

EVENT/TOPIC: NZ Medics in the Vietnam War

Focus Question 1: What involvement did NZ Medics have in Vietnam, and what challenges did they face while there?

Focus Question 2: What was the significance of NZ medic involvement?

Research Proposal: What is your chosen topic (brief summary) and why it is of significance to New Zealanders? My chosen topic is the Medics that were sent by New Zealand to serve in the Vietnam War, assisting America and its allies, treating civilian casualties of war, and training Vietnam nursing staff. This topic is of significance to New Zealanders, because they were members of our population who went and served overseas, yet still in a highly controversial war. This aspect of the significance intrigued me to choose it as my research topic and therefore look into it further, by wondering truly how much of an impact the New Zealand Medical team had on the war and people involved in it as a whole.

Evidence that I expect to use	How this might be useful to my investigation
<p>Surgical and medical support - (VietnamWar.govt.nz)</p> <p>https://vietnamwar.govt.nz/nz-vietnam-war/surgical-and-medical-support</p>	<p>This is a website that is reliable, as it is a government website (.govt.nz). This source looks at the different aspects of New Zealand Medics time in Vietnam. The Civilian surgical team, who focused on treating civilian casualties and accidents, and helped train Vietnam Medics. And the Services medical team, which were supported by military (NZSMT, 1st New Zealand Services Medical Team. Made up of army navy, and air force personnel, with all of them serving as medical officers or medics.)</p>
<p>I was there!</p> <p>Dramatic first-hand accounts from New Zealand's history. Edited by Bob Brockie.</p>	<p>This is a primary source, as it is a first-hand account of the topic in written form. It is from the perspective of a Doctor at Qui Nhon hospital in Vietnam. He talks about his actions, and what exactly he did there, how he volunteered. How he was treated as a New Zealand Doctor, and military involvement.</p>
<p>New Zealand Medical Staff - (Vietnam.govt.nz)</p> <p>https://vietnamwar.govt.nz/video/new-zealand-medical-staff-qui-nhon-film</p>	<p>A primary source, because it's a video from the time that NZ medics were in Vietnam. It shows the extent of the injuries they treated, and the how badly the citizens of Vietnam were being impacted by the war, and how New Zealand was helping.</p>
<p>3 further specific possible sources were identified with details on how they may be useful.</p>	

Source 1: Website, Secondary

Surgical and medical support - (VietnamWar.govt.nz)

<https://vietnamwar.govt.nz/nz-vietnam-war/surgical-and-medical-support>

Date published: 2010

Access Date: 6th April 2022

Author: Ian McGibbon

Surgical and medical support

Initial assistance to Vietnam was a civilian surgical team based at the Binh Dinh Provincial Hospital, Qui Nhon. Part of New Zealand's aid programme – and our hesitant support for the war – the first team deployed in 1963, two years before New Zealand's combat commitment – and was the last agency to withdraw in 1975. From 1967, the 1st New Zealand Services Medical Team was based 100 kilometres away at Bong Son, treating civilian casualties of war and accident cases, and training Vietnamese nursing staff. The team was withdrawn in 1971, and its hospital destroyed soon after by North Vietnamese forces during reunification. Nine New Zealand Army nurses in all served at the 1st Australian Field Hospital, Vung Tau. They treated soldiers with illnesses related to the climate and conditions, and were on standby for helicopters bearing soldiers wounded in firefights. New Zealand infantry companies also had army medics, who provided preventative healthcare to soldiers around base – inoculations and treatment for minor ailments – and accompanied troops on operations to care for those wounded in action and awaiting medical evacuation. Two New Zealand Red Cross field workers were also based at Vung Tau.

