Dedication

“And whatever you do in word or deed, do all in the name of the Lord Jesus, giving thanks to God the Father through Him.” Colossians 3:17
Acknowledgements

I have accrued many debts in the course of completing this project.

First, I would like to thank the Standifer family for trusting the University of New Orleans, and by extension myself, with their father’s story. Once deposited in the Louisiana Collection of the Earl K. Long Library, the Standifer Papers will be protected and available for generations to come.

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Abstract

The American GI’s experience in hospital during World War II is absent from official military histories, scholarly works, and oral history collections. This thesis is a case study of Leon Standifer, American infantryman who served in Northern France during the final year of the war and the American occupation of Bavaria, whose military service was marked by periods of protracted hospitalization. Comparing the goals and procedures of the US Army medical department to Standifer’s experience offers the reader a rare glimpse of WWII military hospital life while chronicling one soldier’s journey from willing obedience to subversive action.

A careful reading of Standifer’s wartime correspondence in conjunction with his published and unpublished writings, secondary source material, and military records suggest that while isolated in the hospital, after killing and experiencing the death of his comrades, Standifer began to leverage his knowledge of the military medical system to remain out of combat.

Keywords: World War II (1939-1945); European Theatre of War, US Military Medicine; US Military Hospitals; Soldiers Correspondence; Soldiers Memoirs; Soldiers Personal Narrative; Soldiers Wounding; Replacement Depots
In the course of World War Two, the Surgeon General’s Record shows that 723,560 men were wounded and roughly eighty percent of those men were hospitalized. Hospitalization impacted the character and duration of the soldier’s war experience, and in some cases, wounding or illness permanently shaped the soldier’s life after the war. And yet, the personal experience of the wounded and ill American combat soldier remains absent from official military records, academic accounts, and, sadly, even many oral history collections.

This thesis suggests that scholars pursue personal narratives and wartime correspondence to include the voice of the convalescing G.I. in future historical analysis. Personal narrative and correspondence are particularly impactful because they can reveal aspects of military healthcare that other documents cannot. The safety of the hospital environment encouraged some patients to reflect on their war experience, and this process of reflection is sometimes captured in letters soldiers wrote home. While individual testimony reveals a single person’s experience within a certain moment in time, when examined chronologically, the narrator’s words may reveal how his reactions and perceptions have evolved over time.

Leon Standifer wrote to his father, mother, and younger sister throughout his war experience. Standifer’s longest and most prolific letters were written from hospital. In these letters he often commented on the staff, medical protocol and quality of care, and associated institutions, including the Red Cross. He speculated about the duration of his hospital stays and the advantages of being far removed from the front lines. Standifer’s letters in combination with

1 John Lada and Frank A. Reister, Medical Department of the United States Army: Medical Statistics in World War II (Washington DC: Office of the Surgeon General, Department of the Army, 1975) 4.

his Memoirs, Not in Vain and Binding Up the Wounds, offer a rare glimpse into WWII military medicine and hospital life from the patient’s perspective.

In 1941, the year America declared war on Japan, Leonidas Clemet Standifer was a bright, gangly youth of sixteen. His family lived in Clinton, Mississippi. The majority of Clinton’s residents were employed by the Mississippi Baptist Convention or by Mississippi College. Standifer’s father coached the college football team. In his memoir, Not in Vain, Standifer described his family as “Deep South,” clannish people of Scotch-Irish heritage who clung to the Celtic-warrior tradition. Standifer’s male dominated social life revolved around Boy Scouts and the all-male Baptist Young People’s Union: “Training for Church Leadership.” Now that America was officially at war, both organizations adapted their curriculum to include discussion of justified killing, courage in the face of death, and service to God and country.3

In 1943, when the army began drafting 18-year-olds, none of the draft-age young men in Clinton waited to be drafted. Some enlisted because they were enthusiastic to join the war, but most did so because volunteering offered some degree of control. Volunteers were allowed to choose which branch of the military they entered. Introspective, poetry-reading Standifer was not the type to dream of being a marine or a paratrooper, positions that would involve direct, heavy combat. He was grateful when he received an acceptance letter from the Army Special Training Program (ASTP).4 The ASTP was designed to subsidize low university enrollment while


4 Leon Standifer, Not in Vain, 32-33; Standifer’s ASTP Classification, Fort Benning, October 13, 1943. Folder 4, Box 5, Leon Standifer Papers. The Standifer Papers are temporarily housed in the University of New Orleans’s Center Austria, awaiting relocation to the Earl K. Long Library, Louisiana Collection, University New Orleans Lakefront Campus (hereafter cited as SP).
producing talent in the critical military fields of engineering, language, and medicine. While every draftee was considered as candidate for the program, admission required a high school diploma and a qualifying IQ score. Candidates then completed basic training and about a year of university classes before joining the war effort. Crucially for Standifer, this would mean that he would be significantly less likely to see direct combat.⁵

The ASTP recruits including Standifer arrived at Fort Benning November 1943 expecting to receive “Mickey Mouse” basic training. Standifer affectionately referred to Fort Benning as “Benning’s School for Boys.”⁶ Instead, their infantry instructors at Fort Benning put them through a thorough immersion in battle tactics and intensive physical training. This training became vital to their survival, because February 18, 1944, one week after Standifer was assigned to the Engineering Department at the University of Arkansas, the army announced that the program was being severely reduced. Leading up to D-Day, in expectation of heavy casualties, the army decided it needed more bodies than brains, and 110,000 ASTP men were transferred to the infantry.⁷

To Standifer and his fellow ASTP members, this meant that the security and status of riding out the war in a college classroom was suddenly and unexpectedly stripped away. Phone and telegraph lines were flooded with frightened boys calling home. General pandemonium was contained with the threat of court martial. The ASTP recruits, now infantrymen, spent countless


⁷ For a more detailed explanation of why the ASTP program was cut, see Keefer, *Scholars in Foxholes*, 123-141.
hours discussing the possibility of death and whether they would be able to kill. While in basic training at Fort Benning, Standifer had been isolated with a high fever for two weeks. He was held back to make-up those weeks of training with the result that he was separated from the ASTP men he had joined with and continued his training at Camp McCain with the Ninety-Fourth Division, 301st Infantry Regiment, Company "K", 3rd Platoon before being deployed to Lorient, France.\textsuperscript{8}

Though the US military has studied the subject of WWII medical healthcare at length, publishing fifteen volumes in its series \textit{The Medical Department of the United States in World War II}, covering topics such as the training of medical professionals, transportation of wounded and medical supplies, military psychiatry, convalescence hospitals, and medical advances made during the war, the soldier’s hospital experience is strikingly absent from this material.\textsuperscript{9} The United States Army’s Center of Medical History has also produced a number of supplemental histories and compilations of medical statistics intended to boost the medical department’s ability to sustain the strength of the Army in wartime.\textsuperscript{10}

However, this thesis will show, that statistics can only provide a narrow understanding of the soldier’s hospitalization experience. The Army Research Branch compiled invaluable

\textsuperscript{8} Leon Standifer, Letter to his parents, Fort Benning, Sunday. Folder43, Box 1, SP; Leon Standifer, Letter to his parents, Tuesday Night. Folder 14, Box 1, SP; Leon Standifer, Letter to his parents, Fort Benning, Wednesday Night (October 29th). Folder 15, Box 1, SP.


statistical evidence by conducting surveys of broad swaths of military men in both theaters of operations during and immediately after the war. The volume of responses from noncommissioned men offers the reader a partial understanding of what the average combat soldier thought and experienced. Survey writer Robin M. Williams wrote, “In the absence of surveys we would have no adequate way of appraising the degree to which observational descriptions were generalizable.” But the survey also reduce the individual to a number in a column. Statistics neither account for abnormalities nor for individual agency, including how the soldier-patient might have influenced the duration and effectiveness of his hospital stay. Nor can they illuminate the evolving thoughts and emotions of the patient, recently removed from combat and the support of his brothers in arms to the strange, if soothing, hospital environment.

Since the 1980s, a number of medics, doctors and nurses have published their memoirs, diaries, and personal narratives. While these accounts offer compelling and detailed descriptions of military hospital life, they represent the thoughts of the healers, those in positions of power and authority, and they suffer from a lack of historical context or analysis. Furthermore, these published memoirs and diaries tend to showcase only the most exciting examples of military healthcare. For instance, the private letters of Dr. Lawrence D. Collin who performed hundreds of gas-gangrene amputations have been published. Robert Franklin, a medic in the 45th Infantry Division, was one of the first medics to publish his memoirs, recounting his experience as a healer in some of the bloodiest fighting from the Mediterranean to Germany. While these two


examples offer insight into medical practices, hospital conditions, and the enforcement of military protocol, they cannot give the reader an understanding of the patient’s experience. World War II nurses have attracted considerably more attention from historians in recent years, as is evident by the plethora of books and articles devoted to the training, influence, and sacrifice of military and Red Cross nurses; but they focus on the experience and perception of the female nurse, again neglecting the experience of the patient.¹³

Albert E. Cowdrey offers one of the only overviews of American military medicine during WWII in his book *Fighting for Life*.¹⁴ Though Cowdrey peppers his account with the personal narratives of several doctors and medics, he fails to include the experience of the wounded. When remarking on individual suffering, Cowdrey excludes the personal words and experiences of wounded and ill soldiers. Few scholarly works claiming to capture the GI’s experience during the war even have a chapter on medical care. While the themes of trench foot, dysentery, battle wounds, and death are prominent, the authors rarely address how such medical conditions were treated or how they impacted the duration of the soldier’s time over seas, where he served and in what capacity.

