

Arizona State University

College of Nursing
Tempe, Arizona 85287

ORAL HISTORY PROJECT

INTERVIEW AGREEMENT*

The purpose of the contributions of Cadet Nurses Project is to gather and preserve historical information by means of the tape-recorded interview. Tape recordings and transcripts resulting from such interviews will become part of the University Archives, Arizona State University as The Joyce Finch Collection. This material will be available for historical and other academic research by scholars, students and members of the family of the interviewee, regulated according to the restrictions placed on its use by the interviewee. Arizona State University, College of Nursing is assigned rights, title, and interest to the interviews unless otherwise specified below.

I have read the above and voluntarily offer the information contained in these oral history research interviews. In view of the scholarly value of this research material, I hereby permit Arizona State University, College of Nursing to retain it, with any restrictions named below placed on its use.

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Constance J. Besch
Interviewee (signature)

7-27-87
Date

Name of Interviewee

*Modified from: Charlton, T. L. (1981). Oral History for Texans. Austin: Texas Historical Commission. p. 64.

This is Joyce Finch, Ph.D. Today is July 27, 1987. I'm interviewing for the first time Ms. Constance Besch. This interview is taking place in her home located at 7232 South La Rosa in Tempe, Arizona.

This interview is sponsored by the Arizona State University College of Nursing and the Arts, Social Sciences, and Humanities Council. It is part of the Contributions of Cadet Nurses Project.

JF So as I said, we will just follow the list of topics in a sequential fashion. First of all, maybe you would tell me when you graduated from nursing school?

CB In 1946.

JF 1946, so you were in the Cadet Corps the entire three years of your schooling?

CB No, I don't believe the Cadet Corps started until we were in approximately six months. Then we all went in. We entered in 1943, and the Cadet Corps started I think about six months after we started the program.

JF What induced you to go into the Cadet Corps, do you remember?

CB Why heck, it was free -- they were going to pay us. It just sounded like a great opportunity and I would have no qualms about going into the service after my training. I thought the service was great. I was raised that way. My Dad was so patriotic, and he instilled that in all of us. I mean, to fight for your country was just wonderful.

JF And in 1943 there was a lot of that patriotism in this Country.

CB Oh yes. And I had family in the service at the time, too.

JF Now, did you go to a hospital three-year school?

CB Yes, I did.

JF What was your hospital school?

CB St. Vincent's Charity, Cleveland, Ohio.

JF And about how large was that hospital at that time?

CB At that time it was about 250, 250 beds. At that present time it's 450.

JF Well, most hospitals have grown quite a bit in the last 40 years. Do you remember how large your nursing school class was when you when you entered?

CB Yes, it was 50. No, 50 to start, 34 to graduate.

JF That was a good sized class.

CB What else was there for us to go into at the time? In '43 we were either teachers, nurses or waitresses, wasn't it?

JF Or secretaries.

CB Secretaries, right.

JF My father says, "Why don't you be a secretary? They can always get a job."

CB I thought nurses always could, too.

JF Right. Then, when you were in your program, did you have any college affiliation?

CB You're talking about during our training or after?

JF Yes, during your training. Did you have any college classes?

CB I really don't think so.

JF Some hospitals schools did have some affiliations back then. Did you have any hospital affiliations?

CB We affiliated for OB to St. Anne's, which was just a Maternity Hospital.

JF Was that in Cleveland?

CB Right. We were in the heart of Cleveland, right downtown. That experience was just magnificent, because we got everything. But we did affiliate with St. Anne's for OB training, and we used to walk back and forth with a police escort to our classes in our little capes -- our red and blue capes and caps. The policemen escorted approximately six to eight of us at a time. We had probably three months in each section of our training, and OB was three months.

JF Did you have any other affiliations, like for Psych. or Communicable Disease?

CB We went to City Hospital for Psych. That now is called... I don't even know what they call it now. But, we called it "City Hospital" at that time. It was the big city hospital that was the only place that had Communicable Disease. We went there for Psych. And that's it, other than a visiting

nurse... Well, no, we had visiting nurse as part of our training. It was just another area, that I think was an extra area at the time.

JF It does seem as if there were some hospital schools that offered some visiting nurse service experience for their students.

CB Right, and we did.