Civilian surgical team

A six-strong civilian medical team arrived in April 1963 as part of New Zealand's initial assistance programme to Vietnam under the Colombo Scheme. Based at the Binh Dinh Provincial Hospital, the team treated civilian war and accident casualties from the surrounding area, and trained Vietnamese medics and nurses in modern hospital medicine, and later in maternity, paediatrics, and public health promotion. Dunedin physician Dr Michael Shackleton – accompanied by his wife and five children – was first team leader on the scene in Qui Nhon, and had the difficult task of establishing a base for his crew in the face of staunch resistance from Vietnamese counterparts, inadequate facilities, and little practical support from New Zealand bureaucrats. In 1966, the team grew to 14 – comprising three surgeons, a physician, an anaesthetist, an administrator, a laboratory technician, six nurses, and a maintenance officer. The team was evacuated in March 1975, just before the fall of South Vietnam. However, its work continues today under the auspices of the New Zealand Viet Nam Health Trust (NZVHT), an enduring restorative contribution to war-torn Vietnam. In 1991, a coalition of 12 agencies including Volunteer Services Abroad (VSA), the Red Cross, and NZVHT revived key relationships forged by New Zealand medics and public health practitioners between 1962 and 1975. This collaboration continued until the government withdrew aid funding in 2002.

Services medical team

In early 1967, New Zealand's medical efforts in Binh Dinh province were bolstered by the formation of a 16-man military medical team. The first joint unit ever created by our armed forces, 1st New Zealand Services Medical Team (1NZSMT) was a tri-services unit made up of army, navy, and air force personnel. Ostensibly controlled by NZ V Force, the team was directed day-to-day by USAID. [1] Led by Second World War veteran Albert Green, the team

comprised six army, five air force, and five navy personnel. All regulars, within the team these men served as medical officers (3), medics (12), and an administration officer. The team inherited the work started by an American Military Public Health Assistance Programme (MILPHAP). Initially spread between Bong Son and dispensaries in nearby villages, safety concerns and staffing problems forced the team to consolidate its efforts around the provincial hospital. The Viet Cong were active in the Binh Dinh province, and the threat of violence became a reality when an enemy explosive device – believed to be a command-detonated mine – killed team medic and father of two Gordon Watt in March 1970, the RNZAF's sole fatality of the war. [2]

[...]

Annotations:

This source is about the different teams and ways in which New Zealand medics had involvement in Vietnam. It discusses the Civilian Surgical team, which was located at Binh Dinh Provincial Hospital, and who focused on treating civilians injured as a consequence of war. It also discusses a new topic, which wasn't mentioned in source 6, the services medical team. Explaining more about how the New Zealand Army Medics operated in Vietnam and what they treated and more inner workings of the team.

This source clearly speaks about the danger waiting at every corner that the NZ medic team must be ready for, and work through. The reality of this danger shown when Gordon Watt was killed by an explosive device despite working with the NZ medical team. This helps to answer question 1 by showing the consequences of the challenges faced by the teams in Vietnam.

The source also talks about the significance of NZ medic involvement that it continues independently from the war, still having a positive effect on the country. It shows that New Zealand's involvement (at least from the medical teams that were sent over) worked and still are working towards helping Vietnam heal, shown by the fact that it is still active today, although under a different name.

The reliability of this source is quite good. It was written in 2010 by Ian McGibbon, who is a New Zealand Historian that focuses on military and political history and is renowned for his work. Because it is an excerpt from his book "New Zealand's Vietnam War", there is no way for it to be updated if needed. But despite this, the source itself is posted on a website produced by the New Zealand Ministry for Culture and Heritage. Given that this has been written after the New Zealand government has addressed some of the outstanding controversial aspects of the war (such as veteran compensation) there would be very little for them to gain from misleading the NZ public on the events and involvement we had over there. As such there doesn't appear to be a bias present in the source, as it is mainly comprised of facts and statistics from the NZ medic team's time in Vietnam. But it doesn't show a range of views, sticking to only that of the NZ Medical teams, both civilian and service.

Source 2: Photo, Primary

New Zealand medics start work in South Vietnam - (New Zealand History) 25th April 1963

<https://nzhistory.govt.nz/page/new-zealand-medics-start-work-south-vietnam#:~:text=The%20team%20based%20at%20Qui,paediatrics%20and%20public%20health%20promotion.>

Photographer: None mentioned

Date published: 8th October 2021

Access date: 13th April 2022



New Zealand surgical team doctors in Qui Nhon (VietnamWar.govt.nz)

This source is a picture from Qui Nhon, at the hospital that the New Zealand surgical team was operating. It was taken on the 25th of April, in 1963. It shows a Vietnamese patient lying on a stretcher-type bed with a sheet over them as a group of medics from the New Zealand surgical team stand beside her. Three of the doctors are dressed very clearly in surgical gear.