The National World War II Museum in New Orleans, Louisiana, has compiled one of the largest collections of WWII oral histories in the United States. Over 12,000 interviews with US military personnel can be found on the museum’s website. Of those, 258 interviews include a direct reference to “being wounded” or “hospital stays.” Unfortunately, the interviewers


regularly squander opportunities to question the men about their experience in US military hospitals overseas. For example, Robert Kelso, a gunman in an armored field artillery battalion, pauses after stating that he was evacuated to a field hospital, leaving the interviewer opportunity to ask a follow-up question about Kelso’s experience in the hospital. In the pause, the interviewer chooses to ask him to name the area where he was wounded, a fact he easily could have found by looking up Kelso’s military record or that of his unit. Another interviewee, Robert Williams, was hospitalized for over six months for shell shock. Despite Williams’s remarks that he “could remember everything that was going on” in the hospital, the interviewer fails to question Williams about the months he spent convalescing, missing a meaningful part of Williams’s war experience. From these snatches of conversation, the veterans seem willing to talk about their experiences in hospital. The interviewers simply do not question them. Because of this, the opportunity to hear from the men themselves about a significant aspect of their war experience has been lost. As the number of WWII veterans dwindles, the opportunity to correct this gap in the narrative is slipping away.

If as has been established, the personal experience of the wounded and ill remains absent from the available records, then scholars should consider studying the words of the American GI preserved in wartime correspondence and personal narratives. In order to effectively utilize personal narrative in historical research, the researcher must first acknowledge the source’s limitations and develop methods to overcome them.

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Valerie Yow, an authority on the use of oral history as historical source material, is quick to acknowledge the limitations of personal narrative. She notes that personal narrative can be “narrow, idiosyncratic, or ethnocentric,” and that the historian must never be tempted to make generalizations based on the account of one individual.\(^\text{17}\) In particular, memoirs are subject to retrospection and legacy formation. However, Yow concludes that official, written documents are subject to some of the same limitations, and are not intrinsically more reliable than oral histories or personal correspondence.

Despite the limitations of personal narrative, as Barbara Walker writes in reference to the use of Soviet memoir as historical source material, some sources “are far too rich in historical nuance, far too valuable to our understanding of the period to be dismissed; professional historians need rather to consider how to understand them.”\(^\text{18}\) Personal narrative reflects how the individual reacts to and interprets life circumstances. While individual testimony reveals a single person’s experience within a certain moment in time, when examined chronologically, the narrator’s words may reveal how his reactions and perceptions have evolved over time through the process of writing and rewriting.\(^\text{19}\)

Meaning can be derived from silences, exaggeration, contradiction, and even outright lies embedded within personal narrative. In his article “Not Forgotten,” Kenneth R. Janken suggests that when a narrative diverts from “truth,” which Janken defines as deviation from “historical

\(^{17}\) The work of Peter Karsten and the findings of the Army Research Branch suggest that Standifer’s perspective as an ASTP recruit serving in the infantry may be class biased. Peter Karsten, *Understanding World War II*, 76-85.


\(^{19}\) Yow, *Recording Oral History*, 13,15.
record of actual events,” the inaccuracies and exaggeration may reveal a person’s motivation and understanding of his or her own involvement in historical events. Silences or exaggeration are intentional choices made by the author to convey some meaning to the reader, and help to explain how the author understands his own actions.20

The trauma of war also places constraints on the interpretation of wartime writings. In Diverting the Gaze, Carol Acton suggests that “war cannot entirely be seen” nor written about. War is so horrible that the mind may “erase and replace” certain aspects of what the eye sees. Acton refers to this process as “concealing and rewriting.” This principal cannot be avoided when analyzing wartime correspondence.21 In his correspondence, the soldier may conceal the truth of a traumatic experience because he cannot process the horror of what he has experienced. In this case, it may be helpful for the sake of clarity, to compare what the soldier wrote at the time of the traumatic event to what he said about the event later in life and the official historic record.

The use of correspondence as historical source material has one additional limitation, that the author’s intended influences affects how he expresses himself. For example, the majority of American soldiers were young and unmarried. In their letters home to their parents, many soldiers may have been unwilling to worry their loved ones and so suggested that they were safer and less miserable than they really were. The Finnish team, Ville Kivimaki and Tuomas Tepara, have done some recent work in the area of how personal relationships affected what soldiers


21 Carol Acton, Diverting the Gaze: The Unseen Text in Women’s War Writing,” College Literature 31, no. 2 (Sprinker, 2004): 58,61.
included in their letters home, and how they expressed themselves. *War of Hearts* focuses on what they term “positive” emotions of war that motivated young men to fight: the soldier’s desire to protect, serve, and sacrifice. Kivimaki and Tepara suggest that women on the home front, ever present in the minds of the soldier, provided the second-half of masculinity, giving both life and war meaning. Men were fighting to protect their wives, mothers, and sisters who embodied purity, home, and hope for the future. The authors pay particular attention to the mother-son relationship. Since most service men were unmarried, their closest female relationships were with their mothers. A soldier’s attachment to his mother may be evident in his correspondence, which may contain repeated admonitions to his mother not to worry because he is performing his duty, taking care of his health, and is not in real danger. Concern for his mother may also color how the soldier writes about death, danger, suffering, and romantic relationships. All of these factors must be kept in mind when considering the correspondence of the unmarried, eighteen to twenty year old Leon Standifer.

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Figure 1: Leon Standifer Portrait, 1943, Folder 13, Box 5, SP.
Leon Standifer at War

On August 6, 1944, Standifer arrived in the European Theatre of War, 61 days after the Normandy invasion. Standifer served as a scout in the Ninety-Fourth Infantry Division, 301st Infantry Regiment, Company "K", 3rd Platoon. Company "K"’s transition into combat was slow. The company was assigned to a relatively quiet area in Lorient, France. Their task was to monitor the movements of a few thousand German troops defending a submarine base and ensure that they did not try to break out. Standifer referred to his time in Lorient as, “playing nurse maid to 25,000 Germans.” Standifer’s letters and memoirs from this period are fairly uneventful: the monotony of keeping watch over sedentary German troops was punctuated by brief but terrifying night-time scouting expeditions. Standifer and his platoon mates were still teenagers. They entertained themselves by going swimming in a nearby creek and snacking on green apples. Standifer was not exposed to heavy, continuous combat while stationed in Lorient.

On December 8, 1944, Company "K" was ordered to make an early morning raid on a German-controlled concrete bunker at Etel. This was 3rd platoon’s first attack. Hunched behind a low stone wall, Standifer and his comrades awaited the end of the American artillery barrage and the command to move forward. The command came, but before he could fire his rifle, Standifer was wounded in the right arm and left leg, most likely by friendly fire. The unit’s medic quickly inspected Standifer, cutting away most of Standifer’s left pant leg revealing where a bullet had passed cleanly through the thigh. A fragment of a tracer bullet had lodged itself in his upper right arm. The medic applied sulfa powder and bandaged Standifer’s arm and leg. The medic was the


24 Leon C. Standifer, *Not in Vain*, 114: Leon Standifer, Letter to his parents, Rennes, France (Hospital), December 31, 1944. Folder 52, Box 2, SP.
first to respond to the soldier's cry for help. Ideally, medics were well trained in basic first aid, but more often than not, medics were rushed through training and arrived on the battlefield with very little practical experience. The medic was responsible for stopping profuse bleeding, stabilizing bones, and relieving intense pain. Often, as in Standifer's case, this consisted of applying sulfa powder and a bandage.\textsuperscript{25}

Unable to hold his rifle or walk without assistance, Standifer remained motionless behind the stone wall, hoping that the sounds of destruction he heard were the sounds of Company "K" capturing the bunker. Once the bunker was secured, two friends escorted Standifer off the hill to a nearby aid station. After receiving blood plasma, Standifer was transferred to a field hospital. As Standifer recalled in a lecture many years later, “I spent three months expecting, hoping, to be wounded… I was ecstatic.”\textsuperscript{26} A combination of whiskey and relief to be leaving combat made Standifer overly talkative until he was given a strong anesthetic that knocked him out for the next 24 hours.

The objective of the US Army medical department was to maintain the strength of the military. In 1951, WWII physician and American Medical Association board member, Richard L. Meiling wrote that, “The basic reason for the existence of the military medical services is to provide support for the men who fight.”\textsuperscript{27} The Army Medical Department accomplished this by, first, creating and enforcing preventative medical care to keep soldiers healthy, and secondly, by


\textsuperscript{26} Leon Standifer, \textit{Soldiering}, Draft of a Lecture given at the University of New Orleans, 2000. Folder 7, Box 12, SP.