JF In the Cadet Corps, the legislation did provide that the students could go away from their home school for certain experiences -- military, or VA, or public health. Did you do anything like that?

CB No. Not anyone in our class ever went away from the school.

JF Was that your choice, or was that the school's choice?

CB I don't think it was ever offered, as I recall. I don't think so.

JF That's alright. Then, what did you do that last six months?

CB My last six months I'd had all my requirements in, and my last six months in training I was a night nurse on M, which was a complete Medical floor, and I was the senior nurse working with a junior. I just was in complete control of a whole ward. Eight months they left me there, because I had all my rotations, I'd had them all. We had everything, too, in those days, as you well know. We did it all.

JF So you were in charge, you said on nights?

CB Right, nights.

JF How were you supervised during that period?

CB During that period by just a night supervisor that popped in and out. She stayed there through the night. I remember her name -- Miss Carmody. I remember her well, and that's going way back. She impressed me very much. I liked her very much. Miss Carmadie was our night supervisor I think there at Charity for just years and years. She would be there -- she was in the building at all times. She would just walk around and visit us, see how we were doing. I just had so much confidence by the time I became a senior that I never had any real problems.

JF I'm assuming you did not, but did you have any additional classes during that period for that particular role that you were doing where you were like in charge?

CB No, I did not. I didn't think I required any either, at that time.

JF How did the Cadet Nurse Corpse make a difference in your nursing education?

CB As opposed to being not a Cadet Nurse?

JF Yes.

CB I don't think in the education it made a bit of difference. It seemed as though we could be a Cadet Nurse if we wanted to. I don't think there was any distinction if you were a Cadet or not in our class. The only distinction was that we got a uniform and we got a stipend. I don't even remember what the stipend was. What was it? I know some of the girls must remember.

JF It comes to my mind that it was variable over the three years. At one point, and \$20 sticks in my mind, but I don't know whether that was beginning or ending.

CB I think that was ending, because I think beginning was a little less than that.

JF It's hard for me to remember, because I could always spend whatever I got.

CB Well, I'm talking about other interviews -- did anybody else remember?

JF No.

CB Oh.

JF Oh, I'm sorry. It actually didn't come up -- the exact amount. Although, I shouldn't say it never came up, but everybody is a little fuzzy.

CB I don't think it was a heck of a lot, but it was enough that you could do a few extra things if you wanted to.

JF A little walking around money.

CB Right. Now, what were you saying? I forgot the question.

JF Oh, you were saying how the Cadet Corps made a difference in your nursing education.

CB Oh, so I don't think it made any difference in the education itself, but it just made it a little easier as far as we wore uniforms if we wanted to. The uniforms were really nice. We had free transportation, public transportation. I lived outside of Cleveland, so I could go home on the busses, whatever, free. They never took any money from anybody in uniform. Naturally, you'd wear your uniform home so that you could ride free. I lived quite a ways. I must

have had to take at least three busses to get home. That was just one little advantage. Otherwise, I don't think I ever wore the uniform.

JF Okay, so then you graduated in 1946?

CB 1946, right.

JF You went to work as a nurse then?

CB Yes. And I stayed at Charity and worked there.

JF What did you do then at Charity for your first job?

CB My first job was on Ward J, and it was on the charity ward. That was where I had worked either at the beginning of my senior year or end of my junior year. I just loved the head nurse there. I remember her name -- Bridgette Barry. She was such a wonderful nurse. Then when I graduated, my Director of Nurses said that Bridgette Barry had asked for me to work on that floor if I would like to. I said, "Hey, anybody that wants me, that's great." So I worked with Bridgette for a year. I guess it was just a year, because then I got pregnant. I got married in August. Graduated in June and got married August, and just continued working. And floor J was a wonderful floor to learn on. We had Blacks. We were in a downtown area in Cleveland, so we had Blacks and poor people. The experience that we had was just wonderful. I can remember some cases that were just so bizarre. One man was run over by a street car, and he came in with his legs all mashed. We had to remove his legs. Just things like that which were just such interesting cases. We were downtown, the only downtown hospital at that time -- large downtown hospital. That's where I worked all the time until I left, because I was pregnant and had a baby.