The source holds a lot of important information to the focus question 1. This is because it is a primary source and shows exactly what the New Zealand surgical team looked like in action. It shows direct proof of their involvement, as there is now evidence of them treating a patient in South Vietnam, shown by the doctors dressed in surgical gear, the hospital environment, and the patient on the 'bed'. It also assists in question 1 by showing the conditions of South Vietnam medical care through something other than words. By observing the photo, it can be seen that there is not the most advanced equipment available, even for 1963. This shows a challenge that the New Zealand surgical team would've had to overcome and work through. Doing their best with the resources they had to save as many lives as possible while in Qui Nhon.

Seeing as this source is a photo that was taken on the 25th of April in 1963, it is a primary source. This immediately makes it quite reliable. I took this source from the website nzhistory.govt.nz, which shows that it is a website supported by the New Zealand Government. While nzhistory does not credit a photographer, I do not think that it takes away from the reliability of the source, as it still would've been taken by someone in Qui Nhon hospital in 1963 regardless of who. There is no bias present in the source, however some caution is needed as it was not uncommon for "war photographers" to be sent to warzones to document a country's 'success' and involvement.

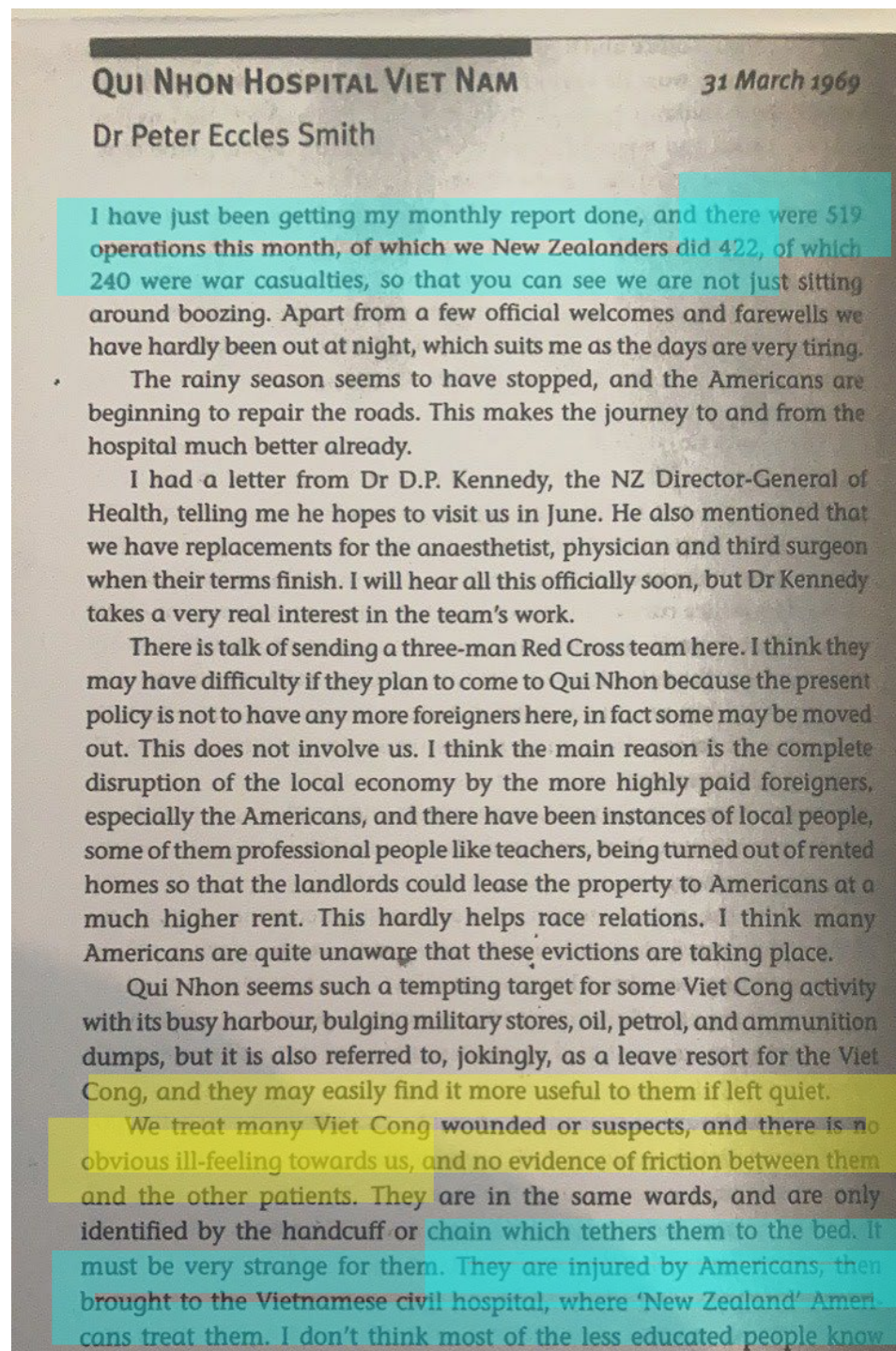
Source 3: 'Letter', Primary

i was there!

Dramatic first-hand accounts from New Zealand's history.

Author: Edited by Bob Brockie.

Date published: 2010



that there is any difference between us and the Americans. I think some of them look on us rather as they look on American Negroes, that is, as Americans who are different from the other, more common white Americans . . . I have met many Americans by now, mainly USAID men, most of whom are very sincere and dedicated. Some are as concerned as I am with the slaughter of innocent civilians, and as concerned with the future. Active military operations continue north of here, with the endless casualties and refugees. It is estimated that the An Lau valley action will create 40 000 refugees. Had a three-year-old die on me today. She came in with her guts torn apart by a grenade. Her mother, just a girl really, was