William Sidney Rosenthal

Military Service

Date of Birth: 28 March 1939

Service Unit: United States Army

Service Number: 19760091

Highest Rank: Specialist 5 (E-5)

Dates of Service: 21 January 1963 to 31 December 1968

Active Duty: 21 January 1963 to 22 January 1966

Reinforcement Reserve: 22 January 1966 to 21 January 1967

Standby Reserve: 22 January 1967 to 31 December 1968 (Honorable Discharge)

Military Assignments:

Basic Infantry Training, Fort Ord, California January to April 1963
Medical Corpsman Training, Fort Sam Houston, Texas April to June 1963
Emergency Medical Care, Paramedic Certification: 1 September 1963
Clinical Psychology Specialist, Army Audiology and Speech Center, Walter Reed Army Medical Center, Washington, D.C., 6 June 1963- 21 December 1965

Service Medals and Ribbons:

Army Good Conduct Medal
National Defense Service Medal
Cold War Recognition Certificate
(and Commemorative Victory Medal)
Expert Marksman, Rifle (M1)

Oakland, California
September 2020

Introduction

My military obligation began in 1963, during a relatively calm period of the Cold War. I expected to be a member of the 'peacetime' Army, assigned to a job that was helpful, not hurtful. I could not imagine myself in a situation where I would be required to harm another human being. Although that goal was realized, it was a narrow escape.

The American military presence in Viet Nam that began around 1959 was made up primarily of Special Forces counter-insurgency operators in advisory and support roles. By 1962, there were 11,300 'advisers' in country. Between the beginning of 1963 when I joined the Army and the end of 1965 when I left active duty, that number had escalated to 200,000 troops.

On November 14, 1965, just six weeks before I was released from active duty, the United States Army fought its first major battle with the People's Army of North Viet Nam at the Battle of Ia Drang Valley in South Viet Nam's central highlands. Enduring heavy casualties, one battalion of the 7th Cavalry was victorious, while a second battalion was disastrously ambushed at a nearby location. This equivocal outcome led the U.S. Commanding General William Westmoreland and the North Viet Nam President Ho Chi Min, each to be convinced that they could win the war. For ten more years that bloody and gruesome conflict continued. In the end, Ho Chi Min was correct.

My military service excluded the major portion of the Viet Nam War, which continued for ten years after I left active duty. I can claim to have served during a portion of the Viet Nam Era. In my mind, however, that claim diminishes the sacrifices of those who served 'in country', something that I luckily avoided.

Setting aside Viet Nam, I am a Cold War veteran. The Cold War was the period between 1945 and 1991, when the U.S. and the Soviet Union were engaged as political adversaries backed by the constant threat of military action. That period included the isolation of Soviet Bloc countries with the so-called "Iron Curtain", the Berlin Airlift, the Berlin Wall, both the Korean and Viet Nam wars, and the Cuban Missile Crisis. For long stretches of time, however, there was no direct major conflict.

With the political fall and dissolution of the Soviet Union in 1991, the Cold War period was thought to have ended. A strong U.S. military presence and readiness was viewed as having hastened that outcome. In 1998, Congress and the Secretary of Defense issued a Cold War Victory certificate in recognition of veterans who served during that period. Although a commemorative medal exists, no official medal or ribbon was authorized or struck. The Coast Guard and some National Guard Units adopted their own. I have earned no medals or service ribbons for overseas duty, conflict, or combat. Those medals to which I *am* entitled herald "Efficiency-Honor-Fidelity" and "National Defense Service". I am content with those.

Number of U.S. Troops in Viet Nam December, 1962-11,300

Trinity College, Dublin, Ireland
August 2006

We are at the Fifth World Congress on Fluency Disorders at Trinity College in Dublin. Colleagues from around the world have converged on this site that was founded in 1582 by Queen Elizabeth 1st. It is one of the pre-eminent old-world universities, likened to Oxford and Cambridge.

I am seated on the dais in a conference room with several other participants. This is the last professional event of my academic career. The audience seems courteous and attentive. It is my turn to speak next and my thoughts are racing.

I approach the podium, solemn and thoughtful.

"Good afternoon. I am going to tell you about a piece of research that is my final contribution as a member of the academic community. The data upon which this study is based were originally collected over forty years ago at the Army Audiology and Speech Center at Walter Reed Army Medical Center in Washington, D.C. It is the place that launched my professional career. My wish is for this presentation to be an acknowledgement and tribute. To the patients who contributed their voices and revealed their innermost thoughts and fears, and to the professional men and women at the Center who welcomed me, nurtured me, and encouraged me to study, learn, treat, and ultimately teach."

The contours of what I have described above did in fact occur. At the same time, I am quite certain that I did not speak any of those words. They were in my thoughts only, now as then. Years pass, memories fade, and they are transformed from fact to a historical fiction. With that in mind, the following narrative may, perhaps, be read with a degree of skepticism. Here and there I have taken some liberties, some intentional and some not.

Trinity College Yard 2006

Trinity College Library

Walter Reed Army Medical Center, Washington, D.C.
3 June 1963 (43 years earlier)

The Arrival

At Fort Sam Houston, I made my way to the transportation section to arrange my flight to Washington, D.C. I hoped to locate and thank the personnel clerk who had come through for me in magnificent fashion with the perfect assignment. I could not find him. I knew what he looked like, but not his name. He might have finished his tour. He was near the end. Perhaps one of his last kindly, or even rebellious acts was to find me a duty assignment that made some sense in an otherwise senseless bureaucracy. Perhaps he did not even know the outcome of the fruit of his labor. So much had depended purely on chance.

My flight from San Antonio connected with another in Dallas-Fort Worth that went on to Washington, D.C. I had a traveling companion, a young woman who had just finished similar medical corps training in the women's section of Fort Sam. She, like me, was headed for her first duty station. She needed to make a connection at Washington National (now Reagan International) and our flight was running behind schedule. She was going to miss her connecting flight.

From a small town in Texas, she went directly from high school into the Army. She had never been far from home and never before on an airplane. She was certain that missing her flight would be her fault and land her in a heap of trouble, just like missing a troop movement. I tried to reassure her. After arriving at National Airport, I led her to the airline's ticket counter, explained to the agent that she had missed her connection, that she was traveling under military orders and needed the next available flight to her destination. No problem. Ticket reissued. Flight leaving almost immediately. She thanked me and off she went to her new life and adventures.

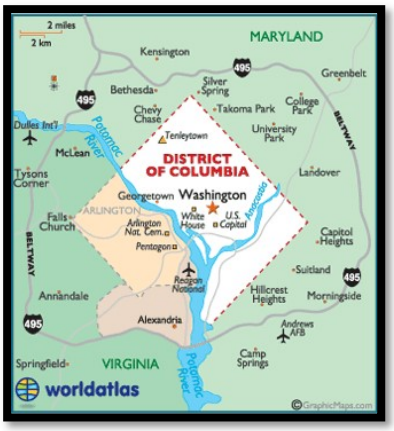
Like this young woman, many, if not most entrants into military service come from small towns and rural areas. They tend to have little experience with the broader world and although imbued with sound common sense, they lack sophistication. They are like putty; easy for the military to mold. I thought about this incident often. It helped me understand the limited resources of many of the patients I served, especially for solving problems they encountered during military service.

D. C. Unsquared

If you look at a map of Washington, D.C., there seems to be something askew. In 1790 the federal district was mandated by Congress, with contributions of land from Maryland and Virginia. It was conceived as a square, balanced on one corner with the vertical diagonal pointing north and south. Each side was 10 miles in length. But now it looks as though an irregular bite has been taken out of nearly half of the western part of the District. That bite is formed by the Potomac River and the Virginia portion to the west. In 1846 Virginia, fearful that

the slave trade would be banned in the District, clawed back their contribution of land. Even after the end of the Civil War the land was never returned.

The Federal Government acts as though all this never happened, and that the original boundaries still exist. If you find Falls Church, Virginia on the map and draw a line northeast to the top of the square, and another line southeast to the bottom, you complete the square and have an area west of the Potomac that contains over 130 Federal installations. These include the sprawling Arlington National Cemetery, the Pentagon, the Central Intelligence Agency (CIA), the Drug Enforcement Agency (DEA), the United State Patent Office, and numerous other agencies and military facilities.



With my traveling partner safely on her way, I turned my attention to my own predicament. It was already late Sunday night. Somehow, I had to get myself to the Walter Reed Medical Center **(1)**. I had been to Washington, D.C. several times as a child, but like most tourists, I had never been farther north than Pennsylvania Avenue. For me, D.C. was the Lincoln Memorial, White House, Capitol Building, Jefferson Memorial, Washington Monument, and the buildings that line the Great Mall and Pennsylvania Avenue.

I was at National Airport, a southern most point in the District, actually on the Virginia side of the River. I needed to get to the extreme northern point of the square, almost to Silver Spring, where the Walter Reed campus was located. Pythagoras will tell you with great certainty that the distance I needed to travel was about 14.14 miles. My suitcase, duffle bag, and I were not hiking.

I had been given a phone number to call. The CQ[1] at the Enlisted Company HQ is crystal clear that nobody is coming to pick me up. I hail a taxi outside the airport and ride north. Driving through the main gate guard post, we are directed to my destination. The CQ is not interested in my orders. Come back in the morning and report in. I am given a bunk number for the enlisted quarters and a map of the campus. I haul my stuff to the correct building and quietly search out my bunk, trying not to disturb everyone who is already asleep. I find my bed and crash. It is well after midnight.

[1] See Glossary at end

Seattle, Washington
October 1962 (8 months earlier)

First Round Pick

The summer of 1962 was my second summer in Seattle, helping my parents at their 60-unit motor hotel adjacent to the World's Fair. I had just completed a year of graduate school following my BA in Psychology from the University of Chicago. That year had not gone well, and I was burned out. I had decided not to return to school. That meant my student deferment would lapse and that almost immediately I would be drafted into the Army.

By chance I met an old friend from Cincinnati who was working on his Ph.D. in psychology at the University of Washington. We had met one summer when both of us were volunteering as recreational aides at the state mental hospital near Cincinnati.

Over dinner one evening, Phil explained that he had completed his military service in Germany as an enlisted Clinical Psychology Specialist. He was enthusiastic about his experience. It had been a wonderful opportunity that set him up nicely for his doctoral studies. He told me that based on my undergraduate degree and year of graduate school, I should have no difficulty getting the same kind of assignment. With that degree of encouragement, I decided to ascertain if it was better for me to enlist than to be drafted.

By October, I was notified by my draft board to report to Fort Knox in Kentucky, home of the 1st Armored Division. That was a place I did not want to go, especially in winter. I was intent to not spend two years driving around in tanks or other armored vehicles. I requested a delay and I began to assess my options.

By then I had left Seattle for Berkeley to meet up with Ann. We had dated at the University of Chicago. She had moved to the Bay Area and was working as a counselor at the county Juvenile Hall. I took a small furnished rental on Chestnut Street, just off University Avenue. Berkeley became my home through Thanksgiving, Christmas, and the New Year.

At the downtown Oakland Army Recruiting Center, I met with a sergeant who told me that I could request Medical Corps training, and that assignment would be guaranteed. It was the first necessary step after basic training. All enlisted medical specialties went through basic Medical Corps training first. I would have to apply to Clinical Psychology Specialist school afterwards. He, like Phil, was encouraging about my chances. I accepted the deal. The Medical Corps had to be better than riding around in a tank. That December I raised my hand and signed on for three years of active duty. My induction date was slated for late January 1963.

Oakland, California-
Basic Training, Fort Ord, Monterey County, California
21 January 1963

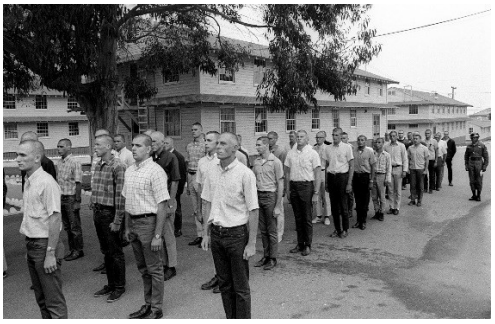
Reception

We rode down in the dark. Bring toilet articles only, please. The Army will provide everything else. We reported to the Oakland, California Induction Center at 7pm, or rather, 1900 hours on 21 January 1963.The bus trip to Fort Ord on the Monterey Peninsula was a two-hour ride. In January, the sun sets early. Why in the dark? Perhaps to avoid traffic, but mainly I think, to confuse and disorient. When we pulled into the reception area, we had been transported to an alien environment for which most were unprepared. Simple commands, like 'fall in' and 'dress right' were met with some confusion.

Late that night, we filed into our reception company barracks to find a bunk and get some sleep before the dreaded 0600 wake up call. That is when I met Rudy Peterson. Rudy and I were the 'old men' of the group, five to six years older than the 18 and 19-year-olds who made up most of the recruits. We were also college graduates while most in our ranks came straight out of high school. Rudy was married. I was well on the way to being engaged.

Rudy had been through college ROTC. I had not. The program was not offered at the University of Chicago. Rudy planned to volunteer as platoon leader when we got up the hill. He tells me I should volunteer as a squad leader. He will vouch for me. We will get privileges and a separate room. Sounds good, but I am not sure that I qualify.

First day--G.I. haircut, physical exam, dental exam, initial inoculations including Yellow Fever, Typhus, and Plague vaccines. Where are they sending us? First set of clothes issued, including fatigues that do not fit, boots that do not fit. We get measured for our dress uniform, the only thing that *will* fit. First formation in Army fatigues and boots. And then comes the big joke. "Can anybody here type?" yells the sergeant.



Recruits at Reception Company Fort Ord

At the beginning of WWII that was a serious question. If you raised your hand you were immediately assigned as a clerk in some part of the reception and intake process. At the beginning of 1942 there was no infrastructure to process the one million plus men who would come into service in the following year. There were only typewriters and lots of paper. Back

then, my father-in-law, by virtue of his typing and office skills accelerated from buck private E-1 to Staff Sergeant E-6 in two years, becoming a Chief Clerk overseeing 40 men. In 1963, however, there were plenty of clerk typists. When the unsuspecting lads raised their hands, they were called out and marched over to the post vegetable garden to shovel manure. First rule in the military, never volunteer.

We take the Army Classification Battery, fill out numerous forms, including a list with the dates of every address where we have lived, and every job held. Later in the week we do the same thing again. They are checking for consistency. The Army Security Agency will vet us in case we are later exposed to classified information. No spies allowed. We view numerous indoctrination films.

After a week, we are getting anxious to get out of the reception company and get up on the hill to begin our basic training. The odd jobs that they are having us do are silly and boring. The old wooden barracks are cold and drafty. Finally, we are issued duffle bags into which we stuff an extra pair of boots, dress shoes, fatigues, our allotment of tee shirts, underwear and socks, and our class B uniforms. The class A uniforms will be delivered in time for graduation. The trucks arrive and load us and our gear for the short trip up the hill to the new modern barracks that will become home for the next seven weeks.

Training Company Barracks Fort Ord (the Hill)

Walter Reed Army Medical Center, Washington, D.C.
4 June 1963 (4 months later)

Fairyland

I was up early. Someone directed me to the hospital cafeteria for breakfast. Not certain what was the uniform of the day, I looked around and saw options. It was June and D.C. was warming up. I chose my class B khakis with long sleeve shirt and tie. Back at Fort Sam there was a group of Mexican women who had a cottage industry tailoring the ill-fitting class B uniforms. Most of us took advantage of that service. After they applied their skills, shirts fit comfortably without

bulging at the belt line, trousers were neatly tapered and the correct length. Consequently, I felt pretty trim and ready to go.

I reported to the Enlisted Company Headquarters behind the main hospital building. The sergeant sent me straight to the Company Commander and I presented my orders.

“Your assignment is not on the main post”, he says. “You need to report to the Audiology and Speech Center at the Forest Glen Annex. There is a shuttle every 20 minutes that stops right outside.” He returns my orders to me and does not bother to look up as I salute and leave.

Now I am both confused, curious, and a bit apprehensive. Shouldn’t I just be heading over to the Neuropsychiatric Department? Isn’t that where people with my MOS work? Nevertheless, I do as I am told. I have learned that you go where the Army tells you to go, and you do what the Army tells you to do.

I tell the bus driver where I need to go and sit down for the 10-minute drive north to Forest Glen—in Maryland—no longer D.C. We cross a short railway overpass bridge on Linden Lane. The sign reads, “Walter Reed General Hospital, Forest Glen Annex”. The bus travels along a gently winding road. On the right is an irregular building that is several blocks long with numerous wings, constructed in some sort of florid Victorian style. Scattered around the main building are smaller buildings in all sorts of strange architectural styles. The bus stops several places along the way and people are let off and on.