JF I'm a little bit curious. This man who was run over by the streetcar -- obviously, that was a crisis and emergency. How come he didn't go to City? How come he came to your hospital?

CB It was right down 9th Avenue, and our hospital was right down the street. And that was our charity ward. Those people didn't have to pay. We took those people in. We had that charity ward, and then on the third floor was the room for the President of one of the biggest manufacturing companies there. He had his own private room, and when he came in that was his room with his own private nurse. So, we had the high and the low of everything.

JF Sure. Yes, the reason I just fastened on that a little bit is that I was thinking that in a lot of hospitals, it's the City or public hospital that has the emergency room. Most everything just goes there.

CB Oh, no. Our ER got everything. In fact, that was one of the positions that we had to stay at for three months during our training, the ER was. That was very interesting.

JF Okay. Now, when you were working on J, were you working as a staff nurse then?

CB Yes.

JF And did you rotate?

CB No. You mean on a shift?

JF Yes.

CB No, I stayed. I worked days.

JF I'm taking it that what brought the patients to that ward was their economic status, and not their disease.

CB Right.

JF So it was really medical, surgical, orthopedic, all on one unit.

CB Right, everything.

JF And then you got pregnant?

CB Yes. I got married first.

JF Yes, you did say that. Okay, now how long before your baby was born did you leave?

CB Oh, maybe two months before.

JF Some of the nurses have said that at the different places they worked, there was somewhat more rigidity about how long people could work at that time.

CB There was a lot, yes.

JF When you then left to have your baby, did you stay off?

CB I stayed off and then went back. Occasionally they'd call me if they were short and needed someone, for vacation time. But, it was never a steady stream. No, I stayed home. I had three babies. I now have seven children altogether and my first three were "bing, bing, bing". So, I never had too much time between to do anything. I loved it. When they did call me I loved to go back, but it would only be for a day or two, or a special. If somebody needed a special and they didn't have a special, they'd call and ask if I would come in and special somebody. I'd say okay, as long as it

wasn't for a long stretch.

JF How long did you do that?

CB Oh, I did that all through having my kids. I never went back steady until after I had my sixth child. Then I went to work for a doctor.

JF In an office?

CB Right. A cardiologist it was.

JF About what year was that?

CB Oh, let's see, Terry was born in '57. I put my kids dates on here so I wouldn't forget them. Terry was born in '57, so I went back to work probably in '59, for a doctor.

JF So that was a full-time job -- days, nine to five kind of hours?

CB Right.

JF And what was your role there?

CB I was the office nurse that did everything. I was the only one. Did everything.

JF So did you do books and billings, as well as charts?

CB Everything. EKG's, everything.

JF Prepping the patients, etc?

CB Right.

JF It sounds like a whole bunch of stuff.

CB Right, that's the kind of office we had then. We didn't have the kind they have today, where you have a little girl running around doing her own little thing, and this one does this thing. I can't believe the people that doctors have working for them.

JF Oh, yes. It's very, very specialized.

CB It's different.

JF Yes. We don't think of that when we think of the doctor's office. Well, I don't. You do, obviously.

CB I do, yes.

JF Okay, so you worked then for a cardiologist?

CB Right.

JF How long did you do that?

CB I did that until I moved out here, which was in '72. I had another baby, but then I went back and worked. I had another baby in '64 -- that one sitting out there. (POINTS)

JF Number seven.

CB Right.

JF When you worked for the cardiologist, did you stay strictly in the office, or did you make rounds with him in the hospital?

CB No, he was not that type. I worked for a doctor who came in. He was a cardiologist from the Philippines. He bought out a doctor's practice, and the doctor's practice that he bought out had delivered my second to the last baby, Terry. He sold his practice and went into anesthesiology, and he sold his practice to this Dr. Jimenez. I heard that he needed someone to work for him, and I thought it would be a really good opportunity to get back into nursing a little, but not to the point where I was committed. I was first committed at home. If my children were sick or anything, that's where I would stay. But, having all those kids you always have someone at home. My two oldest were girls. And the high school was so overcrowded that the high school went on half sessions. So I had a girl in the 11th grade and a girl in the 12th grade. One went in the morning and one went in the afternoon. So there I was with these high school girls with nothing to do. That was a perfect opportunity for me to say, "Okay, Mom's going off to work. Here you are girls." They helped with Terry and Donna, both. It worked out very well.

