asked Dujon how things were going in Dak To. Dujon answered with a long, and totally fictitious, account of the decimation of the NVA in Dak To. "It's terrible up there," he concluded, "Really dreadful. Your people are getting a terrible beating. In fact, if I were you, I'd turn my tank around and give myself up." And the tank driver followed his advice. Thus, single-handed, Father Dujon captured an NVA tank.

In the end, of course, Dujon was himself captured and spent some three months with the NVA living on handfuls of rice and growing unrecognizably thin. For a time there were rumors that he and three other priests had been crucified by their captors, but Pat and the Montagnards discounted these having no eyewitness evidence. And, sure enough, all four were ultimately released, Dujon, for all his thinness, utterly unsubdued. It took a direct order from the Bishop to get him back to France for a period of recuperation, and he departed grumbling every inch of the way.

Western staff was curtailed by comparison with the wealth of Westerners on hand the previous Christmas, but with the expanded

responsibilities of the Montagnards the shortage was not felt. Susan had departed shortly before my return, after a sad breach with Pat and the Bishop. She had asked permission to take Marie-Thérèse home with her for nurses' training in the States and permission had been refused. Then she had asked Marie-Thérèse directly if she wanted to go and Marie-Thérèse had jumped at the idea. It meant leaving the convent, but Marie-Thérèse had never been suited for convent life. It also meant a cultural adjustment for which neither Susan nor Marie-Thérèse had been prepared. Susan's letters always described the humorous aspects of Marie-Thérèse's confrontation with American life, but there were obviously moments of despair for both of them before Marie-Thérèse achieved a truly viable compromise between her Montagnard heritage and life in the United States. And yet throughout the struggle, Marie-Thérèse pursued her studies with dogged determination, achieving a B average at the college level with only a grade-school education -- and her years at Minh-Quy -- to draw on.

Tom had also returned to the States. He had married shortly after his return, and he and his wife and Dich lived in Hawaii, an ideal location for Dich with his mixed heritage. I heard little from Tom, but Silva, also in Hawaii, wrote long, chatty letters, pure Silva from start to finish, in which she told of Dich's rapid adjustment to Hawaiian life. Dich, for all his Montagnard birth, was his father's son, tough, jaunty, bright and resilient, and I never had much doubt of his ability to look after himself in any situation.

John too was in America, working part time in the Emergency Room of a Seattle Hospital. The months in Pleiku when he had been the

Montagnards' chief resource in their struggle to keep the Hospital alive, had left him drained and exhausted but reading between the lines of letters from the Brailes and Susan, I suspected that John too was finding re-entry more than he had bargained for. He drifted in those Seattle days, and it would not be long before he was once again en route to Kontum to take over the training of the Montagnard physician's assistants, Gabrielle, Françoise, Hiao and Ta.

In no time at all the grim days of guilt and anxiety in America faded into a distant memory for me. Had I really been so oppressed by my return home? Really entered once again so quickly into all those awful American anxieties? I saw them now with the same dispassionate clarity, the same sense that Kontum held something better for me, that I had had in that memorable chopper ride the year before. And once again I found myself seeing the Montagnards not as oppressed, impoverished and primitive, but instead as people wealthy and generous with their wealth, sharing courage, warmth, and, always, laughter. Their lives remained by Western standards intolerable, now more than ever crowded, deprived, and ridden with disease. I thought often of Pat's statement: "These are my people and they love me." I would never have the right to say the same thing with the same assurance, but I could at least share something of that feeling and say with conviction that I loved them.

The days merged together, good times and bad times blending. We still had our periodic struggles with casualties, always exhausting, often tragic. Once, struggling with a woman who unaccountably showed little of the Montagnard stoicism and would not lie still while I cleaned

her wounds, I exploded in rage: "Mother, will you for God's sake stop wriggling!" Vincent, at the head of the stretcher, commented dryly, "This woman's child was killed in the attack." And I returned my task silenced, biting back tears for these people who never asked for compassion and scarcely knew what to make of it when it was offered.

More often it was the medical patients who exhausted our skills and our emotions. Kwashiorkor, rare at Minh-Quy before the offensive, became the most dreaded of our diseases. There was always a handful of pitifully wasted children in the Hospital with their famine-swollen bellies and skeletal arms and legs patiently enduring their prolonged and all too often unsuccessful treatment.