\textsuperscript{27} Richard L. Meiling. “Medical Care for the Members of the Armed Services,” \textit{Annals of the American Academy of Political and Social Science} (January 1951), 93-98.
healing wounded or ill soldiers and returning them to duty.²⁸ Patients were not expected to make a full recovery during their hospital stay. The intent was to heal men enough so that they could return to active duty and to do so in hospitals close to the front lines so that soldiers could return quickly, with minimal travel time.²⁹ In the interests of keeping as many soldiers active as possible, American Colonel Edward D. Churchill, former professor of medicine at Harvard, developed levels of evacuation from combat to mirror how the human body heals.³⁰

Initial, life-preserving surgery was performed in the tent of a field hospital, with the intent of staunching bleeding and preventing infection. Standifer’s memoirs suggest that he underwent surgery almost immediately after arriving at the field hospital.³¹ Once he awoke from the anesthetic, a nurse explained to him that surgeons had removed shrapnel from his leg, but bits of a shattered, plastic tracer bullet, which the doctors did not consider harmful, had not been removed from his arm. In a letter to his parents, Standifer drew an oval the size of a dime representing the size of the tracer bullet still in his arm, “It’s just a little piece… Still, I don’t think it makes a nice souvenir.”³²

Ideally, the patient would reach a general hospital 4-10 days after being wounded, at which point doctors determined that the debridling, or cleaning, of wounds combined with reparative surgery, the administration of whole blood, and the wonder drug, penicillin, were most

²⁸ Meiling, *Medical Care for Members of the Armer Services*, 93.


³² Leon Standifer, V-mail to his parents, Rennes, France (Hospital), December 27, 1944. Folder 51, Box 2, SP.
effective. Although this does not seem to have happened in Standifer’s case, surgeons in Field Hospitals often left wounds open because closing a contaminated wound could cause an infection, more dangerous than the original wound had been. The final stage of the healing process, reconstructive or cosmetic surgery and rehabilitation, was usually completed in the United States or in the Mediterranean theatre. Patients receiving this final stage of care were usually deemed unfit to return to combat and therefore it was unnecessary to treat them near the combat area.33

Field hospital attending physicians were also responsible for sorting men according to the extent of their wounds, determining how much recovery time each man required. Lightly wounded men requiring less than four days of care remained at the dispensary or field hospital so that they could be returned to their unit as soon as possible. If a doctor thought a soldier would be ready to return to active duty in less than thirty days, that man would be transferred to a nearby station hospital. Men in critical condition, requiring more than thirty days of care, were transported via air lift or cross channel shipping to larger, less crowded general hospitals in Britain.34

Army medical statistics determined that most lightly wounded or diseased men recovered in less than thirty days. Diseased men remained non-effective or excused from full duty for medical reasons, an average of nineteen days and wounded men remained non-effective for 118 days. Overall, the average non-effective rate in the European theatre was twenty-three days. The

33 Cowdrey, Fighting for Life, 173.

limit of thirty days in hospital on the Continent and 180 days in the theatre exceeded the average length of stay. The policy sustained the strength of the Army by keeping men near to the front lines in general hospitals in France, from which they were able to return to combat quickly, with a minimal amount of travel time.\footnote{John Lada and Frank A. Reister, \textit{Medical Statistics in World War II} (Washington: Office of the Surgeon General, Dept. of the Army, 1976) 12.} After surgery, the doctor at Etel determined that Standifer required several weeks of recovery in order to be useful in combat.
Figure 2: Map of Standifer’s Hospitalization, created by Lauren Laguna, 2018.
Standifer was transferred to the 127th General Hospital in Rennes, France, staffed by medical personnel from the University of Texas Hospital. This was because the US Army had entered World War II with only five medical units. All additional medical crews were sponsored by civilian medical teams from America’s universities and hospitals. The result was that most US troops benefited from the care of highly skilled professionals working in unified experienced.

Nurse Georgia Yeager was among the 127th’s seasoned medical staff. Standifer described his nurse as a cheerful, petite woman who spoke in a comforting Texas drawl. Besides administering nauseating sulfa pills and a painful shot of penicillin every two hours to combat infection, Nurse Yeager trimmed Standifer’s fingernails, which she compared to claws, and arranged to have a French barber cut his hair.

The abrupt transition from life on line in a rifle company to the warm, clean environment in the Rennes hospital was jarring for Standifer. He found the attention of his nurse particularly distressing. Nurse Yeager’s maternal attitude and apparent pride in Standifer confused him. While safe in the hospital, with all of his immediate needs met, Standifer had time to reflect on the contradictions between his life and his nurse’s. As an infantryman, he was expected to destroy life while Nurse Yeager’s goal was to preserve life. In his first memoir, Not in Vain, Standifer recalled his internal turmoil:

Out there on line our lives had seemed reasonable. Within the rules of war we killed and were killed, maimed and were maimed. We trusted almost no one and stripped equipment from the dead and nearly dead. The contrast of that life with

36 Standifer, Not in Vain, 187.
37 Cowdrey, Fighting for Life, 19.
38 Standifer, Not in Vain, 188.
39 Standifer, Not in Vain, 189.
the clean, cheerful, caring world of Nurse Yeager made me see that I was dirty and crude. I wasn’t her kind of people. She shouldn’t have to associate with animals like me. But she did, and actually seemed proud of me.\footnote{Standifer, \textit{Not in Vain}, 189.}

Standifer’s letters from this period suggest that his perception of himself and his role in combat was confused indefinite. While at Rennes, Standifer was interviewed by a journalist who “didn’t really lie but he did choose the more colorful words.” Standifer wrote to his parents anxious that the fanciful story by the journalist, in which the journalist wrote falsely that Standifer had been wounded killing three Germans single-handedly, should not be printed in his hometown newspaper. If Standifer was confident in his combat experience, he may have taken the opportunity to aggrandize himself in print, but instead he wrote, “I didn’t kill anyone … I wouldn’t want it written-up if I had.”\footnote{Leon Standifer, Letter to his parents, Rennes, France (Hospital), Thursday, December 21, 1944. Folder 49, Box 2, SP.} In a letter to his parents written December 31, 1944, near the end of his stay at Rennes, Standifer was unable to express these complex emotions, condensing his feeling into homesickness and discontent:

You know, I’m beginning to think the hospital isn’t so good after all. It’s mighty comfortable, but it’s kinda dull too, and then it makes you kinda homesick. Homesick isn’t exactly the word for it — it's the feeling you get being at home for the weekend. It’s so clean and comfortable and there are real American girls that you can trust and that speak English without an accent — and, well, you just get disgusted with the way you live. It’s not that I really \underline{dread} going back, because I know I can keep on like I was and be fairly comfortable. It’s just that I hate to live like that when life can be so much better.\footnote{Leon Standifer, Letter to his parents, Rennes, France (Hospital), December 31, 1944. Folder 53, Box 2, SP.}

As Standifer suggested, life in the hospital was markedly better than life on line in a rifle company. In the hospital Standifer received three warm meals a day, listened to Glenn Miller’s \textit{Standifer, Not in Vain}, 189.
band on the radio, and read stacks of magazines and books. Mobile patients were encouraged to visit the Red Cross room. In Rennes, France, Standifer described this room filled with, “a piano, ping-pong table, games, and a lot of books.” Stadnifer also mentioned attending “coffee and doughnut parties” hosted by the Red Cross.

Once Standifer was relocated to the convalescent ward, he was able to request day-leave into the town where he and his friends could relax in the pub or the park. Each hospital showed movies two or three times a week. Standifer also recalled being visited by local women and nurses. While at the hospital in Rennes, Standifer wrote, “Some of the boys know some of the girls from the nearby town. These girls come and visit pretty often and these boys are always willing to share them.” Standifer persuaded one of the nurses to purchase perfume for his younger sister. In England, Standifer regularly went out with Corporal Edwina “Teddy” Davies, a corporal in the British Army Transport Service.

Stadnifer spent Christmas 1944 in the Rennes hospital. His letters described wards decorated with Christmas trees trimmed with decorations fashioned from medical supplies. On Christmas Day, the recovering men attended a Christmas worship service, feasted on turkey

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43 Leon Standifer, Letter to his parents, Rennes, France (Hospital), December 28, 1944. Folder 52, Box 2, SP.

44 Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), March 15, 1945. Folder 33, Box 3, SP.

45 Leon Standifer, Letter to his parents, Rennes, France (Hospital), December 28, 1944. Folder 52, Box 2, SP.

46 Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), March 31, 1945. Folder 38, Box 3, SP.
dinner, and sang carols around a piano. “Of course, I would rather be with you,” he wrote his parents, “but this is the next best place I could be.”

In the comparative luxury of the hospital, ensconced in the warm folds of crisp white sheets, Standifer began to feel anxious about returning to combat. His anxiety doubled after Christmas, when he received word that Company "K" had been reassigned to defend against a massive German counterattack in the Ardennes Forest, commonly called The Battle of the Bulge. Contemporary studies conducted by the US Army suggest that distance and time away from the front directly correlated to the development of anxiety and increased the symptoms of battle stress. No longer subject to life-threatening circumstances, Standifer struggled to reconcile his deep apprehensions about returning to the front lines with his fierce loyalty to the men of Company "K". “Well, I got a few more letters today… They really made me feel good. My morale is terribly low here,” Standifer wrote on January 3, 1945. “I don’t understand it,” he continued, "I should be happy but I’m not. I want to get back to the outfit and then I don’t. I’m dying to be with them, but I can’t make myself want to get out in the cold.” Five days later, anticipating leaving the Rennes hospital, Standifer wrote that he looked forward to returning to combat and rejoining his military family.

I hate to leave this nice bed and movies and everything… But in some ways I’ll be glad to get back - I miss all the fellows and then I miss the feeling that I’m out in the mud fighting off the whole German army all by myself. Also, I feel that it’s time I was getting back - I’ve had a month’s vacationing and that’s enough for anybody. If

47 Leon Standifer, Letter to his parents, Rennes, France (Hospital), December 25, 1944. Folder 50, Box 2, SP.

48 Cosmas and Cowdrey, *The Medical Department*, 137, 141.

49 Leon Standifer, Letter to his parents, Rennes, France (Hospital), January 3, 1945. Folder 1, Box 3, SP.
I could just spend a week up and a month back I’d be happy.\(^{50}\)

According to Standifer, the joy of being reunited with his unit in common purpose far outweighed the risks of combat. But as his release grew closer his thoughts became more confused. He tried to express his double-mindedness to his parents.

