Medical, Dental and Other Professionals in the National Service Call-Up 1965-1972

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1. SUMMARY

As a result of the National Service Act 1964, a cohort of 20-year-old men who were undergoing university courses in Medicine and Dentistry and certain other courses such as Psychology, Pharmacy, Science and Law, had birthdates that were drawn in the ballot, and so were subject to National Service call-up. These young men were offered a deferral to enable them to complete their initial tertiary education, and in the case of doctors their internship year as well. This cohort of university graduates, many of whom were 23-25 years old on enlistment, was not typical of how most other National Servicemen undertook traditional officer or other-ranks military roles.

Sixty qualified doctors were called up between 1969 and 1971. After undergoing infantry officer training and a Military Medicine course at the School of Army Health at Healesville (SAH-H) they received the rank of T/Capt. All received postings to the RAAMC, together with 14 pharmacists, at least 11 Admin & Technical officers, four scientific officers, and 11 miscellaneous officer appointments, who were called-up between 1966 and 1971. At least 20 doctors served overseas – 12 in Vietnam and eight in Papua New Guinea.

Forty-four dentists have been identified as having been called up between 1967 and 1971. They also trained at SAH-H. All received postings to the RAADC. At least four served in PNG and three in Vietnam. Furthermore, at least 15 psychologists and 19 legal officers enlisted after deferral. Psychologists were posted to the AAPsyC (one went to Vietnam), and lawyers to the AALC. Officer training was undertaken through the Officer Training Unit, Scheyville and/or SAH-H depending on individual circumstances.

As a consequence, approximately 180 young men (178 as estimated from accessible records), while serving nationally and overseas in the 1960s and 1970s, contributed in their professional capacities to the effectiveness of the Army and its service to community. Those posted to South Vietnam had major roles in maintaining the health and well-being of the Army. Those in PNG contributed to the Army but also to a developing-country at a time it was transitioning to become an independent sovereign nation.

Many of these Nashos indicate that the direction of their professional careers was influenced and enhanced by their military service, despite their ongoing professional training being temporarily interrupted and young families being inconvenienced. That such a large group of professionals were granted deferral to complete initial training and bring these skills to the army, as well as their stories and contributions, have not been told. Here we document how these forgotten Nashos were recruited and trained, together with the contributions and experiences of some, to ensure that this chapter in the history of the Australian Army is not overlooked.

2. PROFESSIONALS IN THE CALL UP 1965-1972

As a result of the National Service Act 1964, a proportion of 20-year-old men who were undergoing university courses in Medicine and Dentistry and certain other courses such as Psychology, Pharmacy, Science and Law, had birthdates that were drawn in the ballot, and so were subject to National Service call-up. Instead of being called-up at the age of 20 years, they were offered deferred enlistment to enable them to complete their initial tertiary, and in the case of doctors, professional training. This cohort of university graduates, many of whom were 23-25 years old on enlistment, was not typical of how most other National Servicemen undertook traditional officer or other-ranks military roles.

While serving nationally and overseas in the 1960s and 1970s, approximately 180 young men[2] contributed in their professional capacities to the effectiveness of the Army and its service to community. Approximately 29 served overseas.

How they were trained, their stories about their training, their deployment experiences and the subsequent impact on their careers, have not been told. Neither have their contributions to the Army and the communities where they served. For example, the absence of references to National Service medical, dental and other graduate professionals in the contemporary and authoritative book "GUARDING THE PERIPHERY – The Australian Army in Papua New Guinea, 1951-75: (Tristan Moss 2017 Cambridge University Press), reinforces the assertion that "*their story has not yet been told"*. See also the APPENDIX "Gaps in the Historical Record".

The National Council of the National Servicemen's Association of Australia (NSAA) has determined that this major intake of professionals into the Australian Army at the time of National Service, requires due recognition.

2.1 Enlistment Schedule by Profession

Almost all of these young men were given deferral and enlisted progressively from late 1965 until 1971, according to when they had completed their tertiary qualification (and intern year in the case of doctors).

Qualified dentists were called up between 1967 and 1971: 9 in 1967/8, 11 in 1969, 9 in 1970 and 15 in 1971. All were posted to the RAADC.

Qualified doctors were called up between 1969 and 1971: three in 1969, 26 in 1970 and 31 in 1971. All were posted as Medical Officers to the RAAMC. They underwent infantry officer training

[2] Disclaimer: The numbers of National Servicemen in these specialist categories may be subject to future adjustment because the history now being researched has been dormant for at least 55 years. Officers and administrators who were active with record keeping in the 1965-75 period are likely to have passed on, and we are therefore sometimes unable to quantify, verify or elaborate upon the emerging facts, some of which have required much delving into records to be certain of their accuracy. To date, 178 have been confirmed in available documents.

(to 2Lt) at the School of Army Health at Healesville (SAH-H) together with the dentists and some of the other professionals. In this piece, we focus especially on those posted to the RAAMC and RAADC

Psychologists were posted to the AAPsyC. Pharmacists were posted to pharmaceutical positions, while others with medically relevant training were posted under Administrative and Technical, Hygiene, Science or Miscellaneous positions within the RAAMC and occasional other corps. Lawyers were posted to the AALC mainly as legal Officers. Many of these groups were trained through the Officer Training Unit (OTU), Scheyville.