JF So they kind of helped with the baby-sitting?

CB Well sure. They learned to keep house, take care of babies and cook. It was the most marvelous thing for them. They didn't think so at the time, but afterwards I think they did. It really worked out so well. They learned so much, and I probably would have kept right on doing all those things that I did for my kids until this opportunity came along, and there was no way I was going to let the girls sit around half the day. So it worked out very well. Did I answer what you asked me? I really don't know.

JF Yes, I was just thinking about that -- your girls. Did they ever get to the point, your two oldest, that it was good for them?

CB Oh, not in so many words. But I think they realized it. Yes, especially when they got married. Babies didn't bother

them at all. They were very comfortable with them when they had theirs. The oldest one never had any, but the second one did -- she had three. She was so good with her babies, and she learned to cook just like I cook. That's what really got me. Whenever I'd say, "We're going to have this for supper, Pat", she'd say, "Okay, I know how to fix that." And she fixed everything just like I fixed it. So it worked out very well.

JF So then, I think you said, in '71 or '72 you moved here?

CB In '72 I think.

JF And when you came to Arizona, did you continue to work?

CB I wanted to work very badly. I was so depressed. I hated it.

JF You hated what?

CB Arizona. I'd never been here before. I came in June, and what's more depressing? So I was so depressed, that I knew I had to get out and do some work. Well, I had my oldest at home at the time, in high school, and then I had this one, Donna, going to Powell. No, Roosevelt Elementary School. She was only six or seven when we moved. So, I thought I couldn't get a job and go to work with her in school. My other two were in high school. They worked part-time. They wanted to do anything to get... Well, they hated school here too. It was not a happy two years. So I decided since I was living right near MCC, and I saw the refresher course -- I thought why not? In the first place, when I applied for my license they asked me when was the last time I'd worked in a hospital. I told them, and they said I had to work in a hospital within five years of applying to get my license. So I had to take a refresher course. A doctor's office didn't count. So I went over to MCC and took and refresher course, and I loved it. Sherry Bradshaw was my teacher. I will never forget Sherry. After I finished it, I started applying. Well, all I could apply for was nights, because, with Donna in grade school I could not be gone through the day. I thought even if I was sleeping, I would be there. When she got home I could be up, so on and so forth. So I applied for nights. I wound up over at Desert Sam, which is where we had most of our affiliations. They wanted somebody five nights, and I said I would work four. They said they wanted five. I said I'd have to think that one over. In the meantime, Sherry Bradshaw called me up on the phone and asked if I were working yet. I said no. She said, "I watched you with some of the older people there at Desert Sam, and you were so good. My good friend is just starting a nursing home in Mesa." I said, "Well, I've never worked in a nursing home in my life." She said, "But you're so good with those older people, I think you'd be wonderful. Do me a favor and go over and apply." I went over and

applied. I can remember Sharon Enos was the Director of Nurses, and she was so nice. She interviewed me. I said, "Well, if you're willing to take a chance with me, then I'll go ahead, but I've never worked in a nursing home before." She said, "If you're willing to take a chance with us, we're willing to take a chance with you." So, I started nights. When it first opened, it was Mesa Christian. It was March 10th -- I remember the date very well, and I've been there ever since. I started on nights, and then I became the night supervisor. I worked on a skilled unit, and loved it. I love those people.

JF So, they have different levels of care?

CB Yes, there's four -- personal and intermediate. And we have my gated unit, which is the Alzheimer's Unit, and then the Skilled Care Unit. I worked with them for eight years on nights. In the meantime Donna was moving right along and getting out of school. I thought maybe it was time to go on days. So I worked days, on the same unit. Then the opportunity came along for a Head Nurse job on this Alzheimer's Unit. I thought, "Oh, I don't know. I hate to leave these people here -- the really sick ones that I really love and just love to take care of." They just meant so much to me. But, she said to try it. Everybody always said to try it, but I didn't want to change anything. But I said I'd try it. I went to Delta, that's my unit, Delta, and I just loved it. So I've been there ever since. Now I'm the Head Nurse on Delta. I just love it. And Alzheimer's is the "coming disease", isn't it? Everybody's getting it. It sure is interesting to see the people that I get, and the age range, and almost the same things that happen, you know, month after month, to these same people. You see that they're going into this phase or that phase. It's just very interesting work, I just love it. I'm still there. I'm 62, and I don't know when I'm going to retire -- whenever my husband does, and he hasn't retired yet. That's it. What did you ask me there? I gave you a whole history.