You know, being here is a wonderful experience. It’s terrible, but I enjoy it a lot. Not really enjoy it - but it’s a wonderful feeling to be part of this team. Still, it would be wonderful to get away from this. I’m going to tell you something that may worry you - because you won’t understand it. I almost hope I get hit again soon, and I don’t care much how bad. Now, don’t think I’m going to stand up and beg to be hit - far from it! I’m going to stay down, low! [Standifer’s emphasis] But I’m not going to worry about being hit and I won’t feel bad if I do. Naturally, I don’t want to be killed - but it’s a very small percentage that do, most are just wounded. Now, back to the wounds - if I’m not hit bad, good, I won’t hurt hardly any and I will get a nice vacation. If I’m hit bad, I go home and don’t freeze to death anymore, I’m a wounded hero. If I’m not hit, I have to sweat this out clear to Berlin. But I’d like to go to Berlin. Do you see what I’m driving at? I’m going to do my best to get hit, but I’m not going to worry about it because it does have advantages. Now does it worry you? If it does, you don’t understand. I’m trying to show that getting wounded isn’t what it is built up to be - It has real advantages. But it’s dangerous to try and get wounded. So I’m following the natural course.\(^{51}\)

In part, this letter can be interpreted as a personal pep talk. He reassures himself that death is unlikely and that being wounded is not undesirable. Even though Standifer talks about the advantages of being wounded while hospitalized in Rennes, he makes no effort to remain out of combat. He also maintains his loyalty King Company. However, the contradictions in the above letter illustrate the mind of a conflicted, frightened individual seeking to be understood by the people he holds most dear.

\(^{50}\) Leon Standifer, Letter to his parents, Rennes, France (Hospital), January 8, 1945. Folder 7, Box 3, SP.

\(^{51}\) Leon Standifer, Letter to his parents, Rennes, France (Hospital), January 17, 1945. Folder 12, Box 2, SP.
Though much of Standifer’s correspondence is introspective and contradictory like the samples above, his desire to comfort his parents remains constant. From his hospital bed Standifer tried to comfort his parents, claiming that he “was never really in pain,” and was receiving “the best of care.”52 In a letter written January 3, 1945, in which Standifer mentioned the death of a close friend, he referenced an agreement he made with his parents before his deployment. “This may worry you… but then, I promised to tell you everything, good or bad.”53 This promise of authenticity and truthfulness, an agreement not to conceal difficult circumstances or unflattering thoughts, may help explain why Standifer was so honest in his letters home, but this promise did not reduce Standifer’s anxiety over worrying his parents. On February 15, Standifer wrote:

You know, I always think of you worrying about me. No, I don’t say, “I’d better lie to them, they might worry.” But I know you worry some - you don’t know where I am or what I’m doing. But you know there are times when somebody is trying to shoot me and your mind thinks it might be that minute. I worry when somebody is trying to shoot me but that’s the only time because I know how I am all the time and you have to worry some all the time.54

This letter demonstrates Standifer’s ability to empathize with his parents, but also reconfirms his determination to continue writing honestly about his experiences. He wanted his parents to feel that he understood their anxiety, even though he considered it “senseless.”55

52 Leon Standifer, Letter to his parents, Rennes, France (Hospital), December 15?, 1944. Folder 49, Box 2, SP.
53 Leon Standifer, Letter to his parents, Rennes, France (Hospital), January 3, 1945. Folder 1, Box 3, SP.
54 Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), February 15, 1945. Folder 20, Box 3, SP.
55 Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), February 15, 1945. Folder 20, Box 3, SP.
Then, in another letter, he chastised his parents for worrying. Standifer’s parents depended on letters to reassure themselves that their son was still alive, and when the mail did not come, they panicked. “I hope you aren’t worrying about my being in the hospital because I feel fine. I think you worried too much about me last time. Getting the Red Cross about not getting any letters. You’ve had a son over seas for six months… and there have been plenty of times the mail was delayed. You should have known it was just a delay.” But Standifer also promised that he would do everything in his power to maintain contact with his parents, “I’ll write even if I have to dictate.” Even though Standifer hated to worry his parents, he chose to continue to share his experience authentically. His desire to protect his parents motivated him to conceal the reality of his circumstances and thoughts.

Despite his reluctance to leave the hospital, Standifer was desperate to be reunited with his platoon. He felt that he was needed. In his letters home, Standifer suggested that he convinced the head doctor at the Rennes Hospital that he was well enough to return to active duty, despite a stiff arm, a weak leg, and a deep cough. It is more likely that doctors were under orders to release all available men to replace the heavy casualties following the Ardennes Offensive. In either case, on January 12, 1945, after being issued a uniform and equipment, Standifer was released from hospital and transferred to a Replacement Depot.

In a letter dated January 22, 1945, Standifer explained to his parents that after being released from the hospital, he rode a “40 and 8” train car to Paris. Once in Paris, he passed

56 Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), February 13, 1945. Folder 19, Box 3, SP.

57 Leon Standifer, V-Mail to his parents, Rennes, France (Hospital), January 8, 1945, Folder 8, Box 3, SP; Leon Standifer, Letter to his parents, Rennes, France (Hospital), January 11, 1945, Folder 11, Box 3, SP.
through three different Replacement Depots. Replacement Depots functioned as staging areas for soldiers waiting for redeployment to the front. The commanding officers struggled to maintain order among a motley crew of often rebellious convalescent soldiers and fresh recruits recently arrived from the States. Seasoned men resented the presence of these unproven men. When Standifer and the other convalescents arrived at a Replacement Depot, they were mistaken for fresh recruits. Standifer’s letters describe the jeering and humiliation that the convalescents endured at the hands of the seasoned men. Under these conditions, the replacements were eager to establish their combat experience. “We don’t do much around here - just talk. The more I talk, the more fighting I’ve done. After all, I just can’t [Standifer’s emphasis] say that I haven’t fired a shot - that would give the impression that I haven’t done a thing. It helps my pride, too. You know, I’m really proud of being in the infantry.” Standifer also felt that the instability of the Replacement Depots encouraged laziness and constant anxiety, “We wonder what’s going to happen to us.”

Standifer believed that he would soon rejoin his unit, “They came by today to find out my outfit. That goes with me to the Replacement Center and then I’m ‘replaced’ to the outfit. Of course, there is a chance of a slip-up (you know the army) but they try their best to put me

58 Leon Standifer, Letter to his parents, Traveling (Replacement Depot), January 22, 1945, Folder 14, Box 3, SP.


60 Leon Standifer, letter to his parents, Somewhere in France, May 6, 1945. Folder 48, Box 3, SP.

61 Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), April 6, 1945. Folder 40, Box 3, SP.

62 Leon Standifer, Letter to his parents, Belgium, Replacement Depot, May 16, 1945. Folder 46, Box 3, SP.
back.” Standifer had assumed that barring a “slip-up” the Army would return him to his original unit, “of course, I’ll be sent back to my outfit - this Replacement is just a kind of formality.” But after shifting around between three different Replacement Depots, Standifer reluctantly recognized that the replacement system offered him no guarantee that he would rejoin King Company. Army protocol required that men be sent wherever the need was greatest, regardless of training or prior unit. Also, men could not return to their original company if that company had received replacements and returned to full strength.

Standifer knew that his company was stationed in Nenning, a town on the Northern boarder of France and Germany. One morning, he failed to report for roll call and instead hitched a ride on a passing truck bound for Northern France. He spent the truck ride up to the front sipping cough syrup known as “GI Gin,” a sticky concoction of Codeine and 160 proof alcohol. “The instructions were to take a dose every two hours, but it worked better to take a swallow every time I coughed.”

Reports of soldiers deserting Replacement Depots in order to rejoin their combat unit were common. However, this was still technically desertion and desertion during a combat assignment, even an assignment to wait around in a cold Replacement Depot, was a serious

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63 Leon Standifer, Letter to his parents, Rennes, France (Hospital), January 11, 1945. Folder 11, Box 3, SP.
64 Leon Standifer, V-Mail to his parents, Rennes, France (Hospital), January 8, 1945, Folder 8, Box 3, SP.
67 Leon Standifer, V-Mail to his parents, Verdun, France (Hospital), February 4, 1945. Folder 16, Box 3, SP.
68 Karsten, *Understanding World War II*, 95-96
offense subject to court martial. Perhaps Standifer was open to military reprimand, reduction of rank or curtailment of pay.\textsuperscript{69} This was a risk Standifer was willing to take. Standifer missed his companions and was looking forward to rejoin the team.

Beyond motivating men to overcome their fear of death, friendship was a means of self-preservation in which soldiers pledged to help one another survive. But this commitment was also exclusionary, “A combat man’s loyalty is confined to those around him… [anyone else] might have belonged to a separate race.”\textsuperscript{70} Standifer knew that his chances of survival would decrease amongst strangers who felt no loyalty or connection to him and no duty to protect him in combat. Going AWOL was a demonstration of Standifer’s loyalty to his unit, but it was also a calculated decision made to increase his chances of survival.