Some teachers and engineers were also offered deferral. Their stories have been separately documented.

3. THE MEDICAL DOCTOR CALL-UPS.

3.1 The 1969 and 70 intakes of Nasho Doctors

Twenty-nine doctors entered the Army in these years after a deferral, having been transferred immediately after enlistment in their home state to 2 RTB Puckapunyal, Vic. After 2weeks as recruits at 2RTB, all underwent officer training as Officer Cadets at SAH-H to become 2nd Lieutenants in the RAAMC, and then undertook a course in Military Medicine before becoming Temporary Captains. Many served in Australia while a number received overseas postings: at least 11 in Vietnam and four in PNG.

3.2 The 1971 intake of Nasho doctors

In 1971, 31 recently graduated doctors enlisted and entered two weeks Recruit Training at 2 RTB Puckapunyal, Vic. Those enlisting outside Victoria were quickly transferred, sometimes via 1 RTB Kapooka, NSW or 3 TB Singleton, NSW to 2RTB. Officer training and eventual appointment as Temporary Captains in the RAAMC proceeded as with the previous intake.

These officer doctors received postings both within Australia and in overseas locations: four doctors served in PNG and at least one in Vietnam. Those posted to PNG mostly took over from Nasho doctors enlisted in the previous intake.

Due to the Australian Army's wind-down in Vietnam, which saw the vast majority of the combat troops withdrawn by October 1971, the need for doctors in South Vietnam was much reduced by the time that the 1971 Intake completed its training in April 1971. All that remained in Vietnam after December 1971 were two commissioned Nashos in the RAAMC – a Hygiene Officer and a Medical Officer.

3.3 Doctors' recollections of Training

Based on interviews of several Nasho professionals and examination of accessible source materials listed in Section 8, we can paint a picture of their experiences.

The following is drawn from the experiences of one medical Nasho who was part of the 1971 Call-up.

> "Those of us in Victoria enlisted at the Swan St Depot on 27 January 1971. We were bussed to 2 RTB Puckapunyal, and when recruits from other states had arrived, we were divided into two special platoons, each headed by a CMF Corporal and Lance Corporal. The two platoons were designated 21 Platoon and 22 Platoon. Subsequently, we learned that 2RTB consisted of 20 platoons which explained why we got the impression that we were indeed "to be seen but not heard" at 2RTB.
>
> "During the two weeks spent at Puckapunyal, recruit training was undertaken separately from the training of general recruits, but probably not particularly different in the terms of detail. We met with senior RAAMC officers on one occasion.
>
> "After two weeks at 2RTB, we were bussed (in old slow buses) to the SAH-H to commence the eight-week intensive and shortened infantry officer's course as Officer Cadets (13/71 RAAMC/RAADC Junior Officer Course).
>
> "The administrative offices of the SAH-H were situated in Summerleigh Lodge, which had been a guesthouse until 1951 with only limited capacity to accommodate Nashos. Consequently, Nashos were accommodated in purpose-built accommodation consisting of 2- and 4-bed canvas tents. As to be expected, the days were long and demanding, beginning early in the morning with cold showers and ending relatively late in the evening – surprisingly in the Officers' Mess as we were not yet officers. Learning how to march, salute and maintain a spotless uniform, as well as behave like officers, seemed to take at least as much time as learning military procedures and behaviours. Maintaining uniform up to Warrant Officer's standard was tricky. Army-issue underpants gaped at the front and chafed our legs; such concerned us more than the shine on a cap badge but only the latter was visible.
>
> "Infantry training exercises included intensive bush exercises around Mount St Leonard, some 20km north of Healesville, over several days, with mock battles led by experienced Vietnam Veterans. We dug trenches, fired blanks at the "enemy", patrolled through dense bush on moonless nights, and yet managed to avoid getting lost or detached from platoons despite our lack of familiarity with such conditions. We all realised how unfit we were.
>
> "We were told that the course covered all of the issues normally covered by infantry officer training in the 21-week course at the OTU and that it was expected to be very challenging for us to complete the program in just 8 weeks. Yet, we all graduated on 7 April 1971. On the following day we were promoted to the rank of 2nd Lieutenant (Probationary).
>
> "We officer doctors then underwent the four-week 4/71 Military Medicine course, which included elements of Tropical Medicine and Public Health of relevance to the military at times of peace and war. We were also taught how to conduct Army Medical Board assessments of soldiers. On 11 May, 1971, we were promoted to Temporary Captain (T/Capt).

One of the sources of information from past Nasho doctors and dentists – “21 Platoon” see Section 8 – provides recollections from doctors and dentists in the 1969-1971 intakes at SAH-H. Overall, these reflect the above comments but draw attention to other experiences as well.

A number recall the assessments that Nashos were subject to, so as ensure that they were fit for service as doctors in the RAAMC. These are variously recalled as being IQ, psychology and language skill tests. Ironically, some of the tests for doctors and dentists etc., were often conducted and supervised by Psychologists who were Nashos themselves. Those supervising the IQ tests were amazed that the 2-hour tests were often completed in 1h, and thought that those leaving after 1h had given up. However, finishing the IQ test early was not surprising, given that those being tested had university degrees.