JF Oh, how you got in your present job. Okay, let me just clarify something. You said that the family came here in '72?

CB Yes.

JF And you started working in '75?

CB Yes. I took my refresher in '74.

JF Okay, so for two years you were...

CB Just depressed. I didn't do anything. I didn't know what to do. I just hated it here, we only had one car. I thought you couldn't get around here without a car. Of course, you're not interviewing me about Arizona.

JF Well, that's true. But, it is different when you come from a place with good rapid transit to a place like this.

CB Right. We could walk to someplace, but here you couldn't.

JF This is just a little side trip, but I remember a very insightful woman wrote a letter to the editor of the Paper. This has been some years ago, but somebody was raising a rumpus about sending children to walk to school. It was good for them. You know, "When I was a kid I went ten miles through the snow", and blah, blah, blah. And she said, "You might have done that when you were a child, but my children have no sidewalks between my house and the school that they attend. There's no sidewalks, and I refuse to let my children walk in the street." I thought that was a very interesting point. I started looking around, and there's not a lot of sidewalks in this town, and some of those are very narrow.

CB Right.

JF So, anyway, in this period of time, after you took the refresher course, did you take any other formal or informal education?

CB Yes. I've taken Electrocardiography I and II. I loved CCU over there and thought that might be what I wanted to go into. Then, Sherry called me and I told her I was taking a class, so on and so forth. I was just finishing and it was in December. So I had those two classes. After I started working at Mesa Christian I took Geriatrics. I can't remember the formal name of the course. It was Geriatrics something. My Director of Nurses went, and our Assistant Director of Nurses and a couple more nurses -- we went. Then I went to ASU and took Assertiveness Training for Nurses from two women who were Ph.D's. What else did I take? I took at least five different classes. I probably would have continued because I loved going to school, but I couldn't do both. I couldn't work and go to school, too. I find that I get really tired. You know, with my house and kids, and family.

JF Yes, it's work.

CB Well, and I'm Catholic. You must know that by my going to St. Charity -- this is another thing -- that I trained in a Catholic hospital which at the time I think was very lax in a lot of its training. Such as, when I graduated as an RN, I didn't know what a diaphragm was, never had heard of birth control, per se. It was never even allowed in that hospital -- even the talk of it. When you got out and somebody would mention it to you, you'd feel so stupid. I didn't even know what they were talking about.

JF It wasn't bandied about a lot in the Lutheran school I went to, either. You can't throw that all on the Catholic Church!

CB Okay, I'm glad to hear it! I thought afterwards, wasn't that narrow, though, of them. Everybody isn't Catholic, everybody isn't Lutheran. We were supposed to know all of these things, or have at least experienced them. And we didn't.

JF I think that hospital nursing education was very limited on the ante partum. And of course, I would guess that the family planning and birth control, those kinds of things, were really way down there and the bottom. We were kind of zeroed in on the labor and delivery, and immediate post partum period.

CB Exactly, and nothing else.

JF That was about it. Well, okay, then have you done any special workshops, or informal education? Anything for, say, being Head Nurse, or the managerial aspect of what you do?

CB Yes. At Mesa Christian we've had classes with a counselor who's a... Gee, I don't even know what his title would be. It's Bruce Reed, and I know he travels between Tucson and here. He has this training for nurses, for businessmen for businesses. He teaches us how to give orders, how to take orders, how to assess our health, that kind of training. That was a 13-week course which just the Head Nurses took. I found it to be very interesting. We took it right at Mesa Christian. Really, they give us a lot of in-service training. They are just wonderful. I can't speak highly enough of the place, believe me, and of the Administration, my Director of Nurses, and my Assistant Director of Nurses. I wouldn't be there for all this time if I didn't really think they were great, and if I didn't enjoy what I did. There's a lot of nursing homes that I wouldn't give you two cents for. You know that yourself.