Early February, 1945, Standifer arrived in Nenning expecting to rejoin his unit. There are no surviving letters written from Nenning. After all, he was in the midst of combat. In his first letter written from hospital after being evacuated from Nenning, he apologized to his parents explaining that, “At first its was too cold to write, then it rained and it was too muddy.”\textsuperscript{71} Standifer’s memory of Nenning in \textit{Not in Vain} and his lectures are more tactile and emotional than chronological and exact. Standifer recalled being miserably cold and wet for four days. The monotony of standing for hours in a rough fox hole in ankle-deep water was broken only by

\textsuperscript{69}Steckle, “Morale Problems in Combat”, 3.


\textsuperscript{71}Leon Standifer, V-Mail to his parents, Hospital, February 4, 1945. Folder 16, Box 3, SP.
intermittent artillery fire. All the while, his health was steadily deteriorating in the wet cold, affecting his ability to react to his surroundings.72

The landscape at Nenning reflected the recent battle. Trees were fragmented by artillery fire and the ground was marred by trenches and craters prior explosions. The forest was haunted by ghost-like frozen corpses dusted in snow. At night, the temperature at Nenning dropped to five below zero degrees Fahrenheit. Once a day, the men were allowed the respite of visiting a warm-up room located in the basement of a commandeered house. In front of the house, bodies were piled up like lumber, awaiting thaw for burial. The men descended some rough stairs to the basement where they spent about an hour warming themselves in front of a small fire, eating hot pancakes or soup, and drinking bitter coffee. A pile of rank clothing lay drying on the floor near the fire. Soldiers were encouraged to rummage through the pile and find less damp clothes change into. Dry socks were the most coveted.73

When Standifer arrived at Company "K" Headquarters in Nenning, he ran into a childhood friend now serving as an interpreter, Abe Goldstein. Goldstein tried to persuade Standifer to call in sick, but Standifer was determined to rejoin his platoon.74 The next day, he learned that the Company "K" he knew no longer existed. The men he had deployed with either were dead or scattered across France in various hospitals. Except the commanding officer, Captain Simmers, Company "K" now consisted of inexperienced replacements. Standifer was the

72 Standifer, Not in Vain, 210-211; Leon Standifer, Letter - to his parents, Herefordshire, England (Hospital), March 8, 1945. Folder 29, Box 3, SP; Leon Standifer, Letter to his parents, Bad Aibling, Germany, December 7, 1945. Folder 49, Box 4, SP.

73 Standifer, Not in Vain, ; Leon Standifer, Soldiering, Draft of a Lecture given at the University of New Orleans, 2000. Folder 7, Box 12, SP.

74 Standifer, Not in Vain, 200-201.
only remaining scout in an infantry company that had sustained more than 70-percent casualties while he was safe and warm, recovering in a hospital bed.

Standifer had risked court martial by going AWOL and hitchhiking to Nenning in order to rejoin the men he had trained with, but now he was alone. Now, he would be expected to fight and sacrifice for strangers. The prospect of death was tangible. Due to casualties, Standifer was responsible for performing nighttime reconnaissance, a mission usually carried out in a squad of five men, alone and in unfamiliar territory.75

Before his first scouting expedition at Nenning, Standifer was briefed on the current situation. He had arrived during a tense stalemate. The bloodiest fighting had ended three days prior. Now, the feeling was that the Germans had been beaten badly enough to discourage another attack, but the American officers feared that the Germans might attempt to move infantry into the area or receive reinforcements in preparation for a counter offensive. Standifer’s job was to scout out the area and report any activity along the German lines near the neighboring town of Sniz. During his briefing, Standifer was told that two scouts had been sent out the night before. One had reported no activity. The other never returned.76

Standifer set out on patrol at 2:00 am. Along the edge of the forest he discovered small groups of German soldiers clustered around small fires, who looked just as miserable and cold as he was. As far as he could tell, these men were not preparing an attack, they were just trying to keep warm. He decided to turn back, but found it difficult to distinguish between American and enemy lines. He crouched down listening for American accents to lead him back to safety. Then

75 Standifer, Not in Vain, 207.

76 Standifer, Not in Vain, 207-208;
he felt something prod his shoulder and turned to see the silhouette of German helmet. According to Standifer, his training and instinct kicked in. He reached into his boot, pulled a knife and slit the scout’s throat. In his memoirs, Standifer insists, “There had been no decision to kill. I wasn’t going to be captured in this cold, stinking place… The enemy was there so I killed him.”

Standifer returned to Company "K" and reported to the warm-up room. As hours of adrenaline began to wear off, Standifer began to shake with exhaustion and fever.

The next day, the temperature rose a little, melting the snow and filling the fox holes with water. The frozen bodies began to thaw, filling the air with the putrid odor of decaying flesh and attracting wild hogs. On his way to visit the warm-up room for the last time, Standifer became lost. His fever was steadily rising and he was no longer completely lucid. Confused, he sat on a snow-covered log to gather his thoughts. Suddenly, the log gave way and let out a puff of putrid gas. Standifer jumped to his feet to discover that he was sitting on the body of a dead soldier.

When Standifer finally arrived at the warm-up room, Captain Richard Simmers sent him to an aid station to be examined. After four days on line, Standifer was at last was deemed ill enough to be hospitalized with a fever of 102 degrees.

Records kept by the aid station near Nenning reveal that Standifer was one of twenty-two men evacuated from Nenning within a 24-hour period. Within Standifer’s surviving military medical record, there is a single, gridded sheet containing the names of the twenty-two men examined at the aid station, their physical condition, method of arrival, and the time of their evacuation. The list shows that in the span of 24 hours, every man arriving at the aid station was


evacuated and nearly all of evacuees were evacuated for trench foot or frozen extremities. Later, Standifer would be diagnosed with both pneumonia and trench foot, but at the aid station the medic checked the vague “disease” box next to Standifer’s name. The record also shows that nearly all evacuated men were able to walk into the field hospital; however, Standifer was carried in on a litter, suggesting that he was too weak or incoherent to walk.\textsuperscript{79} According to his memoirs, he was in and out of consciousness during the evacuation process.\textsuperscript{80} The Field Log establishes the severity of the conditions at Nenning and corroborates academic research and military statistics that show that large numbers of men were evacuated from Nenning with preventable medical conditions, namely trench foot and acute respiratory disease.\textsuperscript{81}

The winter of 1944/45 was one of the coldest and wettest winters in recent European history, ideal conditions for trench foot. Unlike frostbite, which affects the surface of the skin and is clearly visible, the early stages of trench foot are not easily seen. When the body is exposed to prolonged periods of intense cold, blood flow to the extremities of the body slow and the blood vessels contract, reducing oxygen to the tissue. Persistent damp increases the speed and severity of trench foot by pulling heat away from the body. Combat soldiers at Nenning, standing immobile for hours at a time in water-filled trenches in below-freezing temperatures, wearing constrictive combat boots and leggings were prime targets for trench foot. At first, the soldier’s feet would become numb, a welcome improvement over the incessant cold, but as the condition

\textsuperscript{79} Aid Station Log, February 1945. Folder 7, Box 5, SP.

\textsuperscript{80} Standifer, \textit{Not in Vain}, 211, 213.

\textsuperscript{81} Aid Station Log, February 1945. Folder 7, Box 5, SP; Tom F. Whayne and Michael E. DeBakey, \textit{Cold Injury, Ground Type}, (US Army Medical Department, Office of the Surgeon General, Department of the Army, Washington, DC, 1958), 138, 411.
progressed, his feet would swell and become painful. In the final stages of trench foot, tissue in
the feet begins to die, resulting in permanent nerve damage and the loss of toenails. If left
untreated, trench foot can lead to life-threatening gangrenous infection, in severe cases resulting
in amputation. Furthermore, the damaged tissue will be forever susceptible to recurring cold
injury. ⁸²

At Nenning, the Third Army lost between 10-15% of its strength, including 479 riflemen,
due to trench foot alone. ⁸³ As Standifer put it, the water-filled fox holes, “knocked me and
everybody else out.” ⁸⁴ He recalled a lecture during basic training that had encouraged men to
massage their feet and keep them as dry as possible. In his memoirs, Standifer writes that he
filled his fox hole with fallen branches and old German blankets to keep his feet above the ankle
deep water. He also remembers removing his shoes in the cold and rubbing his bare feet, at least
during the first two days at Nenning.