It would be fair to say that most doctors were not supportive of war and during university years some had been involved in antiwar demonstrations. Some whose birthdate came out of the barrel managed to fail the initial medical. A proportion of those who did enlist felt somewhat conflicted but accepted the situation as an obligation. Despite these various perspectives, everyone got on with the business of completing their training.

Nonetheless, there was considerable cause for anxiety amongst those being called up. One doctor likened this to the “sword of Damocles” about to fall. For example, what would happen if they failed a year in their tertiary course - would they be busted to private? Would recruits aged 23-25 years really be tolerated and managed by staff used to training 20-year-olds?

For these Nashos, their vocational training was going to be delayed for the duration of their National Service as most medical vocational programs continue for 2-6 years after the internship. Although the law said that on discharge they were to be re-employed without penalty in seniority or loss of pay increments, for doctors this was impossible as one could not be returned to a position without the prior experience necessary for that position.

Furthermore, because of their age (around 25 years for most), a number were married with infant children. How were wives, some pregnant, going to manage while Nashos were training and in many cases in different states? Families missed them during training, and postings did not always suit the family. There was also going to be a reduction in expected income even though young doctors were not paid much in those days.

Nonetheless, almost everyone was grateful for the intense physical conditioning that was inherent in training.

3.4 Deployment of doctors after training

Postings were announced during training. After promotion to T/Capt, Medical Officers were dispersed to their postings. Those who were posted overseas often received interim postings at a headquarters or other installations in the various states, before departing. Two of the three doctors in the 1969 intake were dispatched to South Vietnam following officer training, with only a pre-embarkation leave period. As these skill groups were in short supply in the Army in the early years of this call-up, a few professionals were very quickly moved to where their skills were needed with minimal training..

One medical Nasho sent to PNG recalls: "After training, I was posted to Simpson Barracks at Yallambie, (commonly known as Watsonia Barracks) prior to posting to the Goldie River Training Depot in PNG, in October 1971. At Simpson Barracks, I undertook sick parades, discharge medicals and medical board assessments. The latter introduced me to the PULLHEEMS grading. These involved some recruits in training (especially those not coping with its demands), those serving locally and Vietnam Vets returning home. The effects of recruit training and war service were apparent on many who I examined.

"Subsequently, I was posted to PNG according to my wishes expressed to an RAAMC senior officer back at 2RTB. A medical mate who had gone through high school and university with me was also posted there – both of us with our wives and me with a 12-month-old daughter. On arrival at Goldie River, my main role was to conduct medical examinations on two intakes, each of 300 Pacific Islander (PI) recruits. I also cared for Army staff and local villagers with my wife who was trained in midwifery and cared for the local villagers. Medicine was vastly different from that in a Melbourne Hospital with diseases such as leprosy, malaria and far more severe measles and chicken pox than what we saw in Australia!

"Both myself and my wife learned a lot from our medical experiences in PNG. One of the important lessons was that substantial advances in health were possible to achieve by applying the principles of good hygiene, basic nutrition especially of infants, care of pregnant women, appropriate use of just a few main drugs (antibiotics and antimalarials), and vaccination. Well-trained PI medics and nurses would be able provide the simpler services, such that the few available nurses and doctors could concentrate on the more difficult things. PIs were receiving excellent training at Goldie River and within the Pacific Island Regiments. The RAP staff-sergeant and hygiene NCOs were excellent as trainers and organisers of staff and patients.

"These medical experiences in a developing country, together with the excitement of undertaking a research project describing the incidence of an enzyme deficiency in PIs that could relate to side-effects of commons drugs which led to the discovery of something new and meaningful, had me hooked. While I was eligible for discharge after 18 months service due to the change in government, I requested to remain and was approved to serve until November 1972.

"I saw first-hand the huge contribution that the Army was making to the nation of PNG. Its contributions were substantial: in education – numeracy and language, in skills training, in health services, in logistics, in communications and in organisation, as well as training of future leaders in the Army and in Government.

"Soon after I left, PNG gained independence and Michael Somare, who I had met at Army functions, became its first prime minister."

Recollections of others in their postings, especially in PNG and in South Vietnam, are detailed in the information source "21 Platoon". The following are extracted from the book and several interviews.

One doctor, who was amongst the first to be sent to South Vietnam, describes how he was viewed by regular serving soldiers as being an "upstart Captain" before they ever got to know him. Like the above doctor reporting on PNG, the medicine he saw was very different from what he was used to. Scorpion stings were common amongst those out on patrol. Malaria was not as common as he expected, probably due, he felt, to the heavily enforced regular intake of antimalarials (dapsone and paludrine). He became concerned that sexually transmitted diseases were becoming more common and difficult, resulting in his recommendation at times to confine leave to barracks. He was also concerned about soldiers' nutrition while on patrol was deteriorating. Carrying tinned rations made for a heavy pack and soldiers tended to lighten the load by discarding some of the more nutritious foods. He raised this as an issue and encouraged vitamin supplements. On a lighter note, he commented on entertainers who visited the troops on occasion from Australia. One evening he returned to find Johnny O'Keefe asleep on his bed.