with the child all the time, helping us to try and save her, and it was not until the child had died that we realised that the mother too had several wounds herself. The terrible sight of the dying child in the arms of the injured mother was most upsetting. It is horrible to think that our own troops will be inflicting the same sorts of wounds on the same sort of people. It is a blessing that they are not in this province. It would be awful to get this sort of thing inflicted by our own people.

Dr Smith, for many years the Medical Superintendent of Dannevirke hospital, served voluntarily for 12 months as leader of the New Zealand civil surgical team in South Vietnam. The team won an international reputation for the success of its humanitarian efforts. Dr Smith reports here to his family back home.

This source is from the book "I was there" and it is a letter from Dr Peter Eccles Smith, who was the leader of the New Zealand civil surgical team and served in South Vietnam. In this letter that he's written, he is writing to his family back home in New Zealand. It's a very informational letter, as Dr Smith includes a lot of current events that were going on at the time. He talks about the American soldiers he worked along-side, plans of sending more Red Cross aid over to Vietnam. He also talks about a recent patient of his, and how he feels about the situation in Vietnam and how he is impacting it.

This source has a lot of relevant information that connects to my focus questions and is helped by the fact that it's written by someone who experiences being a NZ medic in Vietnam. Dr Smith mentions in his letter that they treat many Viet Cong patients, and the only difference between them and any other patient is a handcuff to the bed. This gives more insight into NZ medics involvement, and what they did while in Vietnam. It also introduces a new challenge that the NZ medics would've had to face, trying to treat Viet Cong patients when it was New Zealand's own allies and maybe even New Zealand soldiers who caused the injuries. His tone of writing is clearly upset as he talks about the three-year-old who came in with a grenade wound that he couldn't save. While terribly upsetting, this information that he mentioned gives more insight that relates to question 1 as well. It shows that as part

of the involvement by the NZ medics, they work hard to save anyone affected by war injuries.