We seem to be in some sort of fantasy or fairyland. That is not far from fact. The main building was constructed in 1887 as a hotel, "Ye Forest Inne," that was supposed to attract vacationers from D.C. and the surrounding area. The hotel failed and was repurposed as a casino. That also failed. In 1894, the land and buildings were purchased by a wealthy benefactor who turned the property into the National Park Seminary, a girl’s finishing school for his own daughter and others of her generation. In 1936 the school became a legitimate women’s college and was renamed National Park College.

The strange assortment of smaller buildings were sorority houses that aimed to reproduce various architectural styles that a “well-finished” young lady might encounter in her travels around the globe, perhaps as the wife of an ambassador or other government official.

Forest Glen Annex Main Buildings

In 1942, during World War II, the Army annexed the property under the War Powers Act and turned it into a quiet, green space for rehabilitation and recovery of wounded soldiers. That function continued through the Korean War, and into the 1960s for those returning from Viet Nam.

AASC

We are heading back out, but my stop has not been called. Just as we come to the main road, the bus turns into an expanse on the side opposite the main buildings. We drive up what looks like the driveway leading to a colonial style mansion. The land on which the original hotel had been built was in pre-Civil War days a tobacco plantation. The mansion was the plantation owner's home. Now it is the residence of the commanding general of the Army Dental Corps. There are still ruins of slave quarters elsewhere on the property.

We pass the mansion and come to what looks like an out-building behind it. The sign outside reads, "Army Audiology and Speech Center". So now I know what the AASC in my orders stands for, but the mystery is only deepening.

The building is boxy, two floors, probably stucco on wood frame and painted white. There is some sort of smaller addition on the right side at a lower level. These two structures are intersecting with something that looks like a turret or silo. Thus, the Center's nickname, "The Barn". The turret seems consistent with similar structures on the main buildings on the other side of the road.

I have no guidepost, I am wavering. The only thing I can think to do is to follow protocol. When I enter the building, I find myself in a large, waiting room-reception area. There is a desk with a receptionist, a civilian. I ask politely where I can find the NCO in charge. She looks at me a bit blankly, but says I should go down the hallway, downstairs to the Supply Section and ask for Sergeant Nunes.

There are offices on each side of the corridor. I notice in one office there is a Specialist 4 Army guy in clinic whites, and I wonder if I am in the proper uniform. Heading downstairs, there is an area to the left with sound booths and testing equipment, and then a bit further in the turret area, an electronics lab. On the right, in the addition that I noticed from outside, is the Supply Section.

There are two people present. Staff Sergeant Nunes and a warrant officer. I say good morning sir to the warrant officer and show the sergeant my orders. He tells me that I need to see the Medical Director, Captain Creston, and points back upstairs.

I am getting a bit dizzy. But by the time I am back at reception, the secretary has figured out who I probably am and what I need to do. She thinks I need to see Dr. Creston, right? Please be seated. It will just be a minute. Now I feel like I have an appointment to see a doctor, but I do not remember what for. Captain Creston is sitting at his desk. I am already getting the drift that Army medical officers are not much concerned with military courtesy and protocol, but I go through the motions anyhow.

Dr. Creston welcomes me and says that my actual supervisor, Dr. Naylor, can be found on the second floor. He is the Chief of Psychology and Speech Pathology at the Center.

Finally, we are getting somewhere! And yet, there was one more surprise to come. I climbed the stairs and found the upstairs receptionist-secretary, Mary, who politely asked me to wait while she called the 'boss'.

Rex Naylor strode out of his office with a huge smile and outstretched hand. You would have thought that I was a long-lost friend who had brought him a wonderful gift. His enthusiasm was welcoming, but bit odd. Rex was tall, slender, fortyish with balding military cut and prematurely gray hair. He was wearing a white short-sleeve shirt and tie. He was not in uniform. He was a civilian.

Basic Training, Fort Ord, Monterey County, California
February 1963 (4 months earlier)

On the Hill

Fort Ord was established in 1917 to train infantry troops for World War 1. It was originally called Camp Gigling, after the family who owned the ranch before it was ceded to the military. Gigling Road is the southern-most access to the reservation, passing through military housing and, most importantly, ungated. It was the way that we could escape during weekends without detection and without a legal weekend pass.

The name Ord was a tribute to Union Army Major General Edward Otho Cresap Ord, (1818–1883). Mainly trained as an engineer, he surveyed a good portion of Northern California during the Gold Rush era. Later he distinguished himself during the Civil War and was present at Lee's surrender. He also designed Fort Sam Houston in Texas, a place that figures elsewhere in this narrative. Ord died in Havana, Cuba of Yellow Fever. I know we are not headed for Cuba, so perhaps our inoculation against that disease was some sort of memorial tribute.

We were part of the Sixth Army. The Sixth Army saw extensive service in the South Pacific during World War II, including in New Britain, New Guinea, and the Philippines. In 1945 the Sixth Army took part in the invasion of Luzon, the Philippine's largest island. My father's LCI landed troops and supplies there, and my father-in-law served with the Sixth Army at Leyte.

In 1963, the Sixth Army's primary mission was training infantry. The training division was divided into brigades, each brigade consisting of 5 battle groups. The battle group was like the traditional battalion **(2)**. Each battle group, in turn, consisted of 5 companies plus a headquarters company. Each company would consist of 5, 45-man platoons, with each platoon consisting of 4 squads of 10 men plus a squad leader and platoon leader.

The reception company, and most of the buildings on the lower level near the highway, were WWII vintage. They were old wooden structures, drafty and leaking. Those still standing are visible from the freeway. Up on the hill, however, was an expanse of modern, three-story steel

and concrete buildings, each home to a training company consisting of 5 platoons, each platoon occupying one bay, or wing of a floor. The sixth bay was used for supply and administration.

We arrived on the hill and pulled ourselves and our gear out of the trucks and into the barracks. I learned that my squad of 11 men was the 4th squad of the 3rd Platoon, Headquarters Company, 2nd Battle Group, 1st Brigade. Our platoon drill sergeant was Staff Sergeant Lamb.

Rudy's plan worked perfectly, for Rudy. As we gathered around Sgt. Lamb in the barracks, he asked who among us had ROTC experience. There were more raised hands than available slots. Rudy was quickly picked as platoon leader, probably because of his age and physical stature. The squad leader jobs went to those with college or high school ROTC training. I had no chance. Rudy was apologetic, but he had no choice in the matter. The process was not like electing high school class officers or choosing team members for a pick-up ball game. Sgt. Lamb's decision was quick, unquestioned, and final.

Then, a week later something unexpected happened. My squad leader, Howard, a rather small and reticent fellow from Denver, decided that he could no longer take the back pressure from his squad members. They seemed resistant to following his orders and he found them threatening. Howard had enough and asked to be replaced. This was Rudy's chance to jump in with a recommendation that would make life simple for Sgt. Lamb and better for me. Thus, I found myself standing before our Company's young Executive Officer.

"Sir, Private Rosenthal reporting as ordered, sir." "Private", looking at my 201 file, "you have been recommended to take over as squad leader. I see you are a college graduate. Where did you go to college?" "Sir, I went to the University of Chicago, sir." "That's a very good school. I went to the University of Michigan." "Sir, that's a very good school also, sir." "Do you think you can do the job as squad leader" "Sir, yes sir!" "So do I. Dismissed." I salute, do a smart about face and depart.

And thus went the transaction between a private of the lowest possible enlisted rank, and a 2nd Lieutenant of the lowest possible commissioned officer rank. Each a college graduate from a major mid-Western university, each 'doing his time', and each playing his respective role perfectly.

That afternoon I moved into the squad leader's room with the three other squad leaders. Squad leaders wore a distinctive blue armband with gold corporal's stripes. Rudy's armband had sergeant's stripes. Rudy had his own room.

Company Barracks Fort Ord

Squad Leader Arm Band

Squad Leader

In Sgt. Lamb's view, the job of squad leader was to make his life easier. Always know where your squad members are. Get them where they need to be when they need to be there, and with the proper equipment. From my perspective the job was something like being a combination Boy Scout patrol leader and a camp cabin counselor. I had experience being both, so my new position seemed oddly familiar.

Corporal Conoyer, freshly minted from NCO school served as quartermaster for the company. He issued each man a cartridge belt, field pack, tent shelter-half, rain poncho, mess kit, canteen, a first aid kit, trench shovel, steel helmet with liner, and a bayonet with scabbard. A laundry bag and towel were provided, and it was possible to exchange fatigues that did not fit for those that sort of did. Much of the equipment thrown at the recruits was new to them. I could help the guys because I was familiar with most of these items and how to use them. In my era, Boy Scout troops were equipped with a lot of Army surplus gear from WWII and Korea.

Most of the men needed to learn how to wear the uniform properly, how to keep brass shining and boots clean and spit shined. Brasso and black shoe polish was available at the small PX extension on the hill. Later, there was more substantive help needed for those learning to take apart, clean, and reassemble their rifle. Many needed coaching on learning their general orders, code of conduct, and the chain of command, with all the names and memorization that those required. In that chain of command, for instance, the Commander-in-Chief is always the President of the United States. Several of my charges did not know who that was.

Being helpful when needed bought me some capital. When I gave orders, they were usually followed. The idea of having acting corporals as squad leaders, and an acting sergeant as platoon leader, all drawn from the recruit ranks, was both clever and diabolical. There was no question that recruits would obey their drill sergeant and the company officers. To do otherwise would have been insane. In fact, in an actual deployed infantry unit, various responsibilities would be conveyed by NCO's and officers to members of that unit. There could be no questioning the authority of unit members given such status and responsibility. The seeds of that understanding were being planted from the very beginning of basic training. To accept fellow recruits as suddenly having authority was preparation for the future. It was, however, difficult for some to accept. There were two members of my squad who routinely resisted.

The Pathfinder

We were on the second day of an overnight bivouac. I had Howard share a tent with me since he still had not made peace with any of the other guys in the squad and nobody wanted to bunk with him. I had Barney tent alone. That suited him. He was Native American from somewhere in the Southwest. I am calling him Barney because I cannot remember his real name. I have chosen Barney because that is a venerable family name in the Navajo nation, although I am not certain to what nation Barney belonged. Barney was not happy about being drafted into the Army and

made that clear at every opportunity. Of course, he was not alone in that. Barney needed help learning certain things and I was happy to support him. Nevertheless, he remained oppositional and sullen most of the time. I did not find that too disturbing and let things run pretty much as he wished. His starting position was usually "No", but he would come around if I stared him down.

This time the stare-down was not working. We, the entire company, were supposed to be marching back to a pick-up point for our ride back to the barracks. It was raining. We were cold, wet, tired, and hungry from two days in the field. We were carrying full field packs and our rifles, about 50 pounds altogether. Our XO, the ROTC 2nd Lieutenant from the University of Michigan was in the lead. He should have been able to read a map. Perhaps he missed that class. Somehow, he managed to make a wrong turn that he did not discover until a half hour later. Solution? Turn the column around and march back in the opposite direction to the correct turn point. One hour lost.

Barney came unglued. I had never seen him so outwardly angry and irate. He could not believe that the "imbecile lieutenant" had gotten lost and did not know where he was. It was something in his mind that could never, ever happen to him.

And of course, it could not. He lived in the vast, largely empty expanse of the Southwest desert reservation lands, home of the Navajo, Hopi, Ute, and Zuni. He was keenly attuned to the slightest, nuanced differences in terrain and color, always registering useful landmarks, like the giant rock formations that punctuate the landscape. He came from a place where the difference between knowing where you are and being lost was a matter of life and death. To take a wrong turn on a clearly marked and visible road seemed impossible to him—and unforgivable.

He refused to follow that officer one more step down the hill. He was unmovable. The column was beginning to get away from us and I knew that I had to do something fast. I was holding my rifle in port position. His was slung on his shoulder. I said, calmly, "Get down that hill now, or I will but your head with this rifle. Then we will both be in a lot of trouble." It was a hollow threat. I was not going to hit him. He probably knew that, but he now had an excuse. The stare continued for what seemed like minutes but was probably only seconds. Finally, he turned and walked down the hill.

As we marched quickly to catch-up to the column, he muttered, "I *knew* we were going the wrong way."

Ninja Warrior

Let's call him "Haole". Another name I cannot remember. He was tall, muscular, blond, White, and from the Big Island, so the adopted name fits. Haole was heavily into marital arts and made certain everyone knew it. He constantly practiced moves in the platoon bay. I know of at least one fight that he had with a like-minded combatant from another platoon. Both got marked, but the other fellow worse than Haole.

Out on the exercise field, Sgt. Lamb realized that something he needed had been left behind in the platoon bay. He instructed me to send someone for it. I picked Haole, mainly because I knew he could double time there and back quickly. Haole refused to go. Disobeying a direct order, especially when it originates with the drill sergeant, is a bad choice. Sgt. Lamb, overhearing this refusal, laid waste the young man in front of the entire platoon. In addition to the dressing down, Haole had extra PT, extra guard duty, extra KP, and was confined to barracks for the weekend.

As far as Haole was concerned, this was all my fault. “When this is over, I’m coming for you”, he tells me menacingly. Just so I do not forget, he repeats this warning about once a week. My strategy is to brush him off, and at least not appear to be afraid. I have already decided that if it comes to it, this will not be a fair fight. Mainly because I am going to pick up a chair, or some other heavy object and slam it into him.

As we approach the end of training, he is looking at me more furtively. It is the day before graduation, and we are trying on our dress uniforms. Some of the guys have never worn a tie and need help learning how to tie it. I see Haole eyeing me and I call him into the squad leader room. “What are your intentions?”, I ask. “Well, there’s always tomorrow”, he says. Then I make my mentally well-rehearsed pitch.

I tell him that if we fight, he will likely hurt me. I am not a martial arts expert (I do not mention the chair or other heavy object). I remind him that we are about to go on a ten-day leave. If his plan plays out, I may be spending my leave in the hospital, and he will be spending his in the stockade. That would be too bad. If he wants to fight, he is facing the wrong direction. He should be facing the enemy, not his comrades in arms. He is returning to Ord for advanced infantry training. He can apply to Airborne, Rangers, Special Forces, all fine opportunities to fight and kill the enemy. But he needs to make nice with his fellow soldiers. They are supposed to have each other’s backs. If he stays with his current attitude, *his* back is likely to become a target.

I help him with his tie.

The next day, after graduation and while packing to leave, Haole walks into my room with outstretched hand. “You were right”, he says. We shake hands and I tell him, “Good luck”.

After basic training, I never saw him again. I hope he made it, and avoided the hellish vortex that was Viet Nam.

Walter Reed Army Medical Center, Washington, D.C.
4 June 1963 (2 months later)

Imposter Syndrome

The people at the Center seemed exceedingly happy to see me join the staff. My predecessor, like me, had been an enlisted specialist. He was well liked and respected. He had finished his tour and was off to graduate school somewhere. He left behind an empty slot, a void. While it

was unfilled, others had to take over the tasks that he had regularly performed. That especially impacted Rex, who had to do all the psychological testing.

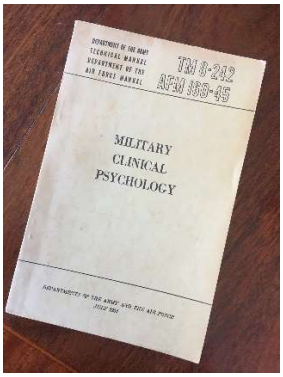
Hope skews perception. That worked to my advantage. There had been a gap and now it was filled. The staff at the Center assumed that Army would not have sent someone who could not do the assignment. Even staff members that I had little to do with seemed relieved. An empty position feels incomplete to everyone. Now the Center staff was complete. No gaps, all whole.

There was just one gnawing problem, and better that they do not know about it. I had no idea what I was doing, none whatsoever. It was not possible to go from Fort Sam directly to the Army Clinical Psychology Specialist School, a course that would have taught me what I needed for this job. Instead, I was sent to Walter Reed for 'On the Job Training'. The problem seemed to be that nobody had closely read my orders. There was no syllabus for me, no plan for my training.

My total resources were four relevant courses as an undergraduate: Psychometric Testing, Personality Theory, Abnormal Psychology, and Introductory Statistics. Never mind the year of graduate school. Nothing in that year held anything useful for my current predicament.

I had been shown my office with a desk, two chairs, shelves, and file cabinets filled with tests and evaluation instruments. Most I had never seen before, and only a few had I even read about. There was one savior. Like departing Presidents who leave a welcoming letter in the desk for the incoming incumbent, my predecessor had left behind a book--a manual, actually. Sitting on the desk was something titled, "Department of the Army Technical Manual", "Military Clinical Psychology" **(3)**.

That evening I took that manual back to my quarters and read it from cover-to-cover. As they say in the military, "Adapt and improvise".



Cast of Characters

Of the 45 people working at the Center, only five of us were military: the medical director, the supply officer and supply sergeant in the basement, the audiology tech on the main floor, and me on the second floor.