Another was initially posted to a military hospital in Australia, where he received all the medevacs from South Vietnam. He describes patients with malaria, scrub typhus, dengue, histoplasmosis, hookworm, strongyloides and "every possible form of VD". He was eventually posted to South Vietnam where he found that because of all the moulds growing in the hootchies, he developed very severe asthma. Another doctor recalls having to treat a soldier with burns to his groin after spraying himself with fly spray to kill the fleas.

One doctor was posted to the Civil Affairs Unit in South Vietnam. Together with just a few supporting staff, he regularly visited 2-3 villages and saw 40-150 people in each village. He, like those also posted to PNG, had to learn Tropical medicine very quickly.

Overall doctors in South Vietnam were very busy dealing with the demands of battle, the inevitable civilian injuries, infectious diseases, and issues of troop morale. They comment on how important camaraderie between troops was essential to manage the demands that they faced.

Experiences of doctors posted to PNG varied considerably according to their posting. The main postings were to the two battalions of the Pacific Islands Regiment (PIR), Goldie River Training Depot, Igam Barracks at Lae and Murray Barracks HQ PNG. The problem created by malaria varied quite widely. Goldie River appointees saw relatively little malaria, perhaps due in part to the presence of a dry season there and that many soldiers were recruits in training who were carefully supervised. At 2PIR Moem Barracks at Wewak, malaria was significantly more problematic and drug-resistance was emerging. Support for local PIs in their villages and local hospitals was most demanding at 2PIR and Goldie River. The RMOs at both those sites recall visits to the Vanimo outstation west of Wewak. Fresh local lobster on the beach was a special treat when in Vanimo.

The 1970 MO appointed to Goldie River recalls how many recruits had left school many years earlier than year-12. Only two schools in PNG took students to year 12. What struck him was the large number of Nasho teachers there in jungle greens! He considered that there could not have been a better posting anywhere despite the workload. That MO conducted a research study into the frequency of syphilis contact in recruits. This resulted in a publication in the PNG Medical Journal. His successor also carried out a successful research project.

3.5 Effect on subsequent careers

The impact of National Service on the subsequent career of doctors was variable. Some indicate that it had little influence regardless of whether the time spent in National Service was positive or negative. Some continued on in the Army under a Short Service Commission (SSC) while some transferred to the Australian Staff Corps (ASC). For others, the experiences did shape elements of their subsequent career and rated their Nasho experiences as positive.

Despite the 18-24 month hiatus in training for medical Nashos, a major gap given that many specialities involved an uninterrupted 5-6 years of training following graduation, they got on with their training. Some were able to clarify their future options within medicine while others used the experiences to further their plans. Some in relatively quiet postings got on with their study and quickly passed different specialist exams after discharge. Yet sadly, at least one Nasho doctor reports great difficulty getting a subsequent hospital posting following discharge.

A Medical Nasho posted to PNG said:

> "My medical experiences in a developing country together with the excitement of undertaking a research project and discovering something new influenced the rest of my career. On discharge, I returned to my home city and took up a medical registrar's post at a major Melbourne hospital that allowed me to start specialist physician training. Fortunately, they remained committed to taking me on again despite missing two years of physician training. While in PNG, I realised that I wanted to be a physician (internist) with an academic element. Subsequently I progressed to being a Professor of Medicine involved in health services and research nationally and internationally. My National Service experiences positively influenced my career direction and choices in a major way.

Others, including several posted to Vietnam, had distinguished careers in medicine, including surgical specialities.

A Vietnam Vet pursued a distinguished career in Obstetrics and Gynaecology that extended for more than 30 years in the UK. Another reported being immature when entering officer training, went to South Vietnam, after discharge became a rural GP with the Vietnam experience giving him multiple skills. He reports that his Nasho experience "opened many doors," helped him become a resilient individual and enabled him to achieve things that he did not think would be possible. Subsequently he has been active in Legacy. He says "I really did win the lottery in 1965". For many other examples of how national service influenced future careers, see "21 Platoon".

3.6 PNG – transitioning to Independence

PNG was a nation in transition as those eight medical Nashos posted to PNG in 1970-1972 quickly found out. It was apparent that Australia was making a major contribution to PNG's evolution: achieving full sovereignty was a multi-stage process that culminated for PNG in its independence from Australia on 16 September 1975. The Australian Army was laying the foundations for a national PNG Army. Recollections of RMOs appointed to PNG reinforce this assertion.

The peaceful decolonialisation followed decades of administrative control by Australia over the combined territories of Papua and New Guinea. It went back as far as the German colonisation of New Guinea until WWI, following which the then League of Nations entrusted it to Australia. Similarly for Papua, which was a British mandate up to WWII. Subsequent key stages were as follows:

- **Administrative Union (1949):** The *Papua and New Guinea Act 1949* formally unified the Territory of Papua and the UN Trust Territory of New Guinea under a single Australian administration.
- **Self-Government (1973):** PNG achieved internal self-government on **1 December 1973**. Michael Somare, leader of the Pangu Pati, became the Chief Minister and a central figure in the push for full sovereignty.
- **Independence Day (1975):** Full independence was declared on **16 September 1975**. In a ceremony at Sir Hubert Murray Stadium in Port Moresby, the Australian flag was lowered and the new national flag of PNG was raised.
- **UN Membership:** Just weeks after achieving sovereignty, PNG joined the United Nations on **10 October 1975**.