JF Well, one of our faculty is Bea Steffl, and I think she's spoken quite highly of your institution.

CB One of your staff was going to start something over at ASU. She came through my unit, and she was just so impressed with the little things that we have done. The glasses cases -- we have what looks like what you put your shoes in to hang up, and that's for glasses. Everybody has their name above it, so at night we can collect the glasses and put them there. The dentures are the same way. From Alzheimer's people you collect all these things. They like to shop around, and they all come out with each others' glasses in the morning if you don't collect them and put them away. There were little things like that that this woman thought

were interesting. I can't remember now, when they brought her down and introduced her to me, what she was going to be doing.

JF I don't remember anything in particular, but there's a lot going on in different areas.

CB Oh, I'm sure. And that name is familiar to me that you just said.

JF Bea Steffl?

CB Yes.

JF She's been very active in care of the elderly.

CB Geriatrics.

JF Yes, in geriatrics for about the past 15 or 16 years. Right now she's very much involved in doing a study. They're interviewing caretakers of the elderly, and trying to find out what problems they're having and what support they're getting, if any. Now, I'm going to shift gears here again. I realize that during part of the last 40-some years you have not always worked in nursing, but when you were working did you want to stay in nursing?

CB Oh, yes, definitely. Another little sideline, is that being in nursing -- for instance, when the polio vaccine came out and they needed people to give it out at our church -- they wanted nurses, people who would come in uniform and give out the polio vaccine. I can remember going down and doing that, and the people saying, "Oh, Connie you look so good in that. You ought to get back to work." Just little things that I could do like that. And specializing, a lot of friends and people. I always wanted to keep my hand in it, that's all. I just felt that I had to keep my hand in it, because I never knew when I would want to go back to work full-time, and what I would do. I always thought I wanted hospital nursing, because I thought hospital nursing was the only way to go.

JF That's the way we were trained.

CB Right.

JF Let me go back. When you went back for your refresher course, it had been a while since you had been in a hospital. Did you see lots of changes?

CB Yes, I saw lots of changes.

JF What were some of the changes that you saw?

CB Well, some of the bigger changes was that we didn't have to curtsy every time a doctor went by. I can remember the nurses on the station saying, "When you are sitting down doing charting, when you see a doctor come up to the desk, don't go and give him your seat. He's got his own little place to sit back here and do his charting. But invariably, if a doctor came, I stood up. It was just like in the Catholic school, when somebody calls on you, you stand up to answer them. You go to the public school and everybody laughs at you. So, it took me a while to get used to not... Well, we were just taught to respect the doctor so much in training at Charity. Then to come to Desert Sam, and to have these nurses tell me not to get up.

JF You'll spoil them.

CB I know, I know. But, that was just one little insignificant change. Everything was so much more sophisticated, and there was so much throw-away. I had to spend three months up in Central Supply cleaning syringes and wrapping them, and autoclaving them. And there at Desert Sam they threw everything away. And what a waste, I couldn't believe that. But everybody said it was the only way to go, because it's so sterile. It's a good technique, you're not going to run into... I don't remember us running into so many things because it wasn't sterile -- any problems because of that. I spent three months in Central Supply doing all this sterilizing and wrapping, and washing. Then I come and the IV, everything is thrown out. The tubing is thrown out, your syringe gets thrown out, your needle, and so on. I was just amazed at that -- I thought it was a terrible waste. The nurses' casual dress -- oh, wow! That really hit me. I couldn't believe it. I saw some nurses with shoes that you just put your feet in and there's no back to it, you know. I couldn't believe that they would be on duty with all that jewelry. That just floored me, I couldn't believe it. You can see what kind of sticklers we were when we were in training. We had to wear hairnets. That was very different.

JF Well, to some extent I know how you did juggle work and family responsibilities. You worked nights, and you worked part-time.

CB Right.

JF Sometimes you didn't work at all.

CB Right.

JF Is there any other things that you did? Well, you corralled your children to help you.