Edwin Shutts was the AASC's Assistant Director with a doctoral degree in audiology from Northwestern University. He ran the audiology and aural rehabilitation programs and oversaw the other hearing related functions of the Center. The medical director, Captain Creston, was mainly a figure head, meant to remind everyone that the Center was really an Army facility.

I cannot possibly list all the first-floor people in aural rehabilitation and audiological testing. One, Ed Muth, was to become a good friend. For some reason he adopted me. Ed was an actor in community theater, and we watched him perform on occasion in his hometown of Annapolis from where he commuted daily.

Rex Naylor was Chief of Psychology and Speech Pathology and ran the second floor. He came to the center with a Ph.D. in both disciplines from the Ohio State University. He was licensed as a clinical psychologist both in Maryland and D.C. He and I comprised the 'psychology section' of the Center.

The remaining four members of the second-floor team were all speech therapists (now called speech-language pathologists). Patricia, or Pat, was the lead member, the second in command, with a master's degree from University of the Pacific and a strong background in language disorders in both adults and children. Linda was the youngest member of the team, while Blanche was the oldest with the most experience in orofacial disorders resulting from injury or congenital disorders like cleft palate. The final and also a senior member, Mary V., was typically given the least involved cases.

The mission of the Center was to evaluate and treat speech, language, and hearing disorders in active duty, mainly Army personnel. In some instances, military dependents qualified as well. The Center's lopsided allocation of resources and staff to hearing, or audiology/aural rehabilitation services, reflected the fact that most speech and language problems in active duty soldiers were the result of traumatic injury. Those injuries were often too serious for full recovery and subsequent return to duty. After medical discharge, their treatment would be taken over by the Veteran's Administration hospitals and clinics.

The speech and language section of the Center was, in contrast to the hearing group, small and close-knit. These were the people with whom I worked every day. Surrounded by five speech pathologists, it is not surprising that they eventually wore me down and successfully recruited me into their ranks.

Basic Training, Fort Ord, Monterey County, California February-March 1963 (4 months earlier)

Training with the M1 Garand Rifle

Max (Mugs) Lorber was the director of a summer camp that I attended in the 1950's. At the beginning of WWII, Mugs inquired how the camp could help in the war effort. The War Department told him and other camp directors to institute firearms training. Specifically, to

embrace the Winchester/National Rifle Association Junior Division, .22 caliber small-bore rifle training program. In my second year at camp in 1951, at age 12 and for three years following, I was part of that program. I worked my way through the ranks, qualifying in various positions, prone, sitting, kneeling, and standing, ultimately earning my NRA Junior Division Expert rating. Later, I became a riflery instructor at that same camp.

As a Boy Scout, I tested for the Riflery merit badge. My examiner was a hunter, who had a .30 caliber rifle that he allowed me to shoot. Later, for a brief time, I owned an Enfield .303 carbine, a British WWII weapon. I fired it once under circumstances I would rather not elaborate. No living things were harmed—only a thick stack of telephone books and a door.

During college years, I owned several handguns, including a small automatic pistol and a high-powered Ruger .357 Magnum that was a Christmas present from my parents. I also shot rifle for the University of Chicago college team, the Midway Rifle Club, and scored "high man on team".

When, in the second week of basic training, the steel cable that secured the rifle rack was undone and the weapons assigned to each trainee, I was hardly a novice about firearms. I had been looking forward to training with the rifle that was featured in every WWII and Korean War movie that I had seen. The M1 Garand was a .30 caliber gas-operated semi-automatic rifle that used the same cartridge as the bolt-action 1906 Springfield rifle it replaced. The cartridges were mounted in an 8 round clip that was top loaded into the breach. After the eighth round was fired, the clip automatically ejected and the breach remained open, so that new clip could be quickly inserted. This rifle weighed 9.5 pounds.

M1 Garand Rifle with Clips

The Army has its ways, and firearms training proceeds at a deliberate pace. There is no assumption about prior experience, and a firm belief that any previous training likely was not correct. There is a strong tradition that weapons should be always aimed down range, at a target or the enemy—not in the direction of your own troops. Several things had to happen before we went to the range to shoot for the first time.

First, you had to memorize your rifle's serial number. Unlike the Marines, you did not need to name it. Second, you had to learn to quickly disassemble, clean, and reassemble your rifle, all 54 parts. This was especially important in the sandy environment of Fort Ord. Finally, you had to

demonstrate the ability to march and drill with your rifle, and how to present it for inspection. This entire process worked to reinforce that part of the rifleman's creed that says, "My rifle, without me, is useless. Without my rifle, I am useless". A true co-dependent relationship.

To access the firing ranges at Fort Ord, we marched through tunnels under Highway 1 to the west where the sand dunes converge on the beaches of Monterey Bay. These are the same beaches where practice amphibious landings took place during WWII using LCI's. The beaches are protected from the firing ranges by high berms and dunes, so that live rounds cannot reach the ocean-side. The first session was meant to instill safe range procedures and to that end, NCOs monitored each recruit in a firing position. The first rounds fired were to make sure the rifle was functioning properly, and to adjust the rear sight. The practice targets were at 100 meters, virtually impossible to miss—a great confidence boost for those who had never shot before.

There is a guy in the platoon who is not doing well. He is a bit effeminate, clumsy at marching and drill, and hopeless at calisthenics. Cannot do one pull-up or push-up. On the rifle range, his first time ever shooting a firearm, he turns out to be a crack shot. Never misses. That revelation apparently pushes him over the edge he was teetering on. We return from a class one afternoon to find him and all his gear gone. His bunk is stripped, and the mattress folded up. All Sgt. Lamb will say is, "He's been sent home." We know better than to ask anything else.

M1 Garand Rifle Disassembled

Over the ensuing weeks, each trip to the ranges leads to greater challenges, longer distances, and smaller targets, culminating in human size torso silhouettes at 300 meters, a bit more than three football fields distant. Qualification shooting for record comes in week seven, a separate 200-meter range with bullseye targets. To graduate from basic training, each man must qualify with a minimum score of 23 out of 40. It is almost impossible to not pass. Those who miss are brought back until they make the grade. I was not concerned about qualifying. I wanted very much to make the higher score of 36 out of 40 required to qualify as Expert Marksman. I was successful. Following qualification, we were given familiarity firing with the M14 that was later used in Viet

Nam but replaced rather quickly with the M16. After that, I never fired another weapon while in the Army. In fact, except for amusement park concessions, I have not fired any firearm since.

NIC At Night

(Columbia, S.C.) Dec. 5, 2003 – "Eighteen-year-old Joseph Jurewic was shot in the chest during a live-fire training drill on the Night Infiltration Course. A memorial service is scheduled for Friday at Fort Jackson for the private who died Tuesday after being wounded during the training exercise Monday night. The noon memorial service will be closed to the public and the media. The Army says Jurewic is the first soldier to die during training at the Night Infiltration Course since it opened at Fort Jackson 20 years ago."

There is much mythology about the NIC, probably because a succession of drill sergeants has spun tales of recruits in previous cycles being killed or wounded because they panicked and stood up while under fire. I have researched this carefully, and except for the tragic lead-in to this section, I could find no other such accounts. Probably the drill instructors are simply trying to make the experience more 'meaningful' by adding to the perceived danger.

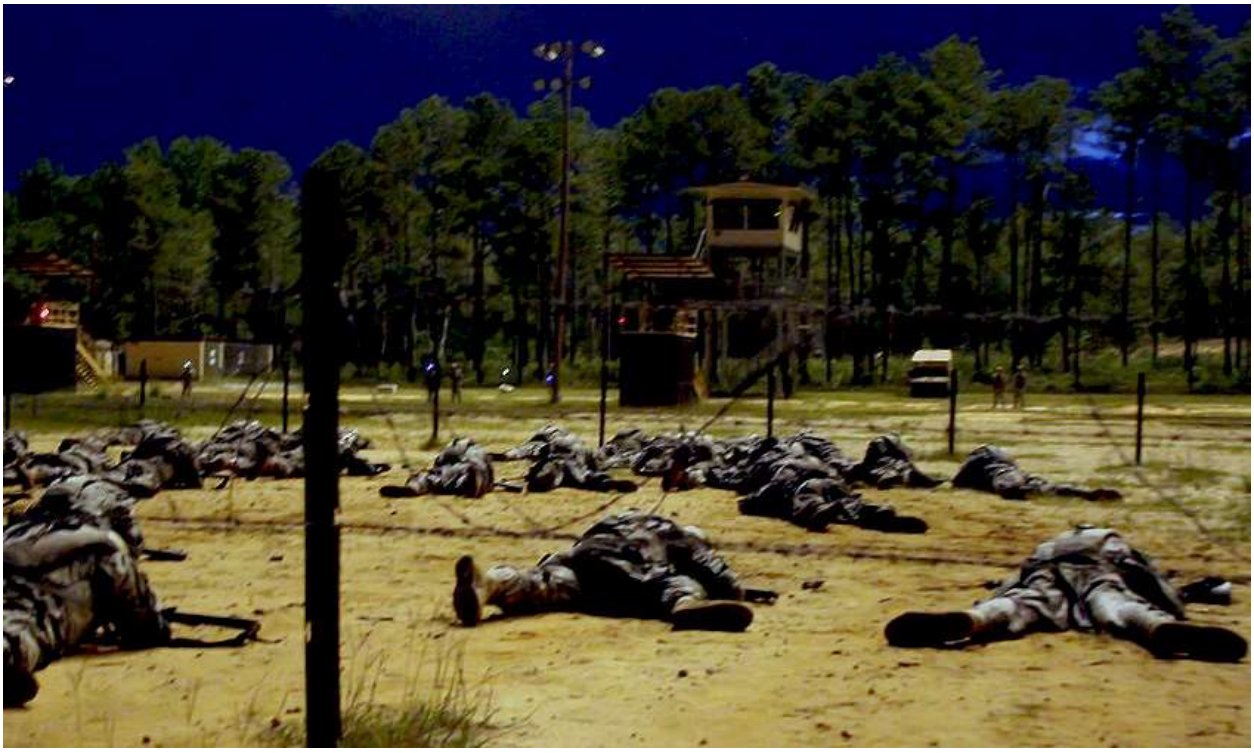
Here is the scene. It is night, but brightly lit to simulate overhead flares. The terrain is muddy or sandy, or both. Even better if it is raining. The course is 100 meters, about the length of a football field. It is covered overhead by barbed wire. There are demolitions exploding periodically along the course. Machine gun bullets are screaming overhead. You can tell that it is live fire because every fourth round is a tracer, and clearly visible.

The likelihood of being shot on the infiltration course by that .30 caliber M60 machine gun is close to zero. The gun is mounted high and the barrel is locked between two parallel steel bars that allow it to move from side-to-side, but not up or down. The barrel is fixed at a height of about 8 feet, so even if someone stood up the rounds would pass harmlessly over their head.

Although it matters not to Private Jurewic, or to his grieving and justifiably angry family, for the record, he did not panic, and he did not stand up. What happened is that the gun jammed. The operator removed the gun from its restraints to clear it. Lowering the muzzle to shoulder height, the slide unjammed, slipped forward, and accidentally discharged the round in the chamber. Private Jurewic was struck in the chest while on the ground, exactly where he was supposed to be.

The major danger, and it is small, is from the concussive force of the demolition explosions. There is no shrapnel, but the explosive force can cause a concussion and temporary disorientation. During my time at Walter Reed, we had one fellow who showed up with a partial hearing loss and stuttering-like speech. He said that this was the result of demolitions that went off too close to him during training. In retrospect, I believe that he may have been correct. The speech problem could have resulted from mild concussive brain injury or PTSD. That connection has been documented in recent years.

For the first 50 meters we scooted along on our backs with our rifles lengthwise on our bodies. The rifle serves to protect you from the barbed wire above. During the last 50 meters, we turned over on our stomachs and crawled low to the ground with our rifles cradled in our arms. Throughout, explosions are going off left and right, and bullets are flying overhead. All the while, the course instructor is yelling, “Keep down, keep moving, keep down, keep moving!” At the end, we and our rifles were wet and dirty. A hot shower, a change of clothes, and with our rifles broken down, cleaned, and reassembled, everything was fine. Most of the guys felt up-beat about the experience--a great confidence builder.



Night Infiltration Course (NIC)

Getting Exercised

It is said that the Army always trains soldiers for the last war. That seemed to be the case for us. Most field exercises seemed reminiscent of the Korean War and anticipating a similar conflict in the future. One field exercise in particular comes to mind. The platoon was tasked with defending a hill, a high point, over-night. We were told that enemy troops would try to infiltrate our lines. Flares were launched periodically to illuminate the landscape and the infiltrators. From across the canyon, loud music and bugle calls blasted throughout the night. A woman’s voice, accented in some non-descript Asian dialect, warned us that we were all doomed and would die that night for no purpose. The last part was certainly correct. We actually thought that some other unit might have been tasked as the infiltrators, but nobody ever came and none of our platoon died.

Nevertheless, we learned about defending a sector as a squad, and setting up fields of fire for which each individual was responsible. This skill was transferred to another exercise in which two squads leap frogged each other while assaulting an objective. As one squad moved forward, the squad behind provided covering fire. This was a live fire exercise but using blank cartridges. There is no point in somebody being accidentally shot in the back during basic training.

We get to toss one hand grenade. It is an overhand toss, more like a cricket pitch than a throw from third base to first. We stand in a pit. The pit is for protection. If someone drops their grenade, they jump out of the pit. The grenade stays in the pit and presumably does no harm. That happens occasionally when someone is startled by the spring-loaded handle popping off or just because they are clumsy. Nobody in our platoon drops their grenade. They all get tossed and they all explode.

M26 Grenade

Chemical, Biological, Radiological (CBR) is a line item in the basic training manual. Since World War 1, where mustard and chlorine gas attacks were devastating, gas masks have been standard issue to the military. We pile into a detached building where the instructor shows us how to correctly wear the device so that there is no leakage around the edges. Then he ignites a tear gas canister and the room fills with fumes. There is no effect on us at all. At his instruction, we remove our masks and immediately begin coughing, sputtering, with burning and watery eyes. After 30 seconds we are allowed to exit the building. The message is clear. The gas mask works.

Gas Mask Training

But wait! The next instructor cautions us that the gas mask is useless against nerve agents because they enter through the exposed skin. Here the only protection is a tiny ampule of

Atropine Sulfate Ampule

atropine that must be quickly injected into your arm or leg through your uniform. If you are still alive, he recommends injecting a second ampule. Atropine will be included in personal first aid kits of any soldiers deployed to a combat zone. Meanwhile, he breaks open an ampule to reveal the integral injection needle attached. “Anybody want to volunteer to try it?”, he asks. Nobody raises their hand.

The “R” of CBR is absurd. We are supposed to learn how to deal with the battlefield use of tactical nuclear weapons. If the opposition hurls a tactical nuclear weapon at us, there is nothing for us to do. No training is necessary. We will be dead, dying, or incapacitated. Digging a traditional foxhole is useless. Perhaps if one could dig down 50 feet and pour a steel reinforced concrete bunker, all in 10 minutes, we might survive. Might as well stand up straight and be vaporized.

The exercise here, however, is to teach us how to behave in case *we* fire the tactical nuclear weapon at the enemy. This is a simulation. About a half mile away, a pit filled with gasoline is ignited. This sends a fireball and plume of smoke skyward. Because the gasoline does not make a blast noise, but just goes “whoosh”, at the same time a large explosion is set off. That sound will reach us later. We are told to stay low behind a protective barrier and close our eyes. Still, we can feel the heat from the gasoline. After the blast comes, we are to climb out and advance on the enemy objective as the ‘nuclear plume’ climbs skyward. That is the second absurdity. The enemy is dead, dying, or incapacitated. All we will do is further expose ourselves to deadly radiation. That is probably why tactical nukes have never been used on a real battlefield. Neither side can win in such an exchange.

Simulated Tactical Nuclear Weapon

We have no direct training in counterinsurgency tactics or urban warfare. Instead we sit for a film that tells about the excellent work being done by Special Forces in Viet Nam. How they are winning the hearts and minds of villagers by bringing education and medical care to the people and protecting them from the evil, insurgent Viet Cong. Of course, what they do not tell us is that when the Special Forces leave the village, the Viet Cong return and punish or kill all who

cooperated with the Americans. There is a sign-up sheet for those of us interested in Special Forces. They will be "in touch" as we work our way through advanced infantry training, airborne training, and Ranger school. Two or three people sign the list.

DI Forever

Nobody ever forgets their drill instructor. You may not remember much about basic training, like names, faces, places, and events, but you will always remember your DI. Like a high school football or soccer coach, everybody thinks that theirs was the best.