Nasho doctors were in PNG during this transition, some met and even served with future leaders in PNG Army and Government. As reported above by one Nasho doctor in PNG, he saw the huge contribution that national servicemen as a part of the army in general, made to so much of PNG, and how the army linked with future politicians and trained emerging military leaders of the PNG Army.

4. THE DENTAL PROFESSIONAL CALL UPS

Enlistment after a deferral was also offered to those who had started their dental course when called up at age 20 years. Forty-four qualified dentists entered after a deferral, during the period 1967 to 1971: nine in 1967/8, 11 in 1969, nine in 1970 and 15 in 1971/2.

All were posted to the RAADC. Details of their initial recruit and officer training parallelled those of the doctors called up in that year. Having completed officer training at SAH-H, and being promoted to 2-Lt, they went to their postings in RAADC. Soon after, they were promoted to T/Capt.

At least four served in PNG and three in Vietnam.

In South Vietnam, dentists faced major dental challenges starting with caring for many young soldiers in the battle environment with the inherent challenges facing personal care.. In the general community, the rice diet and poor oral hygiene was associated with much dental decay and infected teeth.

One dentist in the 1970 intake started at 3TB soon after becoming T/Capt where he recalls dealing with hundreds of decayed and broken teeth beyond repair. Many required a full clearance of unsalvageable teeth. In the four months there, he was appreciative of the incredible experience

and was then unexpectedly posted to PNG. He worked in dental clinics in all the bases. For a short time he became Director General of Dental Services while his superior went on leave. Some years after discharge he left dentistry and became a qualified clinical psychologist in the Migrant Health Services. Of his National Service, he said it was all a valuable experience that he never regrets.

Several Nasho dentists report subsequent illustrious careers with at least one becoming an orthodontic surgeon, one a professor, and another who undertook a distinguished international professional career.

5. OTHER PROFESSIONAL CALL-UPS

It was not only doctors and dentists who were offered deferred enlistment, but also other professional groups.

Available records show that psychologists (15 – enlistment dates 1967-1971), pharmacists (14 – 1967-1971), and legally trained personnel (19 – 1968-1971), also went on to officer training. A further 11 Admin & Technical officers, four scientific officers, and 11 miscellaneous officers– all called-up between 1966 and 1971 – were posted to the RAAMC. In all, i.e. including doctors, approximately 100 professionals were posted to the RAAMC.

Those who were posted to the RAAMC – 14 Pharmacists, 11 Admin & Technical officers, four scientific officers, and 11 miscellaneous officers – received some of their officer training at SAH-H. However, it appears that in the early intakes of pharmacists, they first did officer training at OTU (Scheyville), followed by a six-week course at SAH-H. A number of pharmacists reported positive impacts on their careers although some of their postings were not busy.

An Adelaide graduate pharmacist enlisted in 1967 and was one of just a few of the early pharmacists who were able to advance to officer training. He graduated from OTU Scheyville and then completed a six week orientation course at SAH-H. He was then posted to the Army Dispensary at Karrakatta, Perth WA where he dispensed prescriptions for Army, Navy and Air Force personnel. National Service benefited his career as he became Manager Professional Services in a major pharmacy company and also received important ministerial appointments at state level.

One Pharmacist trained at SAH-H in 1970 and then spent most time posted to Perth at Dental HQ. He undertook Captain's exams and extended for a year in service having adjusted to National Service and benefiting subsequently from the experiences.

Another pharmacist called-up elected to join the ARA as the army was short of pharmacists. His experiences lead to a long career that profited from his experiences as a pharmacist in the military. This included a period in the RAAF and appointment to a key position in the Department of Veteran's Affairs. He concluded that his service in the Army "changed the direction of my life".

A scientific officer, who started with a degree in zoology, was in the 1969 intake. He felt his degree was a liability but accepted a SSC in the RAAMC as a Scientific Officer, given the need for more research on malaria. This was followed by a period at the Malaria Research Unit at Sydney

University followed by what he described as his most enjoyable training, as an officer at SAH-H. Subsequently, things did not go as he had hoped in army but after discharge, he spent an academic phase overseas in Tropical Medicine and later a senior academic post in Perth.

At this point we have relatively little information on the training of other Nasho professionals, which varied according to their skills and relevance to army priorities.

Psychologists, legal officers and several others in miscellaneous professional capacities underwent officer training at OTU Scheyville. They were posted across Australia with at least one Psych officer and two AALC officers serving in Vietnam.

It should also be noted that a substantial number of called-up teachers, likely several hundred, also experienced deferral. This enabled them to complete their degree and then undertake one year of classroom experience. There were several rotations to PNG, each consisting of 30-50 teachers. Initially, they received promotion to the rank of Temporary Sergeant. It appears that several might have progressed to officer training. They made substantial contributions to the education of Pacific Islanders (PI).

6. CONCLUSION, AND RECOGNITION, OF SERVICE

Those entering service prior to 1971 would have generally completed their two years of service prior to discharge.

This was not the case for those enlisting in 1971.

On 2 December 1972 the Whitlam Labor Party won the election and the new government, using the false and now discredited expedient of '*exceptional hardship*', discharged National Servicemen from the Army and passed the *National Service Termination Act* in 1973. The *Defence Legislation Amendment Act of 1992* repealed the *National Service Act 1951*.