Before being directed to his foxhole, Standifer stopped at a ration depot, hoping to be
issued Shoe Pacs, leather boots with rubber bottoms to repel water, the prototype of the modern
day LL Bean hiking boot. The man wearing Shoe Pacs behind the counter said the company had
not received any yet. It is possible that the boots had been forgone in the interest of acquiring
other supplies. ⁸⁵ Anticipating a fast and fierce drive into Germany, General Bradley of the 12th
army admitted, “I had deliberately by-passed shipments of winter clothing in favor of

⁸² Cosmas and Cowdrey, *The Medical Department*, 488-490.
⁸³ Cosmas and Cowdrey, *The Medical Department*, 492.
⁸⁴ Leon Standifer, V-Mail to his parents, Verdun, France (Hospital), February 8, 1945. Folder 18,
Box 3, SP.
ammunition and gasoline.”\textsuperscript{86} Shoe Pacs may not have been the answer to preventing trench foot. Soldiers claimed that while the Shoe Pac’s rubber bottom repelled water, the rough leather upper soaked it up. In a lecture given in the 1990s, Standifer recalled, “We were wearing combat boots which were designed so that you couldn’t wear heavy socks. The leather was reversed, flesh side out, which sucked up moisture like a sponge.”\textsuperscript{87} General Hawley, commanding surgeon in the European Theatre, admitted, “The plain truth is that the footwear furnished US troops is generally lousy.”\textsuperscript{88}

The record suggests that there was discord among the US Army Medical Department on how cold injury would be addressed. In the summer of 1944, in response to the Mediterranean campaign, where US ground troops had experienced severe causalities due to cold injury, the Surgeon General decided that soldiers were unqualified to self-diagnose cold injury and were therefore incapable of performing preventative care. The Surgeon General disapproved of Shoe Pacs because improper use escalated the progression of cold injury. Periodically massaging feet with oil or lanolin was also ruled out because it was found only marginally effective and had the potential to damage tissue.\textsuperscript{89} Meanwhile, the medical department was funding efforts to communicate strategies of cold injury prevention. But, radio programs, news editorials, training videos, and even trench foot control teams tasked with inspecting military camps and enforcing preventative medical care largely remained ineffective, partly because these resources did not

\begin{flushright}
\textsuperscript{86} Cosmas and Cowdrey, \textit{The Medical Department}, 491.
\textsuperscript{87} Leon Standifer, Personal Narrative - “Talk of Your Cold,” undated [Probably a lecture delivered at Eisenhower Center’s World War II conference, May 1994]. Folder 5, Box 12, SP.
\textsuperscript{88} Cosmas and Cowdrey, \textit{The Medical Department}, 492.
\textsuperscript{89} Whayne and Debakey, \textit{Cold Injury}, 63.
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reach the troops until spring 1945, after the cold injury crisis had passed. According to Army statistics, all disease-related hospital admissions except for tissue disease, which includes trench foot, but also skin diseases common in the tropical, Pacific climate, declined over the duration of the war, suggesting that the US military was never able to effectively enforce measures to prevent trench foot.

Standifer’s description of his experience at Nenning evolved in the weeks and years after his evacuation. His desire not to worry his parents is evident in a letter he wrote February 4, 1945, just days after his evacuation from Nenning. He summed-up his experience in simple, vague words.

I haven’t written in over a week and I suppose you have been worried. However, there wasn’t much reason for it. I was just in a position where I couldn’t write. I was up on line in a bad place - not so dangerous, but mighty uncomfortable… The whole thing was kinda extraordinary and I don’t believe it will happen very often.

But the next day he had more time to contemplate his experience. His narrative became more complex as he attempted to justify the brevity of his time on the line. “You know I didn’t spend but 4 days on line this time! Sounds pretty bad to be in the hospital after 4 days, but those were 4 tiring days - nobody could stand them.” Later that week, he attempted to establish his courage and loyalty writing, “I had a cold when I got to the Co [Company], but they needed men pretty bad so I decided to go up anyhow.”

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90 Cosmas and Cowdrey, *The Medical Department*, 495.
92 Leon Standifer, V-Mail to his parents, Hospital, February 4, 1945. Folder 16, Box 3, SP.
93 Leon Standifer, V-Mail to his parents, Hospital, February 5, 1945. Folder 17, Box 3, SP.
94 Leon Standifer, V-Mail to his parents, Hospital, February 8, 1945. Folder 18, Box 3, SP.
Standifer’s description of Nenning became more detailed in *Not in Vain* and lectures he gave towards the end of his life. Guilt was a common thread within Standifer’s descriptions of Nenning. The fact that he was only on the line for four days seemed to haunt him. Each time Stadnifer wrote about Nenning he made an attempt to separate himself from accusations of softness or cowardice. During his final night at Nenning, just before his evacuation Standifer recalled thinking, “To hell with courage. I’ve got to get out of this God-forsaken place. If I don’t get sick enough to leave by the time of the next attack, I’m going to find a way to get wounded.” Recognizing that this thought might be interpreted by some readers as cowardice or weakness, he asserted that, “Every man there wanted to get sick, or wounded, or both.” In another lecture he advised soldiers, “Just do your job and look forward to being wounded.”

Standifer knew that trench foot could be seen as a self-inflicted wound, the result of the soldier’s negligence to perform preventative care. In *Not in Vain* he writes, “Maybe I had wanted frozen feet for the same reason I wanted to get a higher fever, or maybe I was too tired to care.”

Standifer also took the opportunity to clarify why he took the initiative to return to combat. Rather than claiming as he did in letters home that he was needed, in his memoir, Standifer writes that he returned to combat to satisfy his own conscience. “I’m not sure of all the reasons. I wasn’t needed badly; the battalion wasn’t going to attack until it had replacements. I suppose I had been in the hospital so long I wanted to prove I could soldier. Maybe I was

96 Leon Standifer, Personal Narrative, “Talk of Your Cold,” undated. Folder 12, Box 5, SP.
97 Leon Standifer, Draft of a lecture given at the University of New Orleans, July 2000. Folder 6, Box 12, SP.
ashamed of not having been there when they needed me.”\textsuperscript{99} After Company “K” was decimated in the Battle of the Bulge, Standifer was released from the guilt of not being with his unit. They were no longer fighting without him, and began to work to extend his hospital stay rather than working to return to combat. But even years later, Standifer struggled to develop a narrative of his experience that he was comfortable with.

In 1945, after being evacuated from Nenning to a hospital in Verdun, Standifer felt justified in his attempts to remain in the hospital. In a passage from the February 21\textsuperscript{st} letter, Standifer suggested that he had sacrificed enough for his country. “Aren’t you proud of your patriotic son? I feel that I have already done my part - and will get plenty of chance to do more than my part. But there is no sense in rushing things.”\textsuperscript{100} He may have felt that he had done his part in part because at Nenning, for the first and only time, Standifer killed. The effect of this experience on Standifer’s psychology and decision-making cannot be overlooked.

If Standifer had the opportunity to write and mail any letters while on line at Nenning, none survive, but Standifer’s medical records show that after being evacuated from Nenning, Standifer was admitted to the cold injury ward at the 145th General Hospital at Verdun, France.\textsuperscript{101} Standifer’s case of trench foot was not severe and he was moved into the pneumonia ward after a few days.

In Standifer’s experience, treatment for trench foot consisted of laying in bed, feet uncovered, and having salve massaged into his feet a few times a day. More severe cases of


\textsuperscript{100} Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), February 21, 1945. Folder 24, Box 3, SP.

\textsuperscript{101} Leon Standifer Medical Records. Folder 3, Box 5, SP.
trench foot were treated with experimental methods such as massage, soaking the feet in cool water, and even spinal injections intended to increase blood circulation to the extremities.\textsuperscript{102} Lying in bed gave Standifer ample time to think and reconsider his position. Verdun became the turning point in Standifer’s war experience. While hospitalized in Verdun, the tone and content of Standifer’s correspondence changed. The tone of his letters fluctuated between flippant and depressed. He no longer expressed a desire to return to his company and combat. He was also cut-off from his family. Weeks of transience between Replacement Depots, combat in the Ardennes, and various hospitals delayed delivery of his mail. By late February, 1945, Standifer had not heard from his family in nearly two months. Neither did he have any contact with the men of Company "K". Standifer wrote on March 10, “I wish I knew how you were. I’m not worried, but except for a few letters I got at the Co. [while he was at Nenning], I haven’t heard from you.” He tried to put a pleasant spin on his circumstances, “It seems like I’d be worried and low over not getting any mail, but I’m not. I think expecting it and not getting it is what gets you. I know I’m not going to get any and just forget all about it.”\textsuperscript{103} Standifer’s claims that he is unconcerned about silence from home are hardly credible. He mentions lack of mail in almost every letter and his relief at finally receiving mail and a cablegram two weeks later betrays his real happiness in reconnecting with his family.\textsuperscript{104} Despite writing from Rennes, “Frankly I’m going to stay here as long as I can,” and “I almost hope I get hit again soon,” and “getting wounded has real advantages,” Standifer took no

\textsuperscript{102} Franklin, \textit{Medic!}, 80-81.

\textsuperscript{103} Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), March 10, 1945. Folder30, Box 3, SP.

\textsuperscript{104} Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), March 25, 1945. Folder 36, Box 3, SP.
definite action to remain out of combat, extend his hospital stay, or inflict self-harm. But after Nenning, feeling isolated and forgotten with no one and nothing to occupy his thoughts other than himself, Standifer determined to take action to control the remaindered of his military service. On February 21, 1945, from his bed in Verdun, Standifer shares his plan with his parents:

“I think the Doc. is on my side - he wants me to stay here till I gain some weight. He thinks, or pretends to think, I lost it when I was sick. As things stand now, I stay here until I weigh the 170 pounds I told them I weighed before I was sick. I don’t think I’ll make 170, but when it starts to look like they want to get rid of me, I’m going to have them take the metal out of my arm.”

The statement that, “the Doc. is on my side,” is one benefit of the source material. The official military record does not record unauthorized events such as a doctor intentionally keeping patients out of combat. There is no way to confirm that Standifer’s doctor showed him any special favor, but it is noteworthy that the doctor was willing to keep his patient in the hospital to gain some weight at a time when the army was desperate for experienced infantrymen to replace the heavy casualties following the Ardennes Offensive. Such a decision directly contradicts the Medical Department’s objective of maintaining the strength of the army by returning men to combat as soon as possible.