But there were also days of steady satisfaction when looking around the ward I would see patients on the road to recovery and a staff working hard and well together. In one such lull, when the Hospital was full but not overflowing, we held a jar party for Gerry Hickey, the anthropologist who had been a good friend to Minh-Quy. The impetus for the party came from the Montagnards: they liked Gerry and wanted to show their appreciation for the many airlifts of dried fish and other supplies he had organized for the Hospital with the help of a group of American women in Saigon. And in an obscure way, they recognized Gerry's respect for their customs and culture, his deep-rooted wish that both might endure.

Once again the Hospital yard was bedecked with parachute silks and ornaments and the jars ^{filled} in from the staff, from Marylu, and from the few villages still free from VC control. This time there were no casualties to interrupt our pleasure and we spent a long and happy

afternoon sampling the rice wine and munching on scraps of grilled chicken and pots of mixed greens. Siu Kot, inspired by the occasion, made a quick trip to downtown Kontum and returned with a select supply of half-hatched duck eggs, a rare delicacy which I was unable to cope with but which Ed nobly swallowed down with at least a pretence of pleasure. Entertainment was provided by the gong players and by the young girls from the orphanage across the street. The girls brought with them assorted lengths of bamboo, which, laid out xylophone fashion on the ground, provided the Montagnard equivalent of musical glasses. The players knelt at either end of the hollow lengths of bamboo and as they silently clapped their hands the air displaced through the bamboo tubes became a note of sweet and solemn music. It was an enchanting instrument and the young girls, all in white, bending to their musical task, were very much a part of the enchantment.

As dusk fell the party thinned. The gongs fell silent and the gheckoes emerged, calling their staccato, half-swallowed "Gheck-oe!" as they hunted insects in the half-light. Gerry and Rita and I (Ed had left early for a Vietnamese class with one of the young priests at the seminary and Bill and John were away on business) sat chatting with the remaining Montagnards. Vincent, Françoise and Gabrielle were there, and with them Hiao, Nglau, Chuuh, Hlip, Gat and Siu Kot. We exchanged small jokes and reminiscences. Yin joined us, carrying Gwen Braile, the adopted Vietnamese daughter she and Hiao had named for Dr. Braile's wife. She approached our little group diffident and smiling, and to my startled pleasure removed her beaded necklace and, laughing, fastened it around my neck. Gerry, at whose feet lay a small mountain of gifts from the

Montagnards, shared my satisfaction. He had drunk deeply of the rice wine and his praise for the Montagnards was uninhibited and fulsome. All of us recognized that in the trust and affection of these people we shared a gift for which no thanks were adequate.

It was almost two years since I had talked to the reporters in Saigon. "You're lucky to be going to the Highlands," they had told me. "You'll be seeing a civilization that just won't be around in another generation or two." Perhaps. Perhaps the Hieps, the Saigon cowboys, the CCC graduates would be the survivors. It was surely the realistic view and the Montagnards were realists. And yet they also possessed an abiding affection for their own civilization and, on occasion, a willingness to overlook reality. In the midst of war they had written for me "May you live in good peace, each year growing better than the year before." I would return that New Year's wish to them: Oei ma lo'ng, stay well, and stay in peace, each year growing better than the year before, wherever war and civilization may take you.

The party drew to an end. On the ward the patients slept, wrapped in their thin blankets, coughing, a few babies awake and fretful. The dim light of a kerosene lamp glowed from a window where Hrong was sorting medications. Over the yard the tropical sky of Kontum arched, a sky awash with stars as always, and as always achingly beautiful. Gerry, Rita and I went slowly home. The few Montagnards left in the Hospital yard called their farewell after us. "Bôk mă lo'ng! Bôk mă lo'ng, haw!" And we answered, deeply contented, "Bo'nê ko'ih. Oei mă lo'ng."

Glossary

AFB: Acid-fast bacillus, the organism of tuberculosis.

Anat deh or Anat jt (Bahnar): Very difficult.

ARVN: Army of the Republic of Vietnam (South or a soldier thereof).

Bac-sy (Vietnamese): Doctor.

Bo'n (Bahnar): Thank you.

Bo'ne lo': Thank you very much.

Bet po'gang (Bahnar): Injectable medication.

Bnh-vin (Vietnamese): Clinic or hospital.

Bok (Bahnar): Sir or mister.

Bk (Bahnar): To go or walk.

Cath: To insert a catheter, most commonly into the bladder for urinary drainage.

CBC: Complete blood count, a laboratory test.