For those enlisted in 1971, with a few exceptions detailed below, discharge took place on 26 July 1972 for those who commenced 27 January 1971, after serving for 18 months.

Several medicos requested to stay on for several months. This required formal approval from the Army. As examples, two doctors stayed on in PNG so as to be able to complete projects that they had instigated or were a part of.

Several others took on short term commissions. After fulfilling their National Service obligation, a few from each of the professions transferred to the Australian Regular Army usually under a Short Service Commission of five years. Several transferred to the Australian Staff Corps (in the Australian Regular Army) and 'served on',-rising to higher ranks.

Regardless of their exact length of service, those who enlisted in 1971 and completed their shortened term were discharged with the reason "Having completed the prescribed period of service in the ARAS (NS)".

All Nashos, including medicos, and those from the other professions, were notionally transferred on discharge to the Australian Regular Army Reserve for three years, although nothing more than keeping ones address up-to-date, was required.

6.1 Medals

A Certificate of Service to one of the medical Nashos issued in February 1973 by the Central Army Records Office, said that no decorations, medals or service badges were given. That was true at that time. However, subsequently, medals have been awarded although it took almost 30 years to do so.

Nashos are eligible for two medals.

The Anniversary of National Service 1951-1972 Medal (ANSM) was officially established on October 10, in 2001 to recognise those who completed their obligation under the two National Service schemes that had operated in Australia between 1951 and 1972.

The Australian Defence Medal (ADM) was established on March 20, to recognise Australian Defence Force Regular and Reserve personnel who have demonstrated their commitment and contribution to the nation by serving for the initial enlistment period (Nashos), or 4 years, whichever is lesser.

A third medal, the Australian Service Medal 1945-75 was established on February 22, 1995. It was awarded for service in, or in connection with declared non-warlike operations during the period commencing on 3 September 1945 and ending on 16 September 1975. It became eligible for Nashos who had served overseas (minimum of 30 days) in countries such as PNG. In addition, clasps indicating individual overseas postings were affixed to the ribbon.

Some Nashos would be unaware of their eligibility for these medals, according to where they served.

7. THE CONTRIBUTIONS OF THESE "FORGOTTEN" NASHOS

There is no doubt that the tertiary institution qualified professionals were a unique group entering the army as National Servicemen. They clearly posed challenges to training schools but in turn, they provided badly needed skills given the demands of the Vietnam War.

In an address given to the graduates of the 1/70 RAAMC/RAADC officers course by Major John Taske, a Nasho trained in the SAS and then appointed as Senior Instructor at SAH-H, he said about those professionals who underwent training at SAH-H:

> "You gave it all. … what a magnificent bunch you were … You were magnificent. You were a classic example of the saying *The finest steel is forged in the hottest fire*. "

These professional Nashos, together with all other Nashos, have made major contributions to the Australian Army. This quite small group of some 180 young professional men contributed in numerous ways, not just within their fields of expertise, but through their commitment to effectiveness of the Army's functionality, whether it be training, defence, or community support. Doctors, dentists, psychologists, pharmacists and other health professionals, together with lawyers were vital when fulfilling their professional roles in maintaining the health and well-being of many soldiers as well as the functioning of the Army, and where circumstances demanded. In a few cases this included members of their families.

But the contributions of those posted overseas, went beyond the Army itself and Australians in general. Those who served in Vietnam gave vital support in their professional roles to all who needed it. Many soldiers who they cared for would have been comforted, many enabled to return to service, and many able to return home as a result. In PNG, it was about supporting a nation in transition and assisting in laying the foundation for a national Army. As one Nasho medico posted to PNG said:

> "I saw the huge contribution that the Australian Army was making to what became the sovereign nation of PNG. Its contributions were substantial: Education – numeracy, language, skills training, health services, logistics, communications and organisation, as well as training of future leaders in the military and in Government. While I was there in 1971 and 1972, it was at the time when PNG was transitioning from being an Australian Territory to an independent self-governing nation. A number of the PI officers of my time later became leaders in the PNG Army and Government."

The fact of deferred intake of such a large group of professionals, as well as their stories and contributions, have not been told. Here we document their recruitment and training, together with the contributions and experiences of a few, to ensure that this chapter in history is not overlooked.

8. SOURCES OF INFORMATION

a) Service record and personal papers: of Prof Graeme P Young AM, and Dr Norman Forster, both past Captains in the RAAMC and part of the 1/71 medical intake
b) The Department of Veterans Affairs website: https://www.defence.gov.au/
c) NATIONAL SERVICE IN AUSTRALIA. A BRIEF HISTORY BY Allen Callaghan FNSA.
d) A Brief History of the School of Army Health by Lt Col Barry Morgan
e) Major Neil Leckie, OAM RFD (Ret'd), Editor, The Scheyvillian, Newsletter of The Officer Training Unit Association.
    a. The Corps List of Officers, 1967 to 1975 (normally published on 31 March each year).
    b. The Active List 1970 (published 31 July 1970)
f) Private Peter Norman FNSA, National Secretary, National Servicemen's Association of Australia.
g) Major Ron Brandy, President, National Servicemen's Association of Australia.