The excerpt above also demonstrates Standifer’s knowledge of the non-necessary medical services available to convalescent soldiers. He boasted to his parents, “This is really a good hospital, they [the Army Medical Staff] check you over thoroughly and fix anything that is

105 Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), February 21, 1945. Folder 24, Box 3, SP.
wrong with you,”106 For example, during his first hospitalization in Rennes, Standifer had had two cavities filled. Knowing this, Standifer’s secondary tactic during his hospitalization at Verdun was to have some “metal” removed from his arm. Standifer knew that the shrapnel was in fact a piece of a plastic tracer bullet. After his initial surgery at the Field Hospital near Etel, he had been told that the plastic was harmless and would eventually work its way out from under the skin. The Rennes doctors also refused to remove the plastic, because it was not causing him pain. Standifer decided to try and persuade the Verdun doctors to remove the fragment thinking the operation would gain him a couple of extra days in the hospital ward.

The February 21 letter marks a turning point in Standifer’s war experience because it contains evidence of a change in his behavior. In Rennes, while Standifer believed that his friends were suffering, fighting, and dying, he was prepared to leave the hospital and return to combat. He demonstrated his loyalty by going AWOL. But in the hospital at Verdun, isolation, the trauma of killing, and the comfort of hospital life led Standifer to take action to remain out of combat.

“Well, I never expected this - England!” Standifer wrote to his parents at the beginning of March 1945 from the 156th General Hospital located on the ground of Foxley Estate in Herefordshire, England.107 After D-Day, American military hospitals in Britain became understaffed and underutilized as the troops and medical staff moved farther into Europe. To avoid waste of medical buildings and trained staff, the Chief Surgeon in the European Theatre,

106 Letter - from Standifer to his parents, Rennes, France (Hospital), January 7, 1945. Folder 6, Box3, SP.

107 Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), March 4, 1945. Folder 28, Box 3, SP.
Major General Paul R. Hawley, ordered that the eight strongest station hospitals in Britain transition to general hospitals for “Lightly wounded, sick and convalescents.” One of the eight hospitals specializing in the care of convalescent soldiers was the 156th General Hospital.\textsuperscript{108}

“I haven’t seen the doctor yet, but the nurse thinks I’ll stay here in the medical ward a few days for observation. Then I’ll go to the convalescent ward for from two weeks to a month (according to how long I can fool them!) Then it should take me about three weeks to rejoin the outfit.”\textsuperscript{109} Eventually, he lost interest in the length of his recovery. On March 10, six days after writing the above letter he was still in the medical ward and wrote, “Well, I’m still in the Medical Ward. I don’t know how long I’ll be here and I don’t care. It’s dull but it’s passing time.”\textsuperscript{110} Nine days after that, Standifer began to complain, “I’m really getting tired of this place… I had another x-ray today. I think it will show that my chest is clear. Then I’ll be going to the convalescent ward.”\textsuperscript{111} All in all, Standifer spent 15 days, in the medical ward. During this time, he wrote that he was practically well and that his cough was almost gone. He also underwent multiple x-rays to examine his chest for fluid and determine the necessity of removing shrapnel from his arm, none of which resulted in the prescription of additional treatment.\textsuperscript{112}

\textsuperscript{108} Cosmas and Cowdrey, \textit{The Medical Department}, 256.

\textsuperscript{109} Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), March 4, 1945. Folder 28, Box 3, SP.

\textsuperscript{110} Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), March 10, 1945. Folder 30, Box 3, SP.

\textsuperscript{111} Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), March 19, 1945. Folder 35, Box 3, SP.

\textsuperscript{112} Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), March 15, 1945. Folder 33, Box 3, SP.
Considering that his symptoms were considerably improved, it is unclear why Standifer was transferred to England and not released for active duty. According to his correspondence, at the end of his stay at Verdun, Standifer retained a deep, painful cough, and chest x-rays showed that his chest remained congested with fluid, but he fully expected to be discharged from Verdun despite his imperfect health.\textsuperscript{113} A clue may be found in a letter written February 13. “I just haven’t felt so good,” Standifer wrote, “They gave me a lot of sulfa pills for my cold and it got my stomach all upset. I wasn’t eating hardly a thing for a while. Now I feel better though.”\textsuperscript{114} And two days later: “My stomach is pretty much straight, but they are still afraid to give me pills.”\textsuperscript{115} Sulfa pills were used to combat infection and nausea was a common side effect. These excerpts suggest that Standifer was so nauseated that the doctors chose to discontinue his Sulfa treatment. It is plausible that the doctors were unwilling to send Standifer back to the front without completing a full round of antibiotics. But he had been released from Rennes in worse physical shape.

It is also possible that Standifer had contracted pneumonia before leaving the United States. In early January 1943, during basic training at Fort Benning, Mississippi, Standifer was quarantined for two weeks with a high fever. In his letters home, Standifer had described his symptoms as a “chest cold,” that would be relieved if only the army would rub some Vicks Vapor Rub on his chest. He also mentioned that he had “accidentally” been placed in the pneumonia

\textsuperscript{113} Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), March 4, 1945. Folder 24, Box 3, SP; Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), March 19, 1945. Folder 35, Box 3, SP.

\textsuperscript{114} Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), February 13, 1945. Folder 19, Box 3, SP.

\textsuperscript{115} Leon Standifer, Letter to his parents, Verdun, France, February 15, 1945. Folder 20, Box 3, SP.
ward. However, if Standifer had contracted pneumonia in 1943, it could explain why he was more susceptible to respiratory disease in the winter of 1944/45. He left the Rennes Hospital with chest congestion that worsened in the elements at Nenning. It is possible that Standifer had pneumonia before he left Rennes. Standifer never mentioned receiving a chest x-ray at Rennes, and there is no record of it in his surviving medical record.

Standifer’s father suggested that his son’s hiatus in a hospital in the quiet English countryside was a reward for a job well done, but Standifer assured him that was not the case. “I don’t know why I’m in England either, but it’s not worrying me. I know it’s not for the reason you mentioned, Daddy. The Army doesn’t care how much you’ve done. There are boys up there that have been wounded 4 & 5 times. It was probably just because I was in hospital nearly 30 days and they can’t keep you longer than that.” Most likely, Standifer was correct, and he had simply exceeded the 30-day maximum hospitalization on the Continent, but his attending physician transferred him to England to continue treatment for pneumonia. Standifer goes on in this letter to suggest wistfully that he might be sent home to the States if he remains in hospital for too long. Standifer evidently knew that a convalescing man would be transferred to a hospital in the United States after 180 days in the theatre, “But 4 months is a long time.”

While at Herefordshire, Standifer began having recurring nightmares of Nenning. He did not mention these dreams to his parents. Today, his symptoms might be understood as a form of post-traumatic stress. He recalled how he processed the trauma of war in a lecture presented at

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116 Leon Standifer, Letter to his parents, Fort Benning, Sunday. Folder 43, Box 1, SP.

117 Standifer Hospital Admission Card. Folder 3, Box 5, SP.

118 Leon Standifer, V-Mail to his parents, Herefordshire, England (Hospital), March 25, 1945. Folder 36, Box 3, SP.
the University of New Orleans in 2000, “The smells and sensations were recorded on our minds, but we were so exhausted, emotionally and physically, that there was no real shock. That would come as nightmares when we were in the hospital.”\textsuperscript{119} According to Standifer, he tried to tell his British girlfriend, Edwina Davies, about Nenning, but with little success. There is no record that he ever spoke about his experience again. Eventually, Standifer convinced himself that the German he killed at Nenning was nothing more than a bad dream, a self-delusion he only overcame in the course of writing his memoirs.\textsuperscript{120} There is no evidence that Standifer was ever treated for mental health disorder or that he underwent a psychological evaluation until his discharge in February 1946. That is not to suggest that Standifer was psychotic. All the evidence suggests that Standifer was making calculated decisions to affect his future. He was not reacting from a place of psychosis.

On March 26, 1945, Standifer was moved to the Rehabilitation Ward. According to Standifer, “…that means I am well, but still weak. I had an interview with the doctor this morning. He says he is going to keep me about two weeks. I’ll take hikes, exercise, etc.”\textsuperscript{121} After this examination, Standifer remained in Herefordshire’s convalescent ward for another month. This again raises the question of why was Standifer hospitalized for so long when he seemed to be in fairly good health? And why does his length of stay exceed the doctor’s estimate?

\textsuperscript{119} Leon Standifer, Draft of a lecture given at the University of New Orleans, July 2000. Folder 6, Box 12, SP.

\textsuperscript{120} Standifer, \textit{Not in Vain}, 218.

\textsuperscript{121} Leon Standifer, Letter to his parents, Herefordshire, England (Hospital), March 28, 1945. Folder 37, Box 3, SP.
One possibility is that Standifer was willing, unpaid labor. Statistics show that American military hospitals in Britain were severely under-staffed. During his time at Herefordshire, Standifer and the other convalescents served as stretcher bearers, administered pneumonia shots, and conducted daily housekeeping tasks like sweeping the floors and carrying trays of food to bedridden patients. Standifer wrote that serving the other men forced him to think of others outside of himself. “One painful part was that I couldn’t feel sorry for myself. These men were miserable and needed my help.” It is also possible that the medical staff was unwilling to take the time to file the necessary paperwork to arrange for Standifer to be equipped and transported to a replacement depot.

Standifer was released from the hospital in Herefordshire in mid-April 1945. He was then given a week furlough, which he spent in Scotland. From there, he passed through several Replacement Depots in France and Belgium on his way to rejoin his company. Company "K" was assigned to participate in the American occupation of Czechoslovakia. On May 8, 1945, while he was traveling through France by train, Standifer received word that the war in Europe was over.