CC: Cubic centimeter, a measure of volume.

CCC: Command Control Central. In Kontum a military unit composed of American advisors, Vietnamese officers and Montagnard mercenaries.

CO: Commanding Officer.

Cobra: A rocket carrying helicopter.

Corps: An area of Vietnam, which for military purposes was divided into four corps, I-Corps (pr. eye-corps) being farthest north, IV-Corps farthest south. Kontum was in II-Corps.

CSR: Central Supply room.

Cut-down: A minor surgical procedure in which an IV is started by cutting down to a deep vein.

Dang ei (Bahnar): Right now.

D/C: Discontinue.

Dust-off: Helicopter used to transport the injured or the crew of such a helicopter.

ER: Emergency room.

Et po'gang (Bahnar): Oral medication.

Falcip: Falciparum malaria, a virulent form of the disease found in the Highlands and often resistant to standard antimalarials.

Frag wound: Fragmentation wound, an injury caused by flying debris.

GSW: Gun-show wound.

Hnam po'gang (Bahnar): House of medicine, hospital.

Hâm (Bahnar): Yes. Used also to ask a question.

I&D: Incision and drainage (e.g., of an abcess).

ICU: Intensive care unit.

Ik: Stool (as a noun) or to defecate.

Incoming: Incoming mail, rockets aimed at the speaker or his environs.

IV: Intravenous. A fluid or medication given directly into a vein.

Ji (Bahnar): Pain.

Ji deh: Great pain.

Ji klak: Abdominal pain, cramps.

Jou'n (Bahnar): Vietnamese.

LLDB: Acronym for Vietnamese Rangers (Special Forces).

Linh (Bahnar): Soldier.

Ling lang (Bahnar): All the time.

Lo' (Bahnar): A lot.

Lôch (Bahnar): To die, dead.

Lo'ng (Bahnar): Good.

Lo'ng jât: Very good.

LP: Lumbar puncture, a diagnostic test involving withdrawal of cerebro-spinal fluid.

M-16: An automatic rifle in common use in Vietnam.

M-79: A grenade.

MACV: Military Assistance Command Vietnam, a military installation.

Medcap: A quick medical survey of an area, usually involving vaccination plus some assessment of the ill.

Medevac: Medical evacuation via dust-off.

Mike Force: Mobile Reactionary Force, largely mercenaries.

My (Bahnar): American.

Nao (Bahnar): Recently or new.

Nom (Bahnar): To urinate or (noun) urine.

NVA: The army of North Vietnam or the soldiers thereof. In this text

I have not tried to distinguish between NVA and VC. Much of the activity here attributed to VC was probably in fact due to NVA.

Oā (Bahnar): To want.

Oei (Bahnar): To wait, stay or be.

Outgoing: Outgoing mail; i.e., rockets.

Po'gang (Bahnar): Medicine.

Po'lei (Bahnar): Village.

Rim nar (Bahnar): Every day.

Ro'gei (Bahnar): Clever.

R&R: Leave or vacation.

Ringer's: Ringer's lactate, an IV solution.

Spinal tap: An LP.

Stat: Right away.

Tbc: Tuberculosis.

Tracheotomy: Creation of an opening in the neck through which a patient with an obstructed airway can breathe. Also the opening itself.

Triage: To sort patients in an emergency or mass casualty situation.

Uao (Bahnar): To understand.

Uh (Bahnar): No.

Uh ko'dei: Don't have, or nothing.

Uh ko'si: Isn't.

Uih kle (Bahnar): To steal going home, i.e. to leave the Hospital without permission.

USAID: United States Agency for International Development, the organization supplying Minh-Quy with much of its medication and equipment.

VC: Viet Cong, underground fighters for North Vietnam living in the South and/or the military wing of the PRG which claims to be distinct from Hanoi.

Viet Minh: Cf. VC. The term dates back to the French-Indochinese war but is used by many older Montagnards interchangeably with VC.

VNCS: Vietnam Christian Service, a service group in Vietnam.

VPVN: Visiting Physician Vietnam, a program sponsored by the American Medical Association.

Binh Viên (Vietnamese): Clinic or hospital.

Xik (Bahnar): Montagnard rice wine & by extension any form of alcohol.

Xoai (Bahnar): Drunk.

Xo'nep (Bahnar): Peace.

Ya (Bahnar): Madam or grandmother.

Ya Tih (Bahnar): Big grandmother.