h) Mountain Views Star Mail of March 2022
i) GUARDING THE PERIPHERY – The Australian Army in Papua New Guinea, 1951-75: (Tristan Moss 2017 Cambridge University Press),
j) 21 Platoon. Health Professional Conscripts in the Australian Army: 1969-1971. Edited by Michael Carr. Private publication lodged with the Australian War Memorial Archives. 285pp, 2021

ADDENDIX: GAPS IN THE HISTORICAL RECORD

Various historical records fail to mention the history of medical National Service conscripts. These gaps are acknowledged by M Carr (see source j) in Section 8 above.

a) The DVA website summarising the second scheme of National Service, mentions the situation as it applied to teachers but ignores these professional Nashos.
b) Their service was also overlooked in NATIONAL SERVICE IN AUSTRALIA. A BRIEF HISTORY BY Allen Callaghan FNSA.
c) A Brief History of the School of Army Health by Lt Col Barry Morgan makes little mention of activities conducted in the various locations of the years of the Army School of Health during the second National Service Scheme, and certainly makes no reference to training of Nasho medicos at SAH-H.
d) There is no reference to National Service medical, dental and other graduate professionals (except for teachers) in the contemporary and authoritative book "GUARDING THE PERIPHERY – The Australian Army in Papua New Guinea, 1951-75:(Tristan Moss 2017 Cambridge University Press).
This is an excellent book but the only mention this book makes of Nashos in PNG was to make reference to the 300 other ranks Nasho teachers, who were also offered deferral of enlistment to allow them to finish their degrees and receive classroom teaching before being posted to PNG.

e) "Little by Little". Michael Tyquin. This provides a history of the RAAMC. M Carr reports that Tyquin said very little about individual medical personnel involved in the Vietnam war. Another senior officer who alerted Carr to Tyquin's book said that the RAAMC never used National Service doctors in the Vietnam War!

An article by a Bryn Jones in the Mountain Views Star Mail of March 2022 refers to the purchase and use of the SAH-H and its training of "regular soldiers and ***national servicemen***, students from nursing and dental corps and trainees from the Pacific Islands and Malaysia". This is so far the only place the author has found Nashos mentioned in relation to the SAH-H. It says "Inside the main building and nearby garages a small hospital with dental and x-ray facilities, a laboratory and enough classrooms for up to 200 students were created". The author of this report recalls this and remembers two days in the small "hospital" with an attack of bronchitis suffered while on an overnight exercise. That article briefly describes some activities at the SAH-H, but it does not specially refer to doctors or dentists. To quote the article:

> "Students were taught most of their basic medical training in the surrounding bush. They 'lived' under canvas to study the running of a field casualty station, and conditions were as realistic as possible, with 'battle injuries' simulated by synthetic 'wounds' and lifelike models. Even large-scale displays of mosquitoes and flies were set up around the grounds for students studying sanitation and infection control. Most of the medical staff who went to Vietnam, at some stage, went through training at Healesville."