I cannot speak for the Marine Corps, or Navy boot camp, but in the Army, DIs did not especially conform to the depictions in story or film. At least Sgt. Lamb did not. He was neither brutal nor sadistic in his approach to the men. He did not yell or harangue. He rarely raised his voice, except on the exercise field or while marching, places where he needed to be heard. If he wanted something done, he simply informed. The sergeant was tall, lanky, athletic, and African American, as were most of the drill instructors at Ord. His height alone was imposing. He towered over everybody in the platoon.

Recruits were not berated. There was no point. Draftees were locked in for two years. What possibly could one do to make things worse? Men were dressed down for not following orders, not keeping their gear in shape, not wearing the uniform properly, not learning their General Orders or Chain of Command, or failing some other training task. The only thing that he could effectively threaten was extra duty or having to repeat basic training all over again—the recycle threat.

Sergeant Lamb had a favorite expression, always spoken in a calm, measured voice.

"Lawdy, lawdy. I do believe I am losing my mind! Private Maggio, is it possible that you do not know how to make a bed properly? I think it must be so, because I look at your bed, and it is not made properly." Bed is thrown to the floor. "Squad Leader Rosenthal, teach this man how to make a proper bed!" The bed must me made so tightly that a quarter bounces on the blanket when dropped from a one-foot height.

"Yes, Sergeant Lamb."

"Lawdy, lawdy. I do believe I am losing my mind!! Private Jerome. Is it possible that you do not know how to shine your boots? Can you not look down and see that your boots are not shined? I know that I can look down at your boots and I know that they are not shined because I cannot see myself looking back at myself! Squad Leader Rosenthal, teach this man to shine his boots properly." Boots must be spit shined to look like patent leather.

"Yes, Sergeant Lamb."

"Lawdy. I do believe I am losing my mind!" Only one 'lawdy' this time. "Listen up everybody. Today Private Winger here set the new record time for disassembling and reassembling an M1 rifle, a record previously held by private Kilroy in World War Two." This is all nonsense, of

course, but amusing because of the ambiguity. We do not know if the record time was the shortest or the longest. Most likely the latter.

To someone complaining about anything, “Private. You got a pen and paper?” “Yes, sergeant.” “Well, you better write your momma a letter.”

Much of the responsibility of running the platoon was delegated to the acting platoon leader and squad leaders. It was our job to keep the latrine and showers spotless. To sweep and buff the platoon bay linoleum floor until it glistened. To make sure our squad members made a proper bed, wore the uniform correctly, had their brass and boots shined, and their lockers and footlockers squared away. If we failed inspection, it would fall on the squad leaders’ shoulders.

Staff Sergeant Lamb was career military. Just a guy doing the job he was assigned and trained for. One night I was assigned CQ duty with the sergeant. He was having girlfriend problems and spent a good amount of time that evening on the phone. We talked a bit, mostly about sports and women and places we had been. It was a lot of small talk. We were not going to become best friends overnight. He, like the Army itself, was forever. I was just passing through. There had been a thousand like me before, and there would be a thousand after.

Interjected throughout the various field and training exercises was intense physical conditioning that included jumping jacks, squat thrusts, pull-ups, sit-ups, and push-ups. There was constant marching and close order drill that increased coordination and promoted group cohesion. Most all this activity was led by Sgt. Lamb, who schooled us in the obligatory marching cadences, Jody calls, and songs. The most famous of which is the “Duckworth Chant”.

“Sound-off; 1 - 2; Sound-off; 3 - 4; Cadence count; 1 - 2 - 3 - 4; 1 - 2 — 3 - 4.”

I emerged from basic strong and in good condition, but not the best I had ever been. That was training and conditioning for high school football.

Knife Fight

There is a story that General George Patton once said that what he feared most was the image a bullet coming straight at his nose. For me, the most fearsome thing was the idea of being stabbed with a knife or bayonet. I would have preferred the bullet.

M1 Bayonet and Scabbard

Bayonet training was not fun for me. Not only did I not like the idea of being on the receiving end of a bayonet, I viewed with horror the possibility of plunging one into another human being.

So, it was a clearly diabolical scheme that had Sgt. Lamb assign me and my squad to perform the bayonet demonstration at the fourth week Open House for friends and family.

The drill would go something like this. The squad would line up with rifles at the side and bayonets sheathed. I would say, “Squad, fix bayonets.” The squad would in unison attach their bayonets to their rifles. “En garde”, I would say. They raise their rifles waist high pointing forward. Then just before the lunge, I shout, “What is the spirit of the bayonet?” To which the squad shouts in response, “To kill!” We repeat this exchange three times. On the third iteration, the squad lunges at an invisible target.

Bayonet Drill

My parents have come to this affair, as well as Ann. Ann is a pacifist. The idea was for the four of us to have a nice dinner in Carmel or Monterey. Open house comes with a weekend pass for me. It is my first opportunity to see the extraordinarily beautiful area that surrounds the sand pit of Fort Ord. After this performance I am not at all certain that Ann will allow this plan to happen. It does, however, and I am forever grateful.

Epidemic

“Hello?”
“Mrs. Rosenthal?”
“Yes?”
“This is the Fort Ord Army Hospital calling to let you know that your son is in the hospital.”

Yes, that’s my Mom answering the dreaded call. By now my parents had completed the sale of the hotel in Seattle and had moved back to San Francisco. When I filled out my personnel forms, I listed them as my next of kin. Then, where it said in case of emergency contact next of kin, I checked the box.

“He has German measles, but he is fine. He should be released in a few days.” Oh, not so bad after all.

It was in all the newspapers. There was an outbreak of meningococcal meningitis at the army base. Meningococcal meningitis began to occur in outbreak proportions during 1962 at Fort Ord. This incidence increased until basic training was stopped at the post late in 1964. Most of the

cases were among basic trainees in the first eight weeks of training. For ten days, at each meal, we were given gigantic sulfonamide tablets as protection against the disease. But about half of the men who became ill had a sulfadiazine resistant strain.

That morning in week five, I woke up to find a rash staring back at me in the mirror. I was quite certain that I knew what it was. Rubella, or German measles, was another frequent disease among recruits. A quick consult with Sgt. Lamb and the Company C.O., and I was on my way to sick call. From there, without hesitation, I was sent to the measles ward in the hospital. Yes, there was a whole ward just for that disease.

I did not feel sick and had only a slight fever. My serious concern was that in week six we would begin physical qualification testing, as well as marksmanship qualification. If I missed those I would have to recycle and start training over again, from the beginning. That prospect was horrifying. Luckily, my fever and rash disappeared on day three. Twenty-four hours later I was allowed to return to my unit.

I had missed one of the physical tests, the mile run. Sgt. Lamb arranged for me to take it with another platoon. I had missed a couple of instructional films but was able to see them in a make-up session. Otherwise, I was up to date. Disaster averted!

Last Day

The Army Band played. Our company along with four other companies in our cycle, one thousand men strong, marched onto the parade ground. Dressed in our well-fitted Class A uniforms we passed in review before our commanding general, senior officers, friends, and family. Our basic training was over. We were soldiers. Earlier Sgt. Lamb had gathered the men around him to announce that our platoon had achieved the highest qualification score in the Company for that cycle. This could do no harm to the sergeant's career, not to mention bragging rights.

Ann had driven down to pick me up. Likewise, Eileen had come for Rudy. The four of us convoyed up to San Francisco, where we checked into a previously reconnoitered motor hotel on Lombard Street for several days of rest and relaxation.

Later that first evening we all went for a celebratory dinner. There was still one more story to tell, and Rudy wanted to tell it. He had the rank, so I deferred to him. He explained that just before we went to the parade ground, Sgt. Lamb called us, Rudy and the four squad leaders, into his room. There he thanked us for a job well done and presented each of us with a gift.

Together, Rudy and I reached into our pockets and took out identical cigarette lighters and handed them to Ann and Eileen. On one side of the lighter it said FORT ORD, CALIFORNIA with the Sixth Army unit insignia. On the reverse side there was an engraved inscription that read, "TOP PLATOON, HQ CO 2D BG, 1ST BRIGADE."

San Francisco, California
1 April 1963

Moving On

The history of the military draft goes back to the Selective Service Act of 1940 and is too complicated to recount here. It persisted, however, with fits and starts until 1973 when the draft was ended by President Nixon in hopes of quelling opposition to the war in Viet Nam.

This was the status in 1963. The Selective Service Act had been reauthorized as the Universal Military Training and Service Act. All males age 18 to 26 were required to register for the draft and undergo training. There was a six-year service obligation, with varying lengths of active duty. If you were a college student or a graduate student, you could receive a deferment. Some sought to stay in school until age 26 in order to avoid service altogether. For most that was neither a practical nor successful strategy.

The Air Force, Navy, Marines, and Coast Guard were all volunteer services with quotas that greatly limited those who could enlist. Only the Army participated in the draft. Still there were options.

If you could find a National Guard or Reserve unit that accepted you, there was a 6- month active duty training period, after which you were returned to your Guard or Reserve unit for the remaining 5 ½ years. Those units met for training once a month and for several weeks of summer camp. That seemed like a safe choice in 1963. The downside was that if your unit were activated during your six-year obligation, you would have to go with them. In fact, beginning in 1968, some Reserve and Guard units were activated as the war in Viet Nam expanded.

If drafted into the Army, the active duty obligation was two years, followed by four years of Inactive Reserve. For those enlisting, the active duty time was three years, followed by three years of Inactive Reserve. By choice, you could join an Active Reserve unit, but that was not required.

We said goodbye to Rudy and Eileen in San Francisco. Rudy was headed for his advanced training. As a draftee he had the remainder of his two years of active duty ahead. I do not remember where he went or how that time was spent. During our years in D.C., and sometime after Rudy was discharged, we visited him and Eileen at their home on the East Coast. We stayed in touch until we moved back to California.

My voluntary enlistment came with the ability to choose either the type of advanced training or the location of my first post. I had chosen Medical Corps, so my next task was to get to the site of that training. Whatever happened after that, Ann and I were determined to link up as soon as circumstances would permit.

Medical Corps Training, Fort Sam Houston, San Antonio, Texas
6 April 1963

South by Southwest

My orders were to report to Fort Sam Houston, San Antonio, Texas. Commercial air travel was authorized. San Antonio is southwest of San Francisco, in south-central Texas. I arrived on the evening of Saturday 6 April and immediately reported to the base. There I was assigned to a barracks and given a training class number. The course would begin on Monday the 8th.

Today San Antonio is the second largest city in Texas, with a metro population of over 2.5 million. Roughly 250,000 are veterans and 80,000 are active duty military assigned to Joint Base San Antonio, which includes Fort Sam Houston, Brooke Army Medical Center, Randolph and Lackland Air Force bases, and Sixth Army Headquarters.

In 1963 the population was just over 680,000 and each of those joint base units were independent. The city has always been a military town.

Moving into the barracks, I discovered a much different tone than basic training. No double bunks, all singles. There was no NCO in charge. This was a training class, not an infantry platoon. I saw everyone in civilian clothing and learned that uniforms were not required off duty. Everyone who had already arrived seemed welcoming and friendly. People were dribbling in over the weekend.

The Passover Caper

I am moving in, making my bunk, and getting my gear organized. There is a group of about a half dozen guys talking with each other. From their accents I can tell they are from New York or New Jersey. They seem to know each other but keep glancing over at me. Finally, one of them comes over and says, “Hi. My name’s Ed.” “Hi, my name is Bill”, I reply. We shake hands. “Bill”, says Ed, “my friends and I are wondering, are you a *landsman*?” Okay. This is Yiddish code for, ‘Are you a countryman, a fellow *Jew*?’ I glance down at the name tag on my uniform, then look up at him and reply, “Good guess.” We both laugh.

The guys have arrived from Fort Dix in New Jersey where they have completed their basic training. Some are six-month National Guard, some two-year draftees. Together they have figured out how to work the system. Passover begins Monday night. They have obtained the use of a separate kitchen on the post where they, and other Jewish G.I.s can have Seder and kosher meals for the week.

There is no rabbi on post, but we can use the base chapel for Saturday morning sabbath services that we conduct ourselves. We do not have to show up for Saturday morning formation and fatigue detail. That means our whole weekend is free because Sunday is an off day for everyone.

I am amazed that they have managed to arrange all this. They have been on post only two days before my arrival. Ed is the ringleader. I decide that although I have been lapsed since high school, I will be Jewish for the next eight weeks. These are my new *landsmen* and we hang together. We are the mini minyan.

I do not remember all the names of the guys in the mini minyan. I do remember, however, one face very clearly. He was actor-comedian Zero Mostel’s nephew. He looked exactly like his uncle. You can never forget a face like that

Zero Mostel

Bedpans and Bandages

There is no drill sergeant looking over our shoulders. We are expected to keep our barracks clean and neat. I do not remember ever having a formal inspection. We are in school, attending classes and learning field procedures. The sword over our heads was that if we do not perform, if we do not pass the exams, we will be washed out and sent back to an infantry unit somewhere.

We are in a crash course to learn anatomy, physiology, organ systems, diseases, common injuries, and their treatment. The course is intended to prepare us for both duty as hospital

corpsmen and as field medics. The former requires nursing skills like changing bed linens with someone in the bed, dispensing medication, giving injections, starting IV lines, taking vital signs, and record keeping.

The latter, the field component, is essentially emergency medical care for broken bones, bullet and shrapnel wounds, and concussions—in short, all the battlefield injuries one might expect to encounter in combat. In combat, CPR is typically not done. Otherwise, the procedure is straight-forward; stop the bleeding, maintain the airway, reduce pain, prevent shock, protect the wound, transport.

One of the outcomes of the training is paramedic certification. This must be completed at the first duty station, mine at Walter Reed in September of 1963.


Department of the Army

Certificate of Training

This is to certify that

has successfully completed

Given at Walter Reed Army Medical Center Washington 12, D. C.

1 September 1963

Paramedic Certificate

Each week there is a schedule of classes on the topics mentioned above, followed at the end of the week by exams on the latest material that has been presented. Scores are posted so that each of us can see how we were progressing. Those who are doing better coach and tutor those who are not doing so well.

The difference between basic training and medical corps training was obvious. Basic training for me had been like intensified Boy Scouts and summer camp, more or less fun and definitely frivolous. I had been learning things that I was quite certain I would never repeat in 'real life'. At Fort Sam, I was thrust into a setting where I was learning competencies that had practical application, perhaps even life saving implications. And what was more gratifying was that I enjoyed learning this new material and mastering these new skills. None of the instructors needed to hammer home the fact that someday others might be depending on us to help them, perhaps even to save their lives.

Bad News Bearer

The second week, the personnel specialists came calling. Each of us had individual appointments with one of the clerks. The idea was to verify our preferences for our first duty station and type of posting. Much of this work was already pre-determined. Many in our group knew exactly where they were going. They were Guard or Reserve unit trainees. They would do their final two months of active duty somewhere near home and as part of their unit.

We had several lawyers in our class, drafted straight out of law school after graduation. None of us could understand why the Army decided to make them medics. To a man they wanted posting as a clerk for some attorney in the Judge Advocate Corps. There were many more law school graduates than law clerk slots, so that was never going to happen. They were being encouraged to request a geographical placement instead. The choices seemed to be Germany, South Korea, or perhaps Japan.

My personnel clerk was a college draftee Specialist 4, just doing his time. He knew exactly what I wanted and what I had assumed was inevitable. He said, "You want to go to Clinical Psych Specialist school, right?" "Yes", I reply. "Well, sorry, but that can't happen. You can only get to that school by applying from your first duty station." I am looking anxious and upset. "I will try", he says, "to find you an OJT slot, but I don't know if it is possible". OJT, on the job training. That would be good I think, but as he says, not likely. "Thanks, I appreciate that".

For now, I must put this setback out of my mind and concentrate on getting through my current training. Still, I am wondering how did my old friend Phil get it so wrong?

Ciudad Acuña, Coahuila, Mexico
May 1963

Rosa's Cantina

The goat tacos were tasty.

Ed and the guys want to go to Mexico. The East Coasters have not been before. We have weekend passes. To be clear, the passes do not permit travel outside the U.S. Still, everybody

ignores that prohibition. We must choose where to go. Nuevo Laredo has a bad reputation. G.I.s have reportedly been targeted by gang members, and some came back bloody. The alternative is Ciudad Acuña, just across the border from Del Rio, Texas. It has a better reputation. Others at Fort Sam who have been there praise it mightily.

We all pitch in and rent a car. The car, also, is not supposed to go to Mexico, but nobody in Southwest Texas pays attention to that. The guys think that my previous experience in Mexico, Tijuana and Ensenada, and my high-school Spanish is supposed to be an asset. That, of course, is a joke but they are depending on me.

A three hour drive due West and we are soon strolling through the market at Acuña in late afternoon, sampling the food from street vendors. The guys stop at a taco stand manned by an old fellow who is busily frying tortillas and slicing meat off a hanging roasted carcass. The aroma is wonderful. They are convinced that this is lamb. They are into lamb tacos. I am certain there is no chance that this is lamb. You do not get lamb tacos from a street vendor.