CB Yes, and they did. It just enabled me to go to work, which I think was a lifesaver at the time. I'd had my kids close

together. I think that it was a real struggle to feel as though I was doing anything that was worthwhile. You know, at that time you think being a mother and a homemaker is just the pits. There's got to be something more for you out there. I felt I needed that. I had to have some feeling of self worth, and some contribution to society. That was how I would be contributing -- going out to work. Contributing, also, to the home financially. I have found now after all these years that it's great, wonderful. It gives you a sense of independence and that you're helping out. That you're really equal partners, and all this. Not that my husband ever thought I wasn't, but I stepped into that role of the subordinate. Naturally, in those days, we all were.

JF Well, I think you've answered some of the other questions that I had. Have you ever seen yourself as an innovator?

CB Yes, I have. Especially where I work now. I love to teach them. I love to show them things, I like to show them how to do things. The Aides -- there's so many of them that started with me, especially on nights. They've all gone to NA-II's. Some have even gone to supervising the Manor, which is a new section that we opened up last year. It's apartment living, where your medications are given by the NA-II's that man it. But you're living in your own apartment. Everything is done for you -- cleaning's done, cooking. You're eating in the central dining room. But they still feel a little bit independent, the residents do. That's nice. But, so many of the girls that I've worked with an helped. I just feel like I've made them feel -- do your best and be good. If you're going to be a Nurse's Aide, be a good one. I saw one, Sherry Worth her name is, and she came from Kentucky. You talk about -- I hate the word Hillbilly, but that's what I got. I can remember her. I shouldn't even tell you this story, but she came in, and we had a report from the nurse and she was talking about a couple of the men and how their scrotums were really red and irritated. We had to take care of that. This was the nurse on the shift before me, and she was giving me the report. So we would all sit in on reports. Now we tape reports, and there's no such thing as all sitting in. At the time, then after that shift left, I said, "Okay girls, we're going to have scrotum check." I can remember Sherry coming over to me and saying, "Connie, what's a scrotum?" I thought, okay, here we go. So this is the girl that I got who became an NA, and NA-II, and LPN, and an RN. I just feel that I had a lot to do with her. And she's just wonderful, and she's still a good nurse. Now she's over at Mesa General, and loves it, and is doing a super job. She just loves it. She was an excellent nurse and did everything just the way I taught her to do it. I thought that was just great. She was neat, and the rooms always looked nice, her patients always looked nice -- the residents. That's just one example. I always feel that if you're going to be on a job, you've always got to learn something new all the time. Even

today, I was explaining hernias to this Aide that didn't know what a real hernia was. She said, "Gee, thanks Connie. I never knew that before." I said, "You know, those are little things that you've got to learn. Ask me questions, ask me anything. If I know it, I'll tell you." And I think that I would love to be a worker for higher pay for nurses. Not for me. I'm talking about the girls in CCU and ICU, the girls that are so wonderful. I know firsthand, because I had an angioplasty a couple of years ago. I went to Desert Sam and then I had to be flown over to St. Luke's for the angioplasty. The girls in ICU were so knowledgeable. I could never work in a hospital, ever. The stress, I think, would just kill me. They're so knowledgeable, and they're doing everything that the doctor did in my day. And they're doing it all today. They deserve more money. Do you agree?

JF Oh, I have no problem with what you're saying at all. Although, I think you should earn plenty of money, too. I think what you do may be low tech., but it certainly is very important to the people who get it.

CB Yes, well I don't worry about what I make. I like what I do. I just love my work. But, I do feel that the nurses aren't paid near enough for what they do. They are so good today, just wonderful. And I don't think the doctors appreciate what they have in these women that are in nursing. When I see the doctors with all their cars and their plush everything, and then the nurses are starving a lot of the time, it just isn't fair. They're doing the doctors' work. Will it ever change?

JF Well, I don't know. I'm not sure that it's going to change in our working years.

CB Do you think they'll unionize?

JF In this century it may change. I'm not sure what our working years are going to be like. But, my feeling is that we want it and we want it now. We're not going to get it now, but down the road.

CB It's going to have to be that dreadful threat of, I'm not going to work for this money. There's going to be the dreadful shortage and the dreadful poor care, and then maybe it will change.

JF Well, we've got that. That may be the change, or what makes the change. Well, let me ask you, then, if you've seen yourself as a leader in the Women's Movement? Now, before you answer, I need to qualify that a little bit. I don't mean that movement that came up in the 70's, you know, that political movement. I'm really thinking of that broader social movement where women moved out of the home into the workforce. That's the movement I'm talking about. Have you seen yourself as part of that movement?