Standifer’s time in hospital ultimately extended his tour overseas. When the war ended, the Army used a point system to determine which men would be discharged and return home first. Instances of wounding, number of battle stars, and martial and parental status all played a role in determining when a soldier was discharged. Standifer was hospitalized during two of his

122 Cosmas and Cowdrey, The Medical Department, 256;

123 Standifer, Not in Vain, 217.

124 Leon Standifer, Not in Vain, 216; Cosmas and Cowdrey, The Medical Department, 480.
regiment’s battles, placing him lower on the list for discharge, with the result that Standifer was ordered to join the American occupation of Bavaria.

Standifer was disappointed that he would not be going home as soon as he thought he would. In early September 1945, Standifer received word that his platoon was being dissolved and the majority of its members were being discharged. Standifer was still one point shy of a discharge and he would have to transfer to yet another unfamiliar unit.125 A few days later, Standifer wrote the following letter from a hospital in Pilsen, Czechoslovakia:

Long time no letter, huh? Well, I couldn’t write. I’m in the hospital having that metal cut out of my arm. No, nothing serious came up about my arm, I’ve been planning on seeing about having it out for a long time, and Sunday when I was set to go to church (I was too late for church) I found that nobody under 45 points could go on pass. That means they are transferring out and the rumor is that they we are headed to army of occupation. You know I’ve got just 44. So I decided to go to the hospital - and fast! This isn’t an absolutely safe hiding place, but it’s better than the company. If they are really determined, they’ll transfer me out even in the hospital. But there is a chance they will let me stay - - and if I stay I’ll get home a lot sooner.126

Standifer’s decision to manipulate the military medical system was probably a reaction to his prior experience. Standifer interpreted his extended stay in England as evidence that the Army had simply lost track of him. He also believed, based on his interaction with a doctor in Verdun, that doctors might be persuaded to keep patients in the hospital longer than strictly necessary. His hospital stay in Rennes had kept him out of the drive towards Berlin, arguably saving his life. However, Standifer’s hunch that if he remained in the hospital he would be lost in

125 Leon Standifer, Letter to his parents, Rosenthal, Germany, September 2, 1945. Folder 23, Box 4, SP.

126 Leon Standifer, Letter to his parents, Pilsen, Czechoslovakia, September 6, 1945. Folder 25, Box 4, SP.
the chaos of a rapidly reconstituting and traveling occupation army proved to be wrong and he remained a part of the American occupation force first in Czechoslovakia and then in Bavaria.

Then, in January 1946, after having been overseas for one year and five months, Standifer decided, once again, to try and manipulate the medical system to his advantage. Standifer was serving as a prison guard in Bad Aibling, Germany. The post required him to spend the greater part of every day outdoors in the cold air directing a platoon of Nazi prisoners. Standifer’s lungs were weak from the bout of pneumonia suffered the previous winter and he developed a cough. Standifer was frustrated that he was forced to be out in the cold. He was frustrated that he was still in Europe.

On January 11, 1946, Standifer was examined by a doctor. “He said the cough was from the pneumonia and I would have it from now on whenever the weather gets bad. Well, I didn’t like that - because there’s no sense in my staying in this cold place anyhow. So I decided to put up a howl about it.” Standifer’s resistance was strategic. He decided to request his medical records intending to leverage, “the doctor’s story about my losing so much weight and that I stayed on line while I was sick because we were so short of men,” to secure a medical transfer to a cozy desk job.

127 Leon Standifer, Letter to his parents, Bad Aibling, Germany, December 16, 1945. Folder 51, Box 4, SP.
128 Leon Standifer, Letter to his parents, Volenice, June 25, 1945. Folder 61, Box 3, SP; Leon Standifer, V-Mail to his parents, May 24, 1945. Folder 50, Box 3, SP.
129 Leon Standifer, Letter to his parents, Bad Aibling, Germany, January 11, 1946. Folder 56, Box 4, SP.
130 Leon Standifer, Letter to his parents, Bad Aibling, Germany, January 11, 1946. Folder 56, Box 4, SP.
But on January 13, he heard a rumor that his unit was being reconstituted again, and because he still did not have the necessary points to go home, he would have to relocate yet again. Standifer had already been transferred to three companies and four villages.\textsuperscript{131}

Well, I believe them [the rumors] so much that I’m going to go to the doctor tomorrow and start hollering - record or no record. There’s absolutely no sense in them keeping me here in the cold… I did my part in this war - a lot more than these fellows around here did, and it’s about time the army took care of me… I don’t think I have much chance of getting home on this (my chest), but I’m sure going to try… I ought not to write a letter like this - just try to forget it… I get so mad and homesick. I’m really tired [of being] shoved around for no reason at all. I could take it when there was a need for it - but now it’s just foolishness.\textsuperscript{132}

Standifer saw another doctor on January 15. This doctor explained that he could make a request to have Standifer transferred to an office job out of the cold weather, but a transfer might delay Standifer’s military discharge. Standifer reconsidered his position and chose to be patient.\textsuperscript{133} His unit began their journey home to America two weeks later.\textsuperscript{134}

After being discharged from the Army on March 16, 1946, Standifer returned home to Mississippi to continue his education at Mississippi State University. After a few years in the corporate world, Standifer returned to academia, earning his doctorate from the University of Wisconsin, where he met and married his wife and fellow botanist, Marie Scott Standifer. The couple had two children. Standifer became professor of horticulture at Louisiana State University

\textsuperscript{131} Leon Standifer, Letter to his parents, Bad Aibling, Germany, January 11, 1946. Folder 56, Box 4, SP.

\textsuperscript{132} Leon Standifer, Letter to his parents, Bad Aibling, Germany, January 13, 1946. Folder 57, Box 4, SP.

\textsuperscript{133} Leon Standifer, Letter to his parents, Bad Aibling, Germany, January 15, 1946. Folder 58, Box 4, SP.

\textsuperscript{134} Leon Standifer, Letter to his parents, Bad Aibling, Germany, January 29, 1946. Folder 51, Box 4. SP.
producing a number of articles and books about gardening in the humid south before retiring in 1990. In 2012, aboard a French military ship docked in the New Orleans wharf, Standifer was distinguished with the French Legion of Honor, the highest French military honor, for his service during WWII. He died of natural causes in 2016 at the age of 91.\textsuperscript{135}

\textsuperscript{135} Leon Standifer, Unpublished Manuscript, Standifer’s Return to the US After WWII, undated, Folder 1, Box 12, SP; Leon Standifer, unpublished personal narrative about receiving the French Legion of Honor, undated. Folder 1, Box 7.
Conclusion

Hospitalization profoundly impacted the character and duration of Standifer’s war experience. Stadnifer’s hospital stays partially determined where he served during the war. Being in the hospital protected Standifer from the bloody Ardennes Offensive and, because he missed this major battle, he was required to participate in the American occupation of Czechoslovakia and Bavaria.

Standifer’s medical history was not typical, rather it contradicts the official military record. The length of his hospital stays were unusually long and consistently exceeded his doctors’ expectations. Furthermore, he was transferred to England strictly to recover at a time when the Army was desperate for experienced infantrymen, contradicting the military medical department’s professed objective, to maintain the strength of the army by returning mostly-well soldiers to combat as quickly as possible.

During his hospitalization in Rennes, France, Standifer learned the protocol of the military medical system, but it was only after his experience at Nenning, where he encountered death and the loss of his military family that Standifer began to put this knowledge into action to control the future of his war experience. After Nenning, Standifer began making calculated decisions to increase the odds of his survival. He worked to extend his hospital stay in Verdun, France. He attempted to “fool” his doctors in England. In Pilsen, Czechoslovakia, during the American occupation, he “hid” in the hospital in an attempt to be discharged from active duty and return to the United States more quickly. When that failed, he attempted to use his medical record to afford himself more comfortable working conditions.
While Standifer’s medical experience may be unusual, his emotional journey is typical. Standifer did not seek to distinguish himself through military service. Like other draftees, he was motivated to fight out of loyalty to his unit. Being a member of a team gave Standifer a sense of purpose, and he hoped, improved his chance of survival. His willingness to fight died in the Ardennes forest along with his comrades. Memoirs and lectures written late in his life, offer evidence that Standifer struggled with a sense of shame and regret that he had not suffered through the Ardennes Offensive alongside his platoon.

Perhaps the patient’s perspective of military healthcare is obscure because it breaks the mythology of World War II. In popular culture the American GI is often portrayed as a fearless, self-sacrificing hero supported by an efficient and objective military staff. The story of Leon Standifer paints a very different picture. Standifer’s letters, when compared to his memoirs and unpublished personal narratives, document a progression from willing obedience to subversive action. The Standifer Papers help the reader understand what factors motivated an ordinary soldier, dedicated to his unit, to manipulate the U.S. Army military medical system as a means of avoiding the misery of combat and escaping death. Standifer’s story is a testament to the power of friendship and loyalty in motivating young men to sacrificial service. It is also an example of the power of isolation in destroying the soldier’s willingness to fight.
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Vita

Born and raised in New Orleans, Alexis Laguna has been fascinated by history ever since reading the *Dear America* and *Royal Diaries* series as a child. She was a member of the second graduating class of Haynes Academy. While at Lipscomb University she studied abroad in Bath, England, graduating a semester early with a BA in history. After working for Disney Resorts in Florida, Laguna returned home to join the family business: fire protection. She has designed fire protection sprinkler systems for clients across the Greater New Orleans area. Processing the Leon C. Standifer Papers for the University of New Orleans and writing this thesis has been an honor and an adventure she hopes to repeat.