Me, "¿Son esos tacos de cordera o cabra? Esos son tacos de cabra, ¿no?"

The old man, grinning, "Si".

I let them think they are eating lamb tacos.

As it is getting dark, we drive to "boys' town" and park in a dirt lot near a cantina. A young kid about 7 or 8 years old comes over and offers to watch our car for two dollars. The guys hesitate. I tell them we should pay the kid, or we will come back to four flat tires. We pay.

Inside the cantina is a huge covered outdoor patio with live music and of course a bar. There are many tables and we select ours. The place is already jammed, mostly with G.I.s and college kids. Ciudad Acuña is a magnet for the military bases in that part of Texas, and there are many. I caution beer in bottles only. You can get turista from ice cubes and the liquor is watered down anyway. In seconds there is a girl for every lap. They are shilling for drinks. They chatter away with each other in rapid Spanish. They are happy to show us the back rooms if we wish. Not sure why, but I am thinking of Marty Robbins 1959 song, "El Paso"; "…Nighttime would find me at Rosa's Cantina, Music would play and Felina would whirl."

After about an hour, everyone is satisfied in their own way and it is time to head home. Our driver wants to take back some rum which is really cheap down here. I tell him Customs will find it at the border. He is convinced that he can hide it in the spare tire wheel-well. I say, how are five shave heads returning from Mexico not going to get searched at the border?

When we get to the border crossing, the customs agent has us pop the trunk. He goes directly to the spare tire wheel-well like it had been radioed ahead. Out comes the bottle of Bacardi. Thanks, the guy says happily! Haven't had this in a while.

We share the fine and head back to base.

In the light of day everyone is enthusiastic about the adventure. Couldn't have been better! Thank goodness Rosenthal was along. Could not have done it without him.

What? Nope. Not going to mention the goat tacos.

Fort Sam Houston, San Antonio, Texas
May 1963

Leisure Town

The love affair between Texas and the military is mutual. Most of the military installations cluster around San Antonio and Corpus Christi. There is strong community support and many volunteer and auxiliary organizations strive to make life welcoming to military members, veterans, and their families.

Private, not public dollars funded a sizable portion of the recreational activities and facilities on and around military bases. We spent much of our time in the luxury of a 24-lane bowling alley on post, complete with snack bar and beer. The fact that it was air-conditioned made it a magnet. I have never bowled well, but regular games at the alleys resulted in my best scores ever, coming close to 200 on a couple of occasions.

If you come to San Antonio, a visit to the Alamo is mandatory. It is also a bit disappointing. All that remains of the once huge fortification is the chapel façade and associated museum. Still, the walk along the river with its lush parks and cooling breezes is a delight.

The Alamo

At one time the USO had three locations in the San Antonio area. We spent one evening at the downtown center where we had been invited to a social and dance. I was surprised to find it being run by someone that I knew. Joe Behar had been a publicity front man for the chain of motor hotels that included the one in Seattle that my parents had owned and operated during the 1960 World's Fair.

I had schemed with Joe to audition and select a young woman as “Miss Imperial 400”, who would represent the hotel chain in the Seattle area. Her prize for winning the contest was an all-expense paid trip to Hollywood. I was tagged as her escort. In Hollywood she was scheduled for an appearance on the popular daytime television show, “Queen for a Day”. As we sat in the audience, the show’s host asked her to stand up and be introduced as Miss Imperial 400, all to riotous applause. That was my introduction to product placement and free advertising. This appearance was followed by a tour of Hollywood, dinner at The House of Prime Rib, and the view along Mulholland Drive. I then delivered her back safely to her motel.

Joe and his wife ran a tight ship at the USO club. Lots of attractive young woman volunteers came to serve snacks and soft drinks, and to dance with the G.I.s. This event, like my escort gig in Hollywood, was closely chaperoned. When I think of that evening, I definitely do not think of “Rosa’s Cantina”.

On base much of my evening time, when it had cooled off, was spent reading. I read every Ian Fleming James Bond novel then in print. I also read Joseph Heller’s “Catch 22”, a cautionary tale for those bound to the military for any length of time. In many ways it was my bible.

Roundup and Routing

Every summer in San Antonio, including Fort Sam, there is a Rattlesnake Roundup. The idea is to capture as many snakes as possible. A few may be harvested for the questionable meat, but most are simply transported to an area devoid of human habitation and out of harm’s way. Fewer encounters between rattlesnakes and humans makes the world a better place.

The roundup that I am speaking of, however, is somewhat different. This is the herding of all the members of our class around the bulletin board. It is the end of the seventh week, and we are to have our orders posted. There is nervous milling around and enormous tension.

A guy from personnel comes around, and instead of posting the orders--that will come later--he is going to call us out by name and hand us our orders. Obviously, that makes sense. We need these copies of orders to show to the transportation unit, our next duty station, etc.

As people are being called there are groans mixed with shouts of joy. Joy for Germany, groans for South Korea.

My name is called, and I am handed my orders. Typically, multiple orders are printed on the same page. If many people are going to the same place, the order sending them is preceded by a list of their names. I have some difficulty finding mine, mainly because it is all alone in its very own space. It reads:

ROSENTHAL, WILLIAM S PVT (E-1) RA 19 760 091 Rpt Enl Co WRGH (MD 3401.01) Walter Reed Army Med Ctr., Washington DC OJT MOS 914.1 AASC WRGH. NLT 3 JUN 1963. Air TVL Appr.

The heavens have opened, and it is raining unimaginable joy. That guy from personnel has come through for me. I am going to Walter Reed Army Medical Center in Washington, D.C. Better

yet, I am going for OJT as a Clinical Psychology Specialist! I do not know what the AASC preceding WRGH means. But WRGH means Walter Reed General Hospital. I must be there by Monday 3 June. I will be flying. Air travel is authorized.

I run for the pay phone to call Ann and tell her where we are headed.

Walter Reed Army Medical Center, Washington, D.C.
6 June 1963

Convergence

While I was figuring out what "fairyland" had to do with the Army, and how I was going to adapt to my improbable job, Ann was somewhere in the middle of the country. When she learned where I had been assigned and where we were going to live, she began packing. That meant stuffing as much as possible into my 1960 Volkswagen bug and driving it across country from Berkeley, California to Washington, D.C.

When Ann arrived, she got set up with a weekly rate in a small hotel in Silver Spring, Maryland, just up the road from the Walter Reed main campus. We could not afford that for long. I was struggling to stay afloat in a new job for which I was qualified only by virtue of breath and heartbeat. Therefore, 99% of the job of getting settled and planning for a wedding was in her hands. She also needed desperately to find a job. She did a marvelous job on all counts.

Before I could get married and move off post, I needed permission from the Enlisted Company commanding officer. When I appeared before him, he began by asking questions that were designed by the Army to prevent young, naïve soldiers from being taken advantage of by wicked women. Suddenly, he stopped. He realized that he and I were about the same age, and he had a wedding band on his hand. After the pause he said, "Well, congratulations. Come back tomorrow and pick up your off-post pass. Be sure to give the sergeant your address."

The apartment Ann found was just a few blocks south of the main campus at 6645 Georgia Avenue, N.W. It was a tiny one bedroom with combined living and dining area, but the price was right. Our budget was tight. Our combined income for the last six months of 1963 was about $400 a month. Both of us had saved a little money and we counted on family generosity to help us get started.

6645 Georgia Avenue, N.W.-- Note Cemetery to Right

We had a second-floor walk-up. The first-floor apartment immediately to the right on entering the building, one that we passed more than once a day, belonged to Gabe Lapidus. Gabe was the only tenant that we got to know well. He was a hoarder. His small apartment was stacked from floor to ceiling with newspapers. There were years and years of the New York Times and Washington Post. When Gabe figured out that our politics aligned, he became quite chatty. We always had our discussions outside or in the hallway. We never went into Gabe's apartment, nor he ours. Gabe did not believe in bathing.

Our building was next door to the smallest National Cemetery in the country, "Battleground National Cemetery Park". It is the one-acre Civil War burial site for the fallen at the battle of Fort Stevens and was possibly dedicated by Abraham Lincoln himself. There is a ceremony there each July 4th and Memorial Day. We attended some.

We had to furnish this apartment and equip the kitchen. One evening, after work, we drove to a huge Post Exchange (PX) commissary complex in northern Virginia. It was the size of a Costco or Walmart. They had everything we needed at rock bottom prices and delivery was free. Still, we could not make a dining room table and chairs fit within the budget. We chose instead, a sturdy redwood picnic table with two benches.

One night, sometime later, we were awakened by plaster falling from the ceiling in the bedroom onto the bed. It was too late to get the manager to do anything. We moved the mattress into the living room and slept under the picnic table just in case the rest of the ceiling decided to collapse.

We needed to put together a wedding. My parents were coming from California, and my grandmother from Richmond, Virginia. Ann found out that in Maryland there was no waiting period, but the ceremony had to be conducted by an ordained minister. She found a Unitarian minister, Fred Cappuccino, who would do the deed. He and his wife, Bonnie, had a huge multi-racial and multi-national adopted family in addition to their own children. The children had never seen their father actually perform a marriage ceremony. On Wednesday evening, June 19, 1963 we had the wedding at their house and the children were invited. When we left, they threw Uncle Ben's Minute Rice at us. The temptation to view that as an omen is natural, but the fact is that we stayed married for 13 years and produced two wonderful sons.

Wedding day, with my parents and grandmother, Mae Elliott Lindeman

Rather quickly, Ann found a job with an educational research outfit, developing reading programs for developmentally delayed children. That job, along with my Army pay and allowances made it possible to live a comfortable but frugal life.

Going Pro

Rex got me started with simple steps. All patients coming into the Center were administered a psychological test that was supposed to measure adjustment along five scales or areas: *emotional, health, family, social,* and *work* **(4)**. This was done twice weekly when new arrivals reported to the Center. My job was to administer the scale, score it, and then present the results in weekly clinical rounds.

Administering and scoring was not difficult. I had read that manual left behind by my predecessor and understood the principles of standardized testing and scoring procedures. What I did not know how to do was to present or interpret the results. Rex seemed to want me to figure this out on my own. I was expected to participate in weekly clinical rounds.

It went something like this. All the department heads, and anyone with something to report would sit around the periphery of Dr. Creston's office. He presided. The patient's name and reason for being at the Center would be announced. Then, each member of the team would report the results of their testing. When it came my turn, I would read off the scores for each area of the adjustment scale, noting if any were in the 'abnormal' range. People would nod, and then we would move on to the next reporter.

At first, I thought that everyone was absorbing my information, filing it in their mental file cabinet and using it to fill out a more complete picture of the person we were staffing. It was several months before I began to sense that they had no more idea than I what to do with these scores. They neither explained or predicted problems that arose during a patient's evaluation and treatment.

Sometimes 'problem patients' would be sent upstairs for me to do additional psychological testing. Again, these procedures seemed to me to have no practical merit in resolving whatever issues were interfering with the patient's progress. It did, however, give me an opportunity to learn many more tests and evaluation procedures, and eventually to develop and hone my counseling skills **(5)**.

When I left Chicago for the last time, I had packed all my belongings and stored them with friends who lived on the North Side. I had been careful to label each box of books by subject. Shortly after we had moved into our apartment, I asked Burt and Michelle to send me the boxes marked 'psychology books'. When those finally arrived and populated the shelves in my office, I began to feel like I was turning pro.

Back to School

Pat Turner held a weekly diagnostic clinic, assessing the speech and language of young children who were military dependents. The clinic was held on Fridays, with one child evaluated in the morning and one in the afternoon. If the outcome indicated a need for treatment or follow up, the family was referred to a resource close to their home.

These were children who might simply have a delay in the development of certain speech sounds that could be adequately treated by a school speech therapist. Others might have more involved problems with overall delayed language and cognitive development. Those children needed more extensive testing. Pat wanted me to take over some of that function **(6)**.

Pat thought, however, that I needed further understanding of speech and language development before I could do a proper job of administering tests and evaluating these children. She thought it would be a great idea for me to take one or two introductory courses in speech and language disorders at George Washington University.

The GW campus is in downtown D.C., about six blocks west of the White House. I found myself one evening searching for a parking place to make it in time for an appointment with the chair of the speech and hearing program. Calvin Pettit was old school, smartly dressed in suit and bow tie. He was happy to meet me, interested in what I was doing at AASC. It would be a good idea, he thought, for me to take his introductory course beginning the next semester in January.

Thus, began my seduction. The Army would pay 75% of my tuition since the course was work related. Most GW courses were held in the evening to accommodate the hordes of students who were government workers. It was impossible to pass up the opportunity. Ironically, I had joined the Army in part to get far away from academic life. Now barely a year later I was back to school.

Faking It

Why, you may wonder is the Army so interested in hearing loss? The problem of noise-induced hearing loss within the Army became acute during World War II when thousands of soldiers returned home with significant hearing impairments caused by weapons fire, explosives, artillery, and loud machinery.

During the years between World War I and World War II wearable electronic hearing aids were introduced commercially. The focus of hearing treatment shifted from exclusively lipreading and auditory training, to include amplification.

Aural rehabilitation centers were established and operated by the Army to provide services to these soldiers. The first was located at Walter Reed General Hospital established in the spring of 1943. In September 1946, following the conclusion of World War II, the Army consolidated its hearing programs into one major center, the Army Audiology and Speech Center (AASC). For the next 32 years, “The Barn” at the Forest Glen Annex was the home of the AASC. Besides those of us on the second floor, the Barn contained the Audiology Testing section, the Aural Rehabilitation and Hearing Aid Repair Sections, Earmold Laboratory, Electroacoustics Section, and Bioacoustics Laboratory.

The audiology staff was generous in teaching me about hearing testing. There was a reason for that. Regularly, patients who came for testing did not produce reliable results or exaggerated the degree of their hearing loss. To illustrate the problem, they asked me to pretend to have a loss in

one of my ears. They then showed me how they could determine that I was ‘faking’. One of the tests involved something like a ‘lie detector’ test, where accurate but involuntary hearing levels could be determined.

There were generally two kinds of problem cases. One was typically a younger active duty soldier who was trying to get out of the service. This sort of malingering was frowned upon and not treated sympathetically.

The second type of problem was less understandable. These were soldiers who failed their retirement or discharge physical due to a hearing loss. Additional evaluation was required at the Center to determine the extent of loss, because that could influence financial compensation and eligibility for VA benefits. Inconsistent test results held up the person’s exit from service, something that seemed counterintuitive.

Both sorts of cases found their way to my second-floor office. My job was to help motivate the subjects to cooperate. Hearing thresholds obtained by involuntary procedures posed serious medico-legal issues. Voluntary results were preferable. Each of these types of problem cases required a slightly different approach that hinged mainly on addressing some worry or concern.

In the case of the younger subjects, it might be a problem with a wife or girlfriend, other family problems, conflicts with co-workers or the commanding officer, or some other dissatisfaction. The symbolism of ‘not hearing’ is obvious and from a practical standpoint an effective way of escaping a difficult or unpleasant situation.

The solution was two-fold. First, explain to the person why there was no hope in fooling the people downstairs. Second, a frontal attack on the real problem that was causing grief. Many times, this worked.

For the older group, the main issue seemed to be fear of the unknown and a lack of planning. Many men retiring from service were only in their late 40’s or early 50’s, with no idea about how they were going to spend the rest of their lives. Vocational testing and counseling were the main solutions. I could get the testing done at the main campus, and then have the results sent to me to interpret for them. With options for a job and plans for the necessary training or schooling, most of the men felt relieved and reassured. Accurate hearing test results usually followed.

23 November 1963

Bad Behavior and Bad News

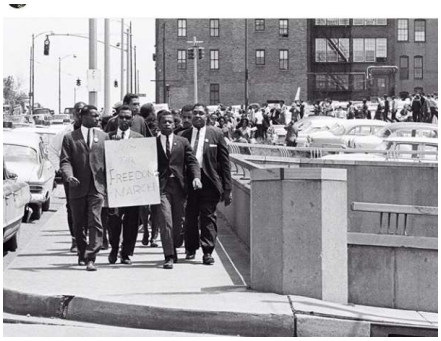
For Rex, the centerpiece of the second-floor operation was the stuttering treatment program. Rex, himself, was a person who stuttered **(7).** He had been mentored by two of the most respected and leading authorities on the disorder, John Black and Charles Van Riper. His program closely followed their approaches.

Eight to ten active duty men and women (mainly men) came to the Center for eight weeks of intensive therapy. They had to request the program and be recommended by their commanding officer. Although they were sent on temporary duty, they were treated as patients and billeted at the Forest Glen Annex.

Each received daily individual therapy from Rex, Pat, Blanche, or Linda. Rex led twice daily group sessions. During off hours and on weekends the patients completed assignments that were aimed at solidifying the techniques learned in treatment. At the time, this intensive residential program was unique in the military, although other centers emulated it later. It would be many months before I was allowed entrance to the inner sanctum of this program.