CB By all means. I've tried to instill that in my children. I've got five girls and two boys, and especially in my girls. And to instill it in my Aides. My family almost is gone, but now I have this big family at work and all these girls, and I see so many of them that I say, "Be something, do something. Go to school, become something, so that you have this all your life. Don't be a nothing. Be somebody. Get an education." I'm just a great Women's Libber. I love the liberation of women. I've always pushed it, as far back as I can remember. Well, not as far back as I can remember. I don't think I was such a great women's libber in my early married life, but I think maybe moving to Arizona helped me to become very independent and to want a say in what I'm doing. I want to have a say in my life. I don't want such a structured life anymore. That goes especially now. I don't want the structure of dinner here, and then lunch, and the clothes done on this day, and the house cleaned on this day. I just don't want that kind of structured life anymore. If I don't feel like getting supper, get your own. I mean, you can all walk and you can all go to work. And I can do that now, but my God, 15 or 20 years ago I think somebody might have shot me if I ever said that.

JF That was a big step.

CB Yes, it is a big step. I've got a great husband and a great family. Everybody is just so wonderful. And I have a nurse also, out of the five girls. So I'm happy about that.

JF Oh, that's nice. Okay, well this kind of brings us to the bottom of my list of topics. But, before we close, is there anything that you think I didn't ask you, but should have?

CB Oh, no. I don't think so. Possibly, comparing my training with the nursing of today, is the only think I can think of. When I think of the things that we did that would be frowned on today... We didn't have the equipment that they have today. Oh, I don't know. We didn't have the medications. I was around when penicillin started, and I was around when we got the tray out, and we had all the penicillins lined up, and went right down the hall and gave all the penicillins. Maybe techniques weren't as good. I can remember changing a colostomy and having maggots in the dressing. I was pregnant at that time and I was just standing there gagging, because I was so nasious at that time, and it was a black man and I was trying not to make him think that he made me sick. I was trying to be so professional. Just little things like. That was a dressing that hadn't been changed and it should have been changed. We were on the charity wards, you must remember. We were in a hospital that didn't have air conditioning, didn't have the techniques that you have today. We thought the techniques were fine, but when I look back on them, I could just laugh. I just think, oh Lord, how did we ever manage?

JF Well, this is true. Although, there's an awful lot of hospital induced infections going on.

TAPE TURNED OVER HERE.

JF Okay, you started to talk about the cap.

CB Well, it took us six months on probation and then we got a cap. It always meant a lot to me, so I always wore my cap. Then when I started working at Mesa Christian, I wore a cap. I was one of the few. I knew during our refresher, nobody wore a cap over there at Good Sam. They wouldn't be found dead with a cap on. But, I have found that now, through the years, everybody always knows me because I wear the cap. I also notice that the patients have much greater respect for me, than maybe they do for the other nurse that doesn't wear a cap. And see, I'm dealing with older geriatric patients who think of nurses as nurses that wear caps. So, they might have a combative patient down there, and they're trying to do something. All I have to do is just walk in the room. He just looks at me -- Alzheimer's or not, and I've got a cap on. You would not believe the difference in his attitude toward me and toward them -- the Aides or another nurse without a cap on. So there's two of us -- the Head Nurse on Chi and the Head Nurse on Delta, who both wear caps. It's just gotten to be -- not a joke, but somebody will always say, "Get the one with the cap on. Ask the one that's wearing the cap down there, she'll tell you." I just think a cap is still very important in nursing and nobody wears them anymore. I don't know how you feel about caps. I think most people consider them a pain. I still have my cap and I still wear it. And I'm one of the few.

JF Well, I always thought they were a pain, I must confess. But I worked in the Labor and Delivery corridor.

CB They are a pain there.

JF Not too many opportunities to wear those caps.

CB Well, that's it. I just wanted to add my two bits about the cap.

JF That's fine. I asked you to do that, and so I expected you to do that. But, I think that at this point I'd like to thank you very much for agreeing to participate in my study.

CB Oh, I'm only too happy to do it. I think it's just great.

JF And this concludes our interview.

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