There is also a lot of evidence in this source that relates to focus question 2, about the significance of New Zealand's involvement. It is, at least in Dr Smith's eyes, a positive thing. He and his team are working to save people, which has a positive impact on the population and lives of those living in war-torn Vietnam. When talking about the wounds inflicted on the people he treats by the Americans, he also laments about the fact that it could be New Zealanders, from his own country, doing the same thing. While he considers his own involvement to be of great importance and being helpful, this causes him to regard what the NZ army would be doing with a sense of dread, as it's everything he works to fix. At the beginning of the letter he states that there were 519 operations that month alone, and that 422 were by Kiwis. This shows that without New Zealand medic involvement, almost all the operations wouldn't have been performed and would have resulted in a far harsher loss of life. This is all relevant to the significance of NZ medic involvement.

This is a primary source, as it's a letter from a doctor who was on the NZ surgical team. It is written by him to his family back home. It was found in the book "I was there", which was edited by Bob Brockie. Because it is such a personal source however, there is a possibility of bias to be in this source. The fact that Dr Smith would most likely not have written anything to make him or the NZ medic team to be painted in a bad light to his family.

Source 4: News recording, primary

New Zealand Medical Staff - (Vietnam.govt.nz)

<https://vietnamwar.govt.nz/video/new-zealand-medical-staff-qui-nhon-film>

Author: Editorial team

Date published: 22nd May 2008, updated 5th September 2014

Access date: 3rd May 2022



New Zealand medical staff in Qui Nhon - Film

News coverage of Qui Nhon Hospital in 1965. Badly injured Vietnamese patients, including blinded children, are attended by New Zealand medical staff.

Transcript

The sun shines brightly on a hospital, but for some the dawn will be a long time in coming. And here, New Zealanders are involved too. Sir Stephen Weir moves through the overcrowded wards with the medical team. Lying three to a bed, 90% of these people are war casualties. Dr Jack Enwright, an Auckland surgeon, and the New Zealand medical team operate on 200 cases a month.

For many there's no place on a bed. Even under these appalling conditions, Sister Gladys Taylor and Sister Rae Thomas still have a smile for the patients. For Dr Ian Hutchinson, examining a four year old child blinded by shrapnel is a tragic but everyday occurrence. For a lot of these innocent sufferers, life will be a long, pain-filled darkness.

This is the face of South East Asia today. Her agony is that of hunger and disease, and of bitter and bloody war. There is no simple cure – maybe there's no cure at all, but there is hope. And towards this New Zealand is making a small but worthwhile contribution.

Annotations:

This source is News Coverage from New Zealand of the Qui Nhon hospital in 1965, where the New Zealand medical team is located. It describes and shows in the video the conditions of which the hospitals are operating. It shows us how New Zealand views their own involvement, by examining what their contribution is really doing to assist Vietnam.

The news clip describes the hospital as “overcrowded wards”. This explains that there are simply too many patients for the hospital to keep up with. That even with the extra resources brought over by the New Zealanders, they are still struggling. The recording even says there is no place on a bed, which is seen visually as well.

It also has information that links to question two. “And towards this New Zealand is making a small but worthwhile contribution.” This shows how New Zealand regards the significance of the involvement of their own medics in Vietnam.

The fact that it is a news clip originating from the time of the NZ medical team being in Vietnam means it should be reliable as a primary source, it means that there is most likely a large amount of bias present in this source. This is due to it being from New Zealand news, which has a very high chance of twisting the truth to be in their favour. Its intended audience are all the New Zealand civilians back at home, wanting to hear about the good that the NZ medical team is doing. While sources have corroborated that they have indeed been doing just that, it does mean that it's less likely for the negative things to be reported, at least in this source. I still consider this to be a fairly reliable source. But the fact of the bias it holds should be considered when using it, and not be taken as the independent truth.