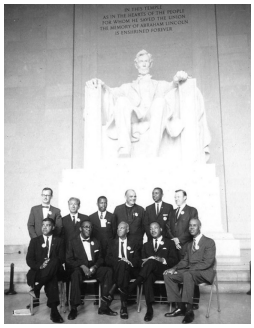
It was November and we had been in Washington, D.C. for only five months. Still, one could feel the pulse of the Nation and it was becoming increasingly intense and agitated.

The March on Washington for Jobs and Freedom had taken place earlier, on August 28, 1963. It was a call for civil and economic rights and an end to racism in the United States. Over 250,000 people came to hear Martin Luther King, Jr.'s "I Have a Dream" speech in front of the Lincoln Memorial. In the South, John Lewis and SNCC marched for freedom in Atlanta, Selma, and Nashville.



John Lewis in Nashville, second from right. (Photo by Danny Lyon.)

The March on Washington



Speakers at the March. MLK, first row (Photos National Geographic)

Flash forward to November, and the date is the 23rd. Rex and I have an appointment to meet with Israel Goldiamond, a well-known behavioral psychologist. His Institute for Behavioral Research has its offices and laboratory just outside the Forest Glen Annex, close enough for him to walk over. Goldiamond's appointment with us is for 2pm.

At 1:30pm, the word comes across the wire that President Kennedy has been shot in Dallas.

Goldiamond comes anyway. Goldiamond is one of the most influential proponents of behavior analysis and modification. He is convinced that stuttering behavior can be modified and eliminated out of existence. He wants to recruit members of the stuttering treatment program for research that he is doing. He has permission from the 'authorities' at the Medical Center to approach us, but we are not obligated to agree.

This sort of bravado did not sit well with Rex who believed, as did most experts in the field, that stuttering is modifiable but not curable. Goldiamond's approach was completely antithetical to the AASC program. At the Center patients were encouraged not to suppress their stuttering, since that very effort leads to increased tension and more severe symptoms. The goal was to get back to the core stuttering behaviors and then modify them using various voluntary techniques, not to suppress them as was the aim of the behavioral approach advocated by Goldiamond.

At 2:33pm the stunning announcement comes that John Fitzgerald Kennedy, 35th President of the United States is dead.

Still, Goldiamond will not leave. He is intent on getting permission to use our patients as his subjects.

When we finally get him out the door, we can do no more work that day. Everyone at the Center heads home. It is a Friday and it will be a long, sad, and dreadful weekend.

Searching

The unpleasantness of Goldiamond's visit went beyond his apparent disregard for the horrendous events of the day. We had dismissed his request to use our patients in his research and Goldiamond moved on to find subjects elsewhere. But the encounter had fanned a smoldering ember in Rex's psyche. There was no objective proof that the program at the Center worked. Goldiamond's behavioral approach seemed to guarantee rapid results that could be measured and counted. It was worrisome that no such evidence supported the immediate or longer-term effectiveness of our program that Rex was convinced was better.

Out of our discussions about this problem was hatched a plan to conduct a study of the program's effectiveness. When approved by the Medical Center we would not only evaluate the status of participants before and after treatment, but we would also bring them back to the clinic after six months to see if changes had persisted.

I will not belabor the details of the project other than to say that in the end the results were mainly positive. What is more interesting from the present vantage point, however, was the limited technology at that time. We needed to make visual and sound recordings of each participant under standardized conditions at three separate times, before and after treatment, and at follow-up. These recordings had to be easily accessible so that Rex, Pat, Linda, and Blanche could view them and apply rating scales to each subject.

In 1963, video tape recording was relatively new and used cameras and recorders that were expensive and not mobile. Typically, only broadcast and production facilities had such machines. The television studio at the Walter Reed main campus was one such resource. That is where the recordings were made.

In what now seems like an insane maneuver, the video recordings were then transferred to 16mm film. It was those film reels that came to the Center and were used in the rating and evaluation

process. We needed good playback equipment and the Army procured for us a top line 16mm sound projector for viewing the recordings.

I took on an additional role, that of research assistant. My job was to collect and collate the various test measures and ratings. I was the keeper of the data. Ultimately, I would do the data analysis. Remember that I had only an introductory course in statistics, so we kept the analysis fairly simple.

The dozens of calculations would have been tedious. Main-frame computers were still run on vacuum tubes and were certainly not available to us. There were no electronic calculators with built-in statistical functions. Everything had to be done by hand. There was one savior. It was called the Friden SRQ rotary calculator, the first mechanical calculator able to extract square roots, a maneuver necessary for statistical calculations. You can think of it as a souped-up adding machine. I said to Rex, we need to get one of these. The order went down to the supply section. Several months later, the machine arrived. Thank you Sergeant Nunes.

Friden SRQ Calculator

I got my own corner of the research project. A recurring problem that we heard from patients in the stuttering program was the difficulty they had encountered getting accepted into the military. Recruiters had no consistent policy. Some decided out of hand that people who stuttered could not function in the Army. Others seemed to ignore the problem, or perhaps on the day of the interview the potential recruit had his stuttering under control and was welcomed into the fold.

I decided to evaluate the adjustment and effectiveness of stutterers in military service. Ambitious? Not really. I kept it simple. I compared our patients' jobs and disciplinary actions with the overall Army statistics. To get those numbers for the Army as a whole, I had to talk to the data keepers at the Pentagon. In still another oddity of military life, my call to the various offices in the Pentagon would begin, as was proper, with some specialist or sergeant. Then almost always I found myself transferred to a Colonel or General. They were always friendly and helpful. "Good morning General. Private Rosenthal here. Do you have a moment sir?"

In the end, there was no evidence that soldiers who stuttered performed any differently than those who did not. In fact, commanding officers referred soldiers to our program expressly because they deemed them valuable to their units and they wanted them returned in better shape.

Number of U.S. Troops in Viet Nam November 1963-16,300 *Rank* 

1964

Good Conduct

There is a code in the military. There are rules: rules of rank, rules of discipline, rules of order. We all knew them and took them in stride. One rule is that officers are not permitted to fraternize with enlisted members. That prohibition is often misunderstood and just as often ignored. For example, it does not prohibit routine social interactions between officers and enlisted, especially if they knew each other prior to service. The only expectation is that military 'good order and discipline' not be violated.

I had two encounters that were potentially awkward but only one turned out that way. We were doing our weekly shopping for food at the Walter Reed PX, choosing which packages of ground beef would be the protein for the week's recipes. I noticed an officer behind the counter, evidently supervising. He looked familiar. I waited until he turned so that I could see his name tag. Then I was sure.

"Lieutenant.", I called. "Yes?" "Aren't you Tex Blair?". "Yes". "I'm Bill Rosenthal from Nebagamon." I avoided using the word "camp", but if anyone had overheard us, they likely would have assumed that I was referring to some obscure military post, not a boy's summer camp in Wisconsin. Tex flashed an expression of recognition, and then looked uncomfortable. We exchanged a few pleasantries but made no plans to get together. It seemed strange and strained. We were not merely casual acquaintances. Although never cabinmates, we had gone on canoe trips together and worked on similar projects, like riflery. Also, Tex was from Memphis, Tennessee, and good friends with the family of my junior-high girlfriend. We had many friends and experiences in common. Perhaps he was uneasy with the rank disparity. Or perhaps he found his own position awkward. Being a commissary officer was not the most enviable assignment. Afterward I saw him occasionally when we were shopping, I did not make any further attempt to engage with him.

Then there was the case of Lieutenant Harold Wise. Harold was a high school classmate, friend, and temple youth group compatriot. When he found out that I was assigned in D.C. he was ecstatic. He wanted to get together, and we did. He was assigned as a financial officer for an Army unit in northern Virginia. I could never figure out why rank disparity was an issue in one friendship, but not the other. Harold came to our apartment for dinner and we joined him at a restaurant on another occasion. Aside from Steve Westheimer, who was doing his Coast Guard stint, Tex and Harold were the only two people on active military duty that I ran into who I had known previously in civilian life.

There were several other reminders of discipline and order. The medical center and research institute was home for many overly qualified enlisted personnel, some with advanced degrees. They were working in the wards, clinics, labs, often overseeing research projects. They comprised the Walter Reed Enlisted Company.

There was the usual Army company structure with a company commander, NCOs, and clerks. There was little for them to do other than routine personnel actions. During my time at Walter

Reed, a new enlisted company commanding officer arrived. He was evidently astounded, indeed offended that there was not a regular morning formation and roll call, and that nobody could put their finger on every soldier's whereabouts on the post instantaneously. He soon realized that daily formations were not going to be possible. Too much push back came from doctors and scientists who thought that their enlisted personnel should be on the wards or in the labs, not standing at attention somewhere listening to the orders of the day.

The formation decayed quickly to a weekly drill, then monthly, and then never. The CO had sadly come to realize that for some transgression that he could not explain, he had been relegated to the armpit of military decorum, discipline, and protocol. On this post doctors, who are officers, routinely crossed the street to avoid having to return the salutes of enlisted personnel.

We had "Saturday Morning Detail". This rotated in such a way that it came up once every month to six weeks. We showed up in fatigues on a Saturday morning and raked leaves, policed the campus to clean up litter, etc. We were home by Noon.

When I was promoted to Specialist 5, the grade equivalent of Sergeant, I no longer could be called for fatigue duty. Instead, I had to function as overnight Charge of Quarters at Forest Glen. Mainly, the CQ is on call for emergencies that might endanger the facility, such as fire, theft, medical emergency, explosion, insurrection, civil unrest, or foreign invasion. For that reason, the rules are that the CQ must carry a side-arm. I wore an Army issue Colt .45 automatic. However, there was no clip and no ammunition issued with this weapon. I did this duty twice. Fortunately, there was no foreign invasion on my watch.

Army Colt .45 Automatic with Clip

Unless deployed most members of the military lead relatively normal lives, especially if they are married and living off post. Like many other uniformed employees, police, fire, EMT's, postal workers, UPS drivers, they put on the uniform in the morning and head for work. At the end of their shift they return home, change out of that uniform, and get on with other activities. Playing with the kids, coaching little league or soccer, having the neighbors over for a back-yard barbecue.

So it was for me. And better yet, when I went to work my colleagues were civilian, not military. There were no officers or NCOs looking over my shoulder.

At the end of it all, for my service, I received the Good Conduct Medal for nothing more than doing my job and following the principles described above, 'good order and discipline'.

The Good Life

Washington, D.C. is a magnet. If you sit on the steps of the Lincoln Memorial and wait patiently, almost everyone you know will eventually walk by. We had a constant parade of visitors, friends from high school, from college, and of course family. We learned of places to show folks that were off the usual tourist route. In that way, we learned much more about the District and surrounding area than we might have otherwise. Places off the mall, like Rock Creek Park, the National Zoo, Blair House, the Naval Observatory, Embassy Row, and of course Forest Glen.

We had several friends from earlier in our lives who had also found their way to D.C. for school or for work. Getting together with them was part of the routine.

In 1964, Ann started a new job as a research assistant at Brookings Institution, often described as a 'liberal think tank'. She worked for Rashi Fein, a Harvard trained economist who was instrumental in the development of U.S. health policy and in the forefront of the development of Medicare. She also worked for Alice Rivlin, an expert on the U.S. federal budget and macroeconomic policy. Later, in 1975, Rivlin became the first director of the newly established Congressional Budget Office (CBO).

Ann's work with these two economic super stars sparked an interest in social policy that later led to her completing her Ph.D. from Stanford in Medical Anthropology, and her interest in medical policy and access for Native Americans.

Ann's job at Brookings, combined with my promotion to Specialist 5 in May of 1965 helped our financial situation. We had climbed to a hefty income level of $7773 per year! That may seem meager by current standards, but it allowed us to attend National Symphony concerts and Arena Stage theater productions, as well as follow other cultural interests.

We travelled on weekends. To Annapolis, where Ed Muth from the Center was appearing in community theater productions. To Cape May, New Jersey to see Steve Westheimer who was doing his active duty time at the U.S. Coast Guard Training Center. To visit Rudy and Eileen elsewhere in New Jersey.

My cousin Nikki, Ann's college friend Francie Fried, and Ed Wolf, my best friend from high school, all lived in New York City. We could leave early, around 8am and be there in time for lunch. A museum visit, an early dinner with a friend or family member, and we could be home around mid-night.

My grandmother Mae Elliott Lindeman lived with my mother's family in Richmond, Virginia. That, also, was an easy trip, especially to celebrate with all the family my grandmother's 85th birthday in 1964.

We even had a family wedding when my cousin Betsy Lindeman married Bob Flint with a ceremony and reception in downtown D.C. Betsy had traveled the world as a child with her parents and brothers, but northern Virginia was home base.

The people with whom we worked also became friends who generously included us in social events, holidays, and other special occasions. In short, we were living a good life with little reminder of the military other than the uniform that I wore to work each day.

Scrubbing In

Captain, later Major James E. Creston, M.D. is currently an otolaryngologist in San Ramon, California. In 1963 he, like most of us, was just doing his time in the military as a medical resident assigned to Walter Reed Army Medical Center. As part of his duty he was tagged to be the medical director of AASC. What Jim Creston really wanted to do, however, was to practice otolaryngology and do surgery.

Dr. Creston thought that the people on the second floor, who regularly did rehabilitation therapy with patients who had their cancerous larynx removed, should have an opportunity to observe the surgery that left people without a voice.

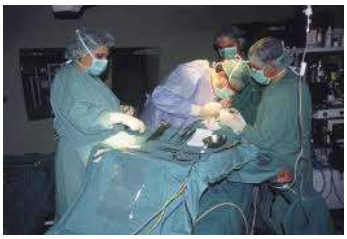
My turn came sometime in late 1964. I arrived at the main hospital OR floor, changed into scrubs, washed, and was masked, gowned, and gloved. Not that I was going to dip my fingers into the poor fellow's neck. Dr. Creston just wanted me to be able to get in close and see everything without breaking the sterile field.

The main campus of the medical center sat on 110 acres. The original hospital building of Georgian architectural design was completed in 1909. Over the next two decades the main hospital building was expanded with symmetrical wings to the north, east, and west. At some point the top floor of the main building was converted to a suite of operating rooms that extended the length of the main building. There were rooms on each side of the central corridor that had a slightly sloping floor and a central gutter running its length. Presumably at some time past, the rooms were cleaned by hosing them down and the blood and detritus sent scuttling down the gutter and into a sewer system.

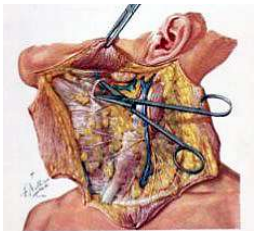
The operating room that we were in had a window! Most did, I think. These were permanently sealed, but it was still possible to look out onto the grounds and road below. Despite these anachronistic oddities, the equipment in the OR was all up to date and the room had been refinished to maintain a sterile environment.

The surgical procedure for the day was a total laryngectomy and radical neck dissection. The hard structure that you can feel in your throat is the larynx (voice box) and is made of cartilage. If the tumor stays inside that natural boundary, then only the larynx needs to come out. If, as in this case, the tumor escaped the cartilage boundary, the lymph nodes in the neck must be investigated and usually removed. Those are the bumps you can feel under your lower jaw. The surgery began at 8am and went on until 4pm. It was extremely tedious. The nodes must be carefully dissected out until there are no more tumor cells found. At each stage, a sample had to be sent down to pathology to check whether sufficient margins had been reached. The job was

made more difficult because the man had radiation treatment before surgery, and the radiation destroyed some structures that are used as landmarks along the way.



Operating Room (OR)



What It Looked Like

There were two surgeons, two assistants, two surgical nurses and the anesthesiologist. The team members rotated taking snack and bathroom breaks throughout the day. I took a break as well. Six weeks later, the patient showed up at the Center to receive training from Blanche in esophageal speech.

In 1964 the Surgeon General declared that after an extensive review, a select committee had concluded that smoking was a cause of lung and laryngeal cancer in men, a probable cause of lung cancer in women, and the most important cause of chronic bronchitis.

I had walked to the hospital from our apartment just a few blocks away. I was happy to be able to walk home, breathe fresh air, and have one of my last cigarettes. When I described what I had observed that day, Ann and I agreed to stop smoking.

Stabilized

Rex was worried that I might get ripped away from him before we had completed the research project. Army assignments were typically one year. After that the Army could reassign you wherever they wanted. Needless to say, I was not keen on going anywhere either.

We had a new secretary, Dorothy Hedrick. Dotty came from a military family. Her husband had received a temporary battlefield commission during the Korean War and rose to the rank of Captain. After the war, there was a massive reduction in force made necessary by Congressional budget cuts for the military. Men with war-time promotions were reduced back to their permanent ranks. In Dottie's husband's case, he was reduced back (riffed) to Master Sergeant. Subsequently, he was promoted to Command Sergeant Major, as far as you can go in the NCO enlisted ranks.