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GLOSSARY

MO – Medical Officer

PNG – Papua New Guinea

RAADC – Royal Australian Army Dental Corps

RAAMC - Royal Australian Army Medical Corps

1RTB – 1 Recruit Training Battalion Kapooka

2RTB - 2 Recruit Training Battalion Puckapunyal

3TB - 3 Training Battalion Singleton

SAH-H– School of Army Health at Healesville

AA Psych C – Australian Army Psychology Corps

AALC - Australian Army Legal Corps

Nasho – National Serviceman

NSAA – National Servicemen's Association of Australia

OTU – Officer Training Unit, Scheyville

PIR – Pacific Islands Regiment

PI – Pacific Islander

SSC – Short Service Commission

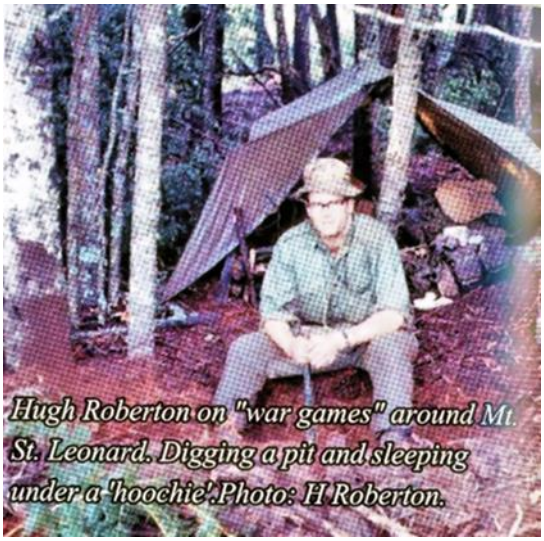
ASC – Australian Staff Corps

PHOTOGRAPHS

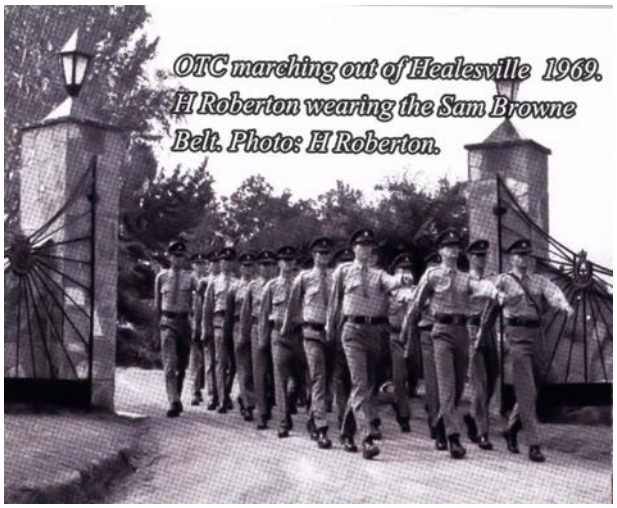
NOTE: G Young and H Roberton provided these photographs. Some are protected by copyright and may not be used outside of private use without permission of the authors.

School of Army Health Healesville

Officer-Cadet at Healesville School of Army Health outside accommodation (1971).



Officer-Cadet training exercise at Mt St Leonard while at School of Army Health Healesville (1969).



Passing-Out Parades at Healesville School of Army Health, 1/71 and 1/69 Officer-Cadet courses.

PNG – Port Moresby and Goldie River Training Depot (1971/2)

Recruits on parade at Goldie River Training Depot PNG

"Education centre" at the village close to RAP at Goldie River Training Depot

Regimental Aid Post at Goldie River Training Depot

Interior of RAP at Goldie River Training Depot

Papua and New Guinea House of Assembly
Port Moresby

Students in Port Moresby at a cultural festival

PNG – Wewak and the north coast

On parade at Moem Barracks, 2PIR, Wewak

PI families watching parade and festivities at Moem Barracks, 2PIR, Wewak

BBQ at sunset at Moem Barracks, 2PIR, Wewak

WWII airfield with destroyed aircraft, north cost of PNG (west of Wewak)

Japanese WWII memorial at Wewak

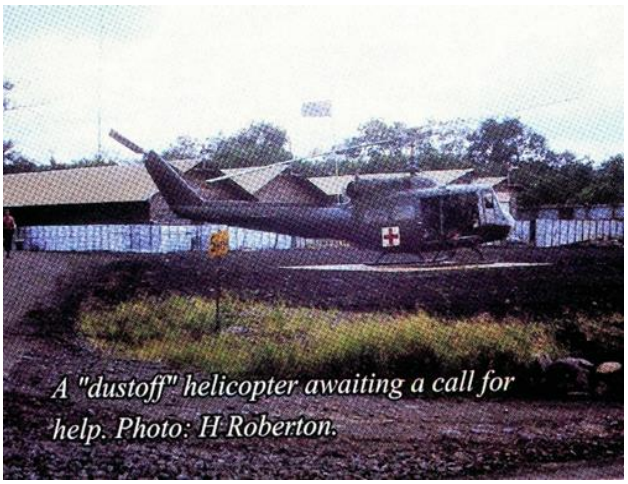
Moem Barracks, 2PIR Wewak

PNG - Highlands

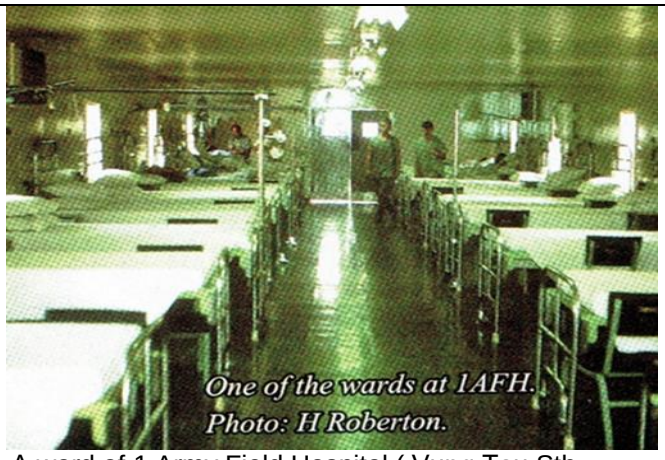
PNG Highland inhabitants

A woman's work was never done.

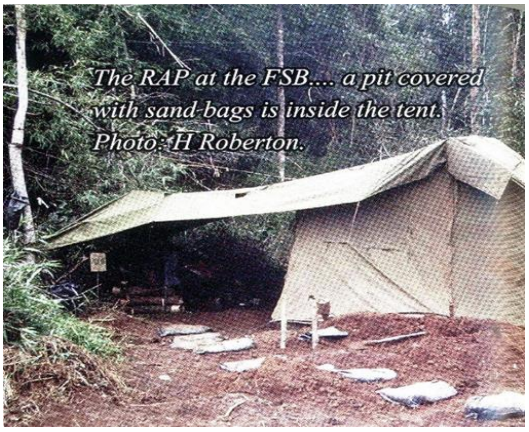
South Vietnam



South Vietnam – helicopter ready to collect casualties



A ward of 1 Army Field Hospital (Vung Tau Sth Vietnam) where most medical staff served



A Regimental Aid Post near the action (Sth Vietnam)

Unveiled by CAPT Bob Manning OAM (Retd) at Rocky Creek War Memorial Park, Tolga FNQ

Typical subsistence farming scene (South Vietnam)