Evaluation:

STRENGTHS/ SUCESSSES of my inquiry process	I enjoyed this assessment, as I found the process of gathering sources and extracting information from them to be very interesting. I feel as though I have done well in my source reliability statements. This is because I often found myself going a step further into doing background research on the source, such as seeing how qualified the author was, and what other articles they'd written. I believe this helped me in progressing on my assessment, as not only was it a requirement to assess the reliability of our chosen sources, but it also helped me eliminate and better chose which sources I should use in my research. I also believe that I chose a range of different perspectives that will help me in my research, such as primary sources from the many different NZ medical teams that were sent to Vietnam, or volunteered. I know this was one of my strengths due to how easily I was able to relate their information back to my focus questions, how they compared against each other, and that I was able to find a sufficient amount to consider myself successful.
WEAKNESSES/ DIFFICULTIES of my inquiry process	Despite my enjoyment of this assessment, I did find multiple parts of it quite challenging, something that really revealed where my weaknesses were. I particularly found the process of writing about what the source showed me before getting in to my annotations awkward and difficult. I struggled wit trying not to seem as if I was just recapping the source.
COMPARE THE USEFULNESS OF SOURCES	Despite the fact that the sources I used were chosen specifically due to the fact that I knew they held information relevant to answering my focus questions, there were certainly some sources that were more useful than others, something which is made clear when comparing them. I consider my most useful source to be source 1. Source 1 is the article "Surgical and medical support" written on the website Vietnamwar.govt.nz. This one of my best and most useful sources because it covers a wide range of all the different ways NZ provided medical aid, such as though army medics, civilian surgical teams, and volunteers and supplies sent through Red Cross. This is very useful as it shows, in one source, many of the ways NZ medic involvement happened, and also discusses part of the significance of it. It's useful due to all this information being in the same source, as normally it would be spread out over multiple. As opposed to my supposedly least useful source, source 5. This source primarily focused on one nurse from the Red Cross serving in Vietnam. While it was useful to get a different perspective, the source wasn't written by her or with any input from her, and was also very short. This meant that it didn't include the same level of information as my other sources, and was probably my weakest and least useful source.

<p>RELIABILITY of SOURCES/EVIDENCE</p>	<p>I took great care into researching the reliability of all my sources, and as a result, I think that most of them I would consider quite reliable. As I mentioned above in my strengths, I did this reliability research by looking into the background of the authors that I could find, to see how truly qualified they were to be talking on such a topic. I searched further into who was running the websites I found them on and why, and I took bias into consideration. I corroborated all my sources to ensure that all the information they mentioned lined up, and that nothing was out of place. I looked into who each source was intended for, and if that would have an impact on its reliability. Because of all the measures I took to check that my sources were reliable, I can confidently say that my most reliable source is source 1. Although it isn't a primary source, this means that there is no need to read between the lines, as is often needed with primary sources. Source 2 comes from a proven, reliable website, Vietnamwar.govt.nz, a website set up by the New Zealand Ministry for culture and heritage, as a way to collect all the information about New Zealand's involvement in the Vietnam war, after there was so little positive recognition for their return home. The source itself is written by Ian McGibbon, who is a well-known New Zealand historian, who focused on military and political history. I believe this, and many other aspects mentioned in the sources reliability assessment make it one of my most reliable sources. Whereas I consider source 5 to be my least reliable. This is due to the lack of information I found on her and about the website. It was last updated in 2008, and has very bad design with not much needed information to properly gauge its reliability to the full extent. It doesn't credit an author, and also is not a New Zealand government website. While it is a non-profit website and matches up with corroboration, in my opinion this still isn't enough to get it out of the position of my least reliable source.</p>
<p>ISSUES THAT AFFECTED THE INQUIRY PROCESS</p>	<p>Due to the length of time in which this assessment took place, it's natural that quite a few issues affected the process. Halfway through collecting and annotating my sources, I decided to slightly change one of my questions. While it wasn't a drastic change, this still affected the inquiry process as I had to backtrack on my work, and make sure that everything I had lined up with the new variations of the questions. Another issue that affected the inquiry process was how difficult it was to find primary sources. Because of the drastic number difference in Vietnam army veterans and Vietnam medic veterans, a lot of the sources that kept showing up to my searches. This wasted a lot of my time when I was collecting sources. I overcame this issue my learning how to tweak my searches slightly so that the relevant information that I needed showed up instead. Knowing this in advance would've helped to save me a lot of time and I helped me achieve higher quality sources faster.</p>