Sergeant Major Hedrick was now retired. One could argue that retiring at the top of the enlisted food chain was better than being a retired junior officer. No prestige there. Hedrick, however, felt that the Army had treated him unfairly. Also, along the way he had learned just about every short-cut, trick, and devious procedure that could be used to circumvent the bureaucracy.

Retired Sergeant Major Hedrick proposed a great solution to the nagging problem. Request a 'stabilization of assignment' for Rosenthal claiming that his continued assignment was critical for the completion of the research project that was underway. In any event, Hedrick explained, while the request was in process my jacket would be pulled by personnel and I could not be sent anywhere. Rex put through the paperwork. Several months later, in the spring of 1964 I was stabilized. I was set in place for at least a year.

Number of U.S. Troops in Viet Nam November 1964-23,300 *Rank* 

September 1965

The Big Event

Early 1965 seemed like the perfect opportunity to expand our own family. The military comes with free medical and dental care that includes immediate family members. Pre-natal care, delivery, pediatric care was all included. Ann had a job that would grant paid maternity leave. Rex had declared my on-the-job-training completed and confirmed that I was qualified for the MOS in Clinical Psychology. As a result, I had been promoted to Specialist 4 in October 1964 with an increase in pay. My stabilization of assignment meant that I would not be transferred for the foreseeable future. Everything appeared aligned.

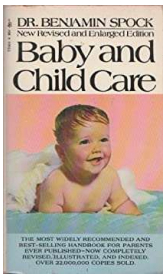
The health services at Walter Reed were generally quite good. For example, when I was ten years old, I fell and broke a front tooth. At age 16, a permanent crown was put in place, but I had nothing but trouble with it. It regularly came off and needed to be re-cemented. When it happened in D.C., I went to the Walter Reed dental clinic. The fellow who treated me claimed that my underlying tooth had not been properly prepared. He reshaped it, ordered a new crown which he returned because he did not like the color or fit. When he was finally satisfied, he cemented the new crown in place where it remained without incident for the next 20 years.

I mention this anecdote as an example of the diligent care provided by the medical center. That same level of care would have been available for Ann's pregnancy and delivery. There was one problem. The hospital did not provide for the way we wanted this experience to unfold. We were hoping for 'natural child-birth', me being present during the delivery, and rooming-in. Walter Reed could support none of these goals.

With help from the family and digging into savings, we decided to go private. It was a good decision that resulted in a wonderful experience, especially the opportunity for me to be present for Steve's birth, something that I later repeated with Dave and John. Stephen James Rosenthal was born at the Washington Hospital Center on 18 September 1965, at about 1am.

Steve's first year was spent in a series of small spaces. At the hospital, his nursery bassinet was in a drawer contraption that could be opened in Ann's room so that she could retrieve him at will. Back at Georgia Avenue, there was a small alcove in the living room, just large enough for

a small Porta-Crib. When we left D.C. and headed for California, Steve rode in the small luggage space behind the back seat of our Volkswagen bug.



Armed with “Baby and Child Care” by Benjamin Spock, we fumbled our way through the first year like all new parents.

Number of U.S. Troops in Viet Nam April 1965-51,000 *Rank*

A Gathering Storm

Washington, D.C. is the political heartbeat of the Nation. Living there one feels that pulse. That was particularly evident in two arenas, civil rights, and the growing war in Viet Nam.

The civil rights movement that began in the early 1960’s intensified steadily, with civil actions in the South and highlighted by Martin Luther King Jr.’s 1963 speech on the steps of the Lincoln Memorial just shortly after we arrived in the city.

The assassination of President John F. Kennedy in November 1963 stunned the nation. When Lyndon Johnson, formerly a senator from Texas, succeeded Kennedy he was expected to turn the country in a more conservative direction. To the surprise of most and the chagrin of the Southern states, he embraced the civil rights movement in the South and set out to encode civil rights and voting rights into law.

The viciousness of the South’s response to the movement is well documented, including the burning of Black churches, the beating and lynching of voting rights activists, and the kidnapping and execution of three young civil rights workers in Mississippi in June 1964**(8)**.

Against this backdrop the growing military action in Viet Nam was drawing increased attention and alarm from anti-war activists. The March Against the Vietnam War was held in Washington, D.C. on 17 April 1965, sponsored by the student activist group Students for a Democratic Society (SDS). It was co-sponsored by the Women's Strike for Peace. 25,000 attended, including Joan Baez and Judy Collins. The host was I. F. Stone, who opened the event with the greeting: "Welcome to Washington."

March Poster

SDS Pin

Rally with Joan Baez

President Johnson had hoped that a relentless air war against targets in North Viet Nam would force Ho Chi Min to negotiate a cease fire and settlement of the conflict. His hopes were dashed when regular army troops from North Viet Nam entered the South.

Johnson became persuaded by his advisors that only a strong military response could force a compromise. In a stunning move, on 28 July 1965 Johnson ordered the entire 1st Cavalry Division (Airmobile) to South Viet Nam, increasing the troop presence there by 125,000. It was the first full U.S. Army division deployed to Vietnam. The division consisted of nine battalions of airmobile infantry, an air reconnaissance squadron, and six battalions of artillery. The division also included the 11th Aviation Group, made up of three aviation battalions consisting of 11 companies of assault helicopters, assault support helicopters, and gunships.

In what would become one of many such actions, on 27 November 1965 the National Committee for a SANE Nuclear Policy sponsored an anti-war March on Washington. Dr. Benjamin Spock, the author of our 'how to' baby book was the co-sponsor. There were 20,000 demonstrators. Steve's stroller made the front-page photo of the Washington Post the next day. His parents were obscured by an American flag in the foreground.

The July announcement by Johnson could have turned out badly for me. It was becoming increasingly evident that combat medics would be more in demand that psychology specialists. By 28 July 1965 I had less than six months of active duty remaining. Under normal circumstances I could not be deployed overseas with less than six months remaining. Only if a state of emergency were declared would all enlistments be extended and my chances of being sent to Southeast Asia increased. Johnson did not declare an emergency, greatly limiting the flexibility of the military response in Viet Nam. Without such a declaration, Reserve and Guard units could not be activated and enlistments could not be extended.

I was safe for the time being.

Number of U.S. Troops in Viet Nam September 1965-184,300

Winding Up

The AASC was the only designated hearing and speech center within the Army from 1946 until 1966. Some other Army hospitals had audiometric equipment to perform hearing testing and staff that consisted of a few commissioned and noncommissioned individuals with training in audiology. However, unlike psychologists, who had been part of the officer corps since World War II, there was no officer military occupational specialty for audiologists, despite widespread recognition that hearing loss was a major problem among active-duty soldiers.

The Army Audiology Officer Military Occupational Specialty was created in 1966 as a result of the coordinated efforts of staff of the AASC. Roy K. Sedge was the first Army Audiologist commissioned. He became the first non-MD director of AASC, a position he held for many years. We walked the halls of the Center together briefly, because by then I was on my way out.

There has never been an officer or enlisted MOS for speech-language pathologists. Those ranks in military settings are still filled by civilian employees.

As 1965 ended I was leaving active service. With a month of accumulated leave, I separated just before Christmas, just in time for us to fly to San Francisco for the holidays and introduce Steve to the family. I had committed to complete a master's degree in speech pathology and audiology. Encouraged by my professors at GW, I was now on the hunt for a place to go for doctoral studies. Ann and I agreed that the University of Iowa or University of Denver would at least move us in the correct direction-West. But there was also Stanford.

While on the visit to California we went to tour the Stanford doctoral program that was in the Medical School. Hayes Newby, a pre-eminent audiologist was the head of the program. His persuasive and determined recruiting effort convinced us that Stanford was the place to go. Also, it got us back to where we wanted to be--California.

By then I had patient assignments in the clinic at GW. As we were returning to Washington after the New Year, where I would begin my final semester, we diverted to Detroit. Washington National, we were told, was snowed in. I was panicked that I would miss my clinic assignment and called my supervisor, Joan Regnell, to tell her that I could not make it. She laughed, "Are you kidding? I can't even open my back door!"

A day later when we arrived, I twice had to help push the taxi when it got stuck in the snow. When we arrived at our apartment, our car had disappeared, buried in snow drifts created by the ploughs cruising up and down Georgia Avenue. When the snow melted, we found the car had been ticketed for blocking a "snow emergency route". Washington thinks of itself as a southern town and is ill prepared to deal with a blizzard. We also learned what it was like to travel with an infant.

I needed to complete a research thesis. Rex was generous in allowing me to use subjects from the stuttering program to do a simple attitudinal study **(9)**. My cousin Betsy Lindeman Flint, who was working as a secretary agreed to type my thesis. Our research project at the Center was ongoing, and I continued to help with data analysis and writing on my own time. We did not

complete the final reports until 1968, when I had been at Stanford for nearly two years **(10)**. The delay was in part due to the difficulty in getting subjects returned to the Center for the follow-up portion of the study. Many were being deployed to Viet Nam. Some had already left the service. By then Rex had moved on to become head of the speech pathology program at the National Naval Medical Center at Bethesda, Maryland, a suburb of D.C. and 11 miles from Walter Reed.

The final hurdle for the master's degree was passing a foreign language exam. That requirement had slipped my awareness completely. I had a year of French reading at Chicago and decided that if I crammed, I could possibly pass the exam. It was a large exam room, with sealed booklets handed out and one hour to translate the material. As people began opening their booklets, there were audible groans. Of course, there were several languages being tested and I could only hope the groans were not for French. When I opened my exam booklet I nearly screamed in delight. I immediately recognized the passage. It was taken verbatim from one of my psychology texts from Chicago that evidently had a French edition.

In June we traveled to Richmond to say goodbye to my grandmother and the Virginia family. We were about to head out. On our return to D.C. we drove by the GW campus where the Commencement ceremonies were ongoing. We stopped for a moment and I watched myself graduate 'in absentia'.

Number of U.S. Troops in Viet Nam June 1966-385,300

Washington, D.C. to Stanford University, California
July-August 1966

Road Trip

We bought a new car for the trip to California. The 1960 VW was traded in for a 1966 version, complete with after factory air-conditioning. That was a concession to the fact that we would be traveling through the East and mid-West during the hottest months of the year—and with a baby on board.

1966 Volkswagen

The plan was as simple as it was ambitious. We would leave D.C. in early July and drive for six weeks, stopping to see relatives and friends along the way. We stayed at Best Western hotels and motels, a consortium of privately-owned properties that shared a common reservation system. At

each stop, the motel would phone ahead our reservation for the next night. They were family friendly, always with cribs available and handy restaurants nearby.

Our plan was to reach San Francisco by mid-August, spend some time with family and then move into married student housing at Stanford before the term began.

Steve would ride in the luggage space behind the back seat, comfy with his favorite blanket, stuffed toy, and pacifier. Other luggage would go in the back seat and under the front boot.

Our first stop was New York City and Ann's friend, Francie Fried. The air-conditioned car proved its worth as we drove into the worst heat wave on the East Coast in decades. The temperature in the city was 110 degrees, and one could literally fry and egg on the sidewalk. We stayed in Francie's family's sprawling apartment on Central Park West. Francie's father, Walter, was a noted Broadway producer and manager whose credits included "Life with Father", still the longest running non-musical Broadway show in history. Afraid even to go out to get food, we had picnic dinners delivered by taxi from the Brasserie Restaurant.

From New York we headed to Ontario to visit my cousin Bruce Lindeman, who was teaching there, as well as friends who had, as a matter of conscience, moved to Canada to escape the draft and avoid being forced into supporting an unjust war.

Onward we went, visiting friends and family members, too many to recount here, traversing Wisconsin, Michigan, Iowa, Missouri, Colorado, and on to San Francisco. On our drive through Wisconsin, I wanted to stop at my old summer camp, a place of great significance for me. I walked through the grounds I had tramped as a boy and later as a counselor for eight summers—ten-month-old Steve in my arms. It would be his only time at this place, and he would never remember it. Years later, though, his own son would walk these same paths as I once had.

Arriving at Escondido Village married student housing on the Stanford campus, we found the apartment roomy and well furnished. Our possessions from D.C., and those that I had left in Chicago reached us within a week. With the pay grade of E-5, equivalent of an NCO rank, I was entitled to moving expenses to my home of record. I had made certain that was California. The picnic table that had been in our dining room now became a true picnic table on our new patio.

Tension and Relief

It might seem that my story should end here. We were safely in California about to enter a new stage of our lives. Still, I had lingering apprehension. I was still in the Army. Yes, in the Reserves, but in the event of a declaration of emergency, I could be recalled to active duty. For the first year I was in the status called Reinforcement Reserve, followed by two years in Standby Reserve. I was not a member, however, of an organized unit.

Two major events occurred in 1968.

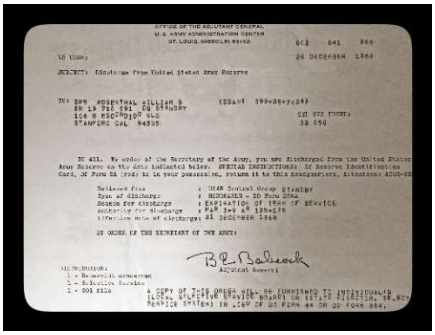
Most important was the birth of David Bruce Rosenthal on 28 June at Stanford Medical Center.

The second occurred in December when I received my discharge, and my decision to enlist in the Army was at last vindicated. As I discovered, it could have been much worse.

One of my Stanford doctoral student colleagues Charlie, also an Ohioan, had been drafted into the Army at Fort Knox as I would have been had I not enlisted. He spent his two years at Fort Knox and in Germany as a tank commander. That would likely have been my fate as well.

In 1968, some Reserve and National Guard units began being called up for duty in Viet Nam. A high school classmate and someone I had known since Kindergarten, Mel Dreyfoos, chose the reserve option. He joined the 311th Field Hospital in Cincinnati in an administrative role. In May 1968, his unit was activated, and he was sent to Viet Nam for 11 months.

In December 1968, I received my Honorable Discharge notice effective 31 December, a month earlier than expected. I had avoided serving in the 1st Armored Division as well as a deployment to Viet Nam. I had made lucky choices. I was no longer at risk.



Discharge Certificate

Honorable Discharge

The war raged on. In 1969 after Richard Nixon became President, a gradual drawdown of troops began, but not rapidly enough to satisfy anti-war protesters, many of whom were on college campuses. In 1970, peaceful student protesters were shot and killed on the Kent State University campus by Ohio National Guard troops. Further enraged, students became increasingly active and sometimes violent. Intense and increased activism by peaceful and not so peaceful protesters hastened the complete withdrawal of U.S. forces by 1974.

Student Protests 1970

The only time other than basic training that I have smelled tear gas was when it was launched at protesting students on the Stanford campus. The fumes drifted into the married student housing complex, endangering the health of the scores of young children who lived there.

The one million-man South Viet Nam army had neither the will nor desire to fight on. In 1975 Saigon fell to the North Viet Nam army and the Viet Cong. Saigon was renamed Ho Chi Min City. Viet Nam was unified as it was meant to be. Today, dozens of items in our homes are marked 'made in Viet Nam'. It is a story told and retold. Yesterday's enemies become today's allies. One can only wonder in amazement why we could not have gotten to that place without the torture, pain, and death that preceded.

Throughout the Viet Nam Era from 1963 to 1975, over two million men and women served in Viet Nam, Laos, and Cambodia. During that same period over nine million men and women served in uniform, in the United States Army, Air Force, Navy, Marine Corps, and Coast Guard. I was just one of them.

Number of U.S. Troops in Viet Nam December, 1968-536,100

Basic Training, Fort Ord, Monterey County, California
March 1963 (3 years earlier)

To See or Not to See

We were slow to grasp the significance of our final exercise. Occurring as it did, in the last week of training, it seemed like an afterthought. Tossed into the mix to keep us busy for the last few days. The Target Detection and Identification range was at the extreme southern end of the Fort Ord reservation, on the beach side of the highway. We were brought to a wooden platform that over-looked an expanse of non-descript coastal scrub, bushes, and dunes.

The instructor told us that a dozen 'targets' were hidden between the fence line on the left and the range marker 50 yards to the right. Our job was to locate and identify each of them. If we saw one, we were to raise our hand. After some minutes, nobody was raising their hands. Using a whistle as a signal, the instructor had the first target reveal himself. When the man stood, we realized that we had been staring at him all along. This continued until all twelve targets had been revealed, each uniquely camouflaged and concealed. Toward the end, several of the guys were beginning to catch on and thought they could see one or two of the targets. I saw none.

Target Detection and Identification

We stood there, quiet, subdued, cold from the chilled wind blowing briskly from the ocean. The message was ominous, a muttered warning. The practice ranges where we had learned to shoot were not like

combat. In combat conveniently dark targets would not be silhouetted against a conveniently white sand background. In real combat we might never see who we were firing at. And surely, we would never see where the bullet that killed us came from. It was a sobering revelation. I was grateful that I would not be going into combat. My infantry days were behind me. I was, after all, in the 'peacetime' Army. It was early in 1963, and Viet Nam was barely on the radar.

Number of U.S. Troops in Viet Nam March, 1963-13,000

Medical Corps Training, Fort Sam Houston, San Antonio, Texas May 1963

Huey and MASH

We are close to the end of our time at Fort Sam, but there is one last major training exercise. We have been trucked out to a remote field some distance from the main post area. A great deal of equipment has come with us. Once unloaded, we are told to unfold a huge canvas tent, and following instructions, begin to raise it. When it is up, after about 40 minutes, we have constructed the shell of a Mobile Army Surgical Hospital (MASH). We assemble and bring into the tent litters, cots, operating tables, and other hospital equipment. Another group who knows about such things is setting up a generator to power the units.

Next come more trucks bringing in simulated wounded, guys well made up to look like battle casualties. We must triage the incoming and get each one to the proper station.

Field Hospital Exercise with Simulated Casualties

Loading a Huey

Then the unexpected. A huge rumbling clatter from above, and in comes our first ever Bell UH-1 Iroquois helicopter, a Huey. It is landing practically on top of us. We are to unload the 'wounded' and prepare to reload with patients being evacuated to the rear. The rotor never stops.

We crouch as we run between the staging area and the waiting transport. When reloaded, the Huey lifts off, turns briskly, and with a deafening roar disappears from view.

This has suddenly become too real. These are the craft that will someday carry the 1st Air Cavalry division into combat and evacuate the wounded and dead from the battlefield. As with

my few short weeks as an infantryman, my days as a combat medic are almost behind me. I am, after all, in the 'peacetime' Army, and headed for Washington, D.C. It is summer 1963, and Viet Nam is still barely on the radar.

Number of U.S. Troops in Viet Nam June 1963-14,000

Stanford University, California
June 1970

Epilogue

In 1970 I completed my Ph.D. at Stanford University Medical School. I had become interested in child language disorders as a result of working with Pat Turner at Walter Reed. I conducted my dissertation and post-doctoral research at the Institute for Childhood Aphasia, which was affiliated with the medical center. My research investigated how auditory processing intersected with language delay **(11)**. Later my interests returned to the mystery and challenge of stuttering, a path that Rex had set for me.

I live with a profound sense of failure that my first marriage did not last. Still Ann and I continued to cooperatively raise our two fine sons. I was graced with a second chance. My relationship, and marriage with Carol has traversed the major portion of my professional life and beyond. We have a wonderful son, John Ryan Rosenthal-Murphy, born 19 July 1980.

Although they have been the most important part of my life, I have purposely not included much detail in this narrative about others, especially my children and grandchildren. It is for them to tell their own stories.

In 2005 I retired from a 35-year career at California State University East Bay. In 2006, as my final professional act, my swan song, I delivered a paper (later published) at an international conference at Trinity College, Dublin, Ireland. That paper, and one previous, reported on results of studies that utilized the videos of patients in the stuttering treatment program from Walter Reed **(12)**. For me, these presentations were a salute of gratitude to the many people who helped launch and shape my professional career 40 years before.

The evolution of that data source is remarkable. It began as 1-inch video tape segments collected at the television studio at Walter Reed. Those were transferred to 16mm film. When Rex Naylor retired, those many reels of film followed me to California. At California State University East Bay, I had those 16mm films transferred back to video tape, but this time on VHS cassettes, many of which were used for teaching and training students about stuttering. The final transform was from VHS to digital tape that allowed randomized ordering of the segments to conform to the new research protocol. It is a fact that properly and carefully collected data have an exceedingly long shelf life.

I had embarked on my military service believing that it would be a peacetime undertaking. For me that was nearly the case. My service was relatively stress-free and personally fulfilling in most respects. It helped to motivate me and informed my choice of career.

I rode the crest of a gentle wave, but with a tsunami relentlessly closing in from behind. By the end of my service obligation in 1968, there were over a half million men and women in Viet Nam, Laos, and Cambodia, fighting a war that should never have been. And 58,209 of those men and women never came home. They are names on a wall, and I likely know some of those names. For me, the irony is that by helping some men and women successfully remain in service, I regrettably exposed them to a greater jeopardy.

It was a painful time for the country with many violently opposed to the war and expressing those intense emotions by haranguing soldiers returning home from combat. Yelling obscenities, spitting, and hurling symbolic red paint. Nobody said," thank you" and nobody said, "welcome home". It was unfair and cruel.

The military is the tip of the spear, charged with protecting the homeland and keeping conflict on other shores and away from home. We have learned that this is impossible. The attacks of 9/11 and subsequent terrorist acts by zealots, and the solo massacres by politically extreme and demented individuals show that there is a deeper, underlying evil that armies cannot confine to foreign soil.

To make things worse, there are relatively few influential politicians who have ever worn the uniform of the military. From a time when universal service was mandatory, we have come to a point where almost no sense of national service or sacrifice any longer exists.

Our country has no soul, no shared experience to transcend gender, national heritage, race, politics, or religion. I do not preach that universal military service is the solution to this, but it is certainly a part. National service should be required, an obligation of citizenship, whether military, Peace Corps, AmeriCorps, Teach for America, Civilian Conservation Corps, or some legitimate faith-based service. Something is needed to bind us to a common purpose, with generosity and sacrifice of a small portion of one's life in the service of others.

Oakland, California
September 2020

Afterword

The meningitis outbreak closed basic training at Fort Ord in 1964. The base subsequently reopened for training in 1968 in the midst of the Viet Nam War. In 1991 there was a severe reduction of military facilities across the country and Fort Ord was on the closure list. It closed in 1994.

Today it is the Fort Ord National Monument and Natural Reserve. Much of the back country of its 28,000 acres is open for biking and hiking trails. A major portion is allocated to the campus of the California State University, Monterey Bay. The firing ranges and beaches have become Fort Ord Dunes State Park. Some use is retained by the California National Guard, and the Ord Military Community that continues to house active and retired military families. The Army retains portions of the Fort for the Defense Language Institute and the Naval Postgraduate School, known as the Presidio of Monterey Annex. These facilities are located nearby in the city proper of Monterey. There were over 4000 structures on the base, and it fell to the Army Corps of Engineers to dismantle them. Some structures still stand today as deserted and silent sentinels of the past. Several of historical value are being preserved.

In 1978 the Army Audiology and Speech Center moved from Forest Glen to the Walter Reed main campus, where a desperately needed new hospital building had been constructed. The old AASC building and the colonial mansion in front was razed to make room for a multi-acre sprawling Army commissary complex and a new building for the Army Institute of Research.

The main buildings at Forest Glen were abandoned and fell into disrepair. The Army proposed to tear them down. Local Maryland residents objected and had the place designated as a National Heritage Site. A private developer emerged and began restoration of the original buildings and added mixed housing of apartments and condominiums. The main building's ballroom was restored to its original splendor. Docents conduct regular walking tours of the site and spin tales of the place's history. It is a remarkable story of preservation and reuse.

Forest Glen Main Building Renovation and Development

Restored Ballroom

A similar story is underway at the main Walter Reed Campus between 16th Street and Georgia Avenue. In February 2007, The Washington Post published a series of investigative articles outlining cases of alleged neglect, the physical deterioration of housing quarters outside hospital grounds, and bureaucratic nightmares at WRAMC that were reported by outpatient soldiers and their families. The scandal resulted in the firing of the WRAMC commanding general, the resignation of Secretary of the Army, and the forced resignation of the hospital commander.

In 2011, as part of the Base Realignment and Closure, the Department of Defense closed the old Walter Reed Army Medical Center and replaced it with the new Walter Reed National Military Medical Center on the grounds of the old National Naval Medical Center at Bethesda, Maryland. It was part of the larger military program to transform medical facilities into joint facilities, with staff including Army, Navy, and Air Force medical personnel. Speech-language pathology and audiology services moved to that new site and there is a modern and well-staffed clinic at the Center. Rex Naylor's move to Bethesda in 1966 turned out to be prophetic.

The transformation of the old Walter Reed campus is underway, with plans for new mixed-use housing, parks, and the preservation of the main historical Walter Reed buildings. Down the road, at 6645 Georgia Avenue N.W., our old apartment building still stands.

Walter Reed Redevelopment Project--
Original Hospital Building Upper Center

My military occupational specialty, Clinical Psychology Specialist, no longer exists. The current designation is Behavioral Health Specialist. A different name, but very much the same job.

In 1985 the last of the specialist ranks, except for Specialist E-4, were discontinued. The distinction between specialist and NCO ranks had become murky and unwieldy. Under the current scheme, my final rank would have been Sergeant.

Glossary

cabra---Spanish for ‘goat’

cordera---Spanish for ‘lamb’

CORE---Congress of Racial Equality

CQ---Charge of Quarters, an enlisted person, usually a noncommissioned officer, who remains on duty and handles administrative matters in a military or other unit during the night or on holidays.

CO---Commanding Officer

HQ---Headquarters, the military installation from which a commander performs the functions of command.

Minyan--- a quorum of ten men (or in some synagogues, men and women) over the age of 13 required for traditional Jewish public worship.

MOS---Military Occupational Specialty

NCO-Non-commissioned officer, from the rank of corporal to sergeant major.

LCI---Landing Craft Infantry, smallest ocean-going ship of WWII.

ROTC---Reserve Officers Training Corps, a program to train college students to become officers in the U.S. armed forces. There is a junior branch for high school and military school.

SDS---Students for a Democratic Society

SNCC---Student Non-violent Coordinating Committee

XO---Executive Officer, second in command of a unit

201 File---Military personnel file describing the member's military and civilian education history.

Dedication

For Carol Ann Murphy, who suffered the direct effects of the war in Viet Nam;
Ann Hillyer Metcalf, who sacrificed on my behalf and tolerated much more than was necessary;
My children, Steve, Dave, and John, and my grandchildren, Molly, Lucy, and Christopher, who have not served in the military, but who each will find their own way to serve the betterment of mankind.

Acknowledgements
(In Approximate Order of Appearance)

Phil Maimon, Rudy Peterson, Staff Sergeant Lamb, Corporal Conoyer, Howard R., the Fort Sam Mini-Minyan, AASC Staff Sergeant Nunes, Major James Creston, M.D., the AASC upstairs gang Rex V. Naylor, Ph.D., Patricia Turner Rosenman, M.A., Linda Tucker Boris, M.A., Blanche Schnapper, M.A., Mary van Bebber, Mary Sykes, Dorothy Hedrick, Command Sergeant Major Hedrick, the downstairs group Edwin Shutts, Ph.D., Ed Muth, the Audiology gang that taught me how to twiddle the dials, the Electronics Lab and Research group who introduced me to electro-acoustics, the GW faculty Calvin Pettit, Ph.D., Joan Regnell, M.A., Gilbert Herer, Ph.D., Lloyd Bowling, Ph.D., James Hillis, Ph.D., my cousin Betsy Lindeman Flint who typed my Master’s thesis, the men and women patients of the stuttering treatment program without whom there would have been no thesis, and all those whose faces and voices are clear in my mind but whose names are lost to memory.

Notes

1. The center was named after Major Walter Reed (1851–1902), an Army physician who is best remembered as the person who led the team that confirmed that yellow fever is transmitted by mosquitoes rather than direct contact. This discovery is credited with permitting the completion of the Panama Canal. The project had been abandoned by the French, partly because of toll taken by the disease.

2. Sometime after the Korean War, General Maxwell Taylor decided to reorganize the structure of Army units. The design was called the Pentomic concept and was supposed to reduce the time needed to organize an attack, thereby reducing the time available for the enemy to respond. The Pentomic concept organized several different units into a more balanced division. General William Westmorland was the first saddled with this new organizational scheme when he assumed command of the 101st Airborne Division. When he took command of forces in Viet Nam and later as Chief of Staff in 1968, he abandoned the structure and returned to the traditional units. For basic trainees in 1963, however, the Taylor scheme was still in place.

3. Department of the Army Technical Manual TM-242—Department of the Air Force Manual AFM 160-45, *Military Clinical Psychology*, United States Government Printing Office, 1951. This manual described many scales and tests that we had in inventory at the Center but that were largely useless. Many were outdated going back to WWI and had been replaced with newer, better validated measures.

4. Bell Adjustment Inventory (1962)

5. I often used the Minnesota Multiphasic Personality Inventory (MMPI) and an added scale, the Lanyon Malingering Scale. Unfortunately, the malingering scale had low validity and interviewing yielded better results. The Strong Vocational Interest Inventory Test and Kuder Vocational Preference Inventory were used for counseling. We had available the Rorschach and Thematic Apperception Tests, but again the scoring and interpretation seemed to me to tell more about the administrator than the subject. I used them infrequently.

6. The tests for children included, the Merrill-Palmer Scale of Mental Tests; Leiter Perf Scale; Bender Visual Motor Gestalt Test (Koppitz scoring system); Wechsler Intelligence Scale for Children (WISC); Wechsler Adult Intelligence Scale (WAIS); Revised Stanford Binet Intelligence Scale; Vineland Social Maturity Scale.

7. In the 1970's activists in the stuttering community objected to the term stutterer because it implied that this behavior was the defining characteristic of the person. The term 'person who stutters' (PWS) does not carry that connotation and is preferred.

8. James Chaney was a CORE worker from Meridian, Mississippi. His best friend was Michael Schwerner, a CORE worker from NYC. Andy Goodman was a student at Queens College, a summer volunteer during SNCC's Freedom Summer, June 1964. The FBI discovered their bodies and subsequently rooted out the perpetrators. Most were convicted under Federal statutes, but their sentences were not commensurate with the crimes they had committed.

9. Rosenthal, W.S. (1966) *Self-concept change in adult stutterers resulting from short-term intensive speech therapy*. Unpublished master's thesis, George Washington University, Washington, DC.

10. Rosenthal, W.S. and Naylor, R.V. (1968) *Clinical Investigations of Stuttering: I. Adjustment and Effectiveness of Stutterers in Military Service*. Final Report, Project No. 3A-015601A826-01-036, U.S. Army Medical Research and Development Command, Washington, D.C.

Naylor, R.V. and Rosenthal, W.S. (1968) *Clinical Investigations of Stuttering: II. Treatment and Follow-up of the Adult Stutterer*. Final Report, Project No. 3A-015601A826-01-036, U.S. Army Medical Research and Development Command, Washington, D.C.

11. Rosenthal, W.S. (1970) *Auditory temporal order in aphasic children as a function of selected stimulus features*. Unpublished doctoral dissertation, Stanford University, Stanford, CA.

Rosenthal, W.S. (1972) *Auditory and linguistic interaction in developmental aphasia: evidence from two studies of auditory processing*. Papers and Reports on Child Language Development, 4, 19-34. Stanford University.

Rosenthal, W.S. (1974, November) *The role of perception in child language disorders: A theory based on faulty signal detection strategies*. Paper presented at the Annual Convention of the American Speech-Language-Hearing Association. Las Vegas, NV.

12. Rosenthal, W.S., Austermann Hula, S. and Rud, L. (2007) Ego-States and Measures of Fluency: Unraveling Connections to Treatment Outcome. In J. Au-Yeung & M. Leahy (Eds.) *Research, Treatment, and Self-Help in Fluency Disorders: New Horizons*. Proceedings of the Fifth World Congress on Fluency Disorders, Dublin, Ireland, 2006. (pp. 423-430). London and Dublin, International Fluency Association.

Rosenthal, W.S. (2001) Relationship of change in ego-state to outcome of stuttering therapy: preliminary findings. In H-G. Bosshardt, J. S. Yaruss & H. F. M. Peters (Eds.) *Fluency Disorders: Theory, Research, Treatment and Self-Help*. Proceedings of the Third World Congress of Fluency Disorders in Nyborg, Denmark, 2000 (pp. 405-409). Nijmegen, The Netherlands: Nijmegen University Press.


Certificate of Training
RIFLE
SP5 WILLIAM SIDNEY ROSENTHAL
UNITED STATES ARMY 1963-1968
MEDICAL CORPS
CLINICAL PSYCHOLOGY SPECIALIST
WALTER REED ARMY MEDICAL CENTER
WASHINGTON, D.C.
6 JUNE 1963- 22 DECEMBER 1965

Sixth Army Shoulder Patch (Top Left)

Official Seal United States Army (Center)

US and Medical Corps Lapel Insignia (Left and Right of Seal)

Special Services Shoulder Patch (Top Right)

U.S. Army Enlisted Hat Insignia (Center)

Service and Commemorative Ribbons
with corresponding medals arranged below.

Expert Qualifying Badge (Rifle) (Center)

Walter Reed Army Medical Center
Unit Insignia (Outer)

Specialist 5 Rank Insignia
(Inner)