

INTERVIEWEE: Mary Semans
INTERVIEWER: Jessica Roseberry
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SEMANS INTERVIEW NO. 2

JESSICA ROSEBERRY: This is Jessica Roseberry. I'm here with Mrs. Mary Duke Biddle Trent Semans. Today is August 2, 2007, and we're here in the offices of the Mary Duke Biddle Foundation. And I want to thank you very much, Mrs. Semans, for agreeing to be interviewed today. I appreciate it very much.

MARY SEMANS: Oh, wonderful! I'm enjoying it.

ROSEBERRY: We'll be talking about women in Duke Medicine, and I wonder—if it's all right with you—if we might start by talking about Susan Dees, if that's okay?

SEMANS: Oh, surely.

ROSEBERRY: Okay.

SEMANS: Well, Susan Dees was a particularly strong friend of ours, because my husband—Professor of Urology James Semans—and John Dees, her husband, went all the way through Hopkins—Johns Hopkins Medical School—residency together. And I think John went to the University of Virginia Medical School. But after that, they got together in the urology department. So that went way back. And Susan, she was really a very remarkable woman. She came here as, I think, the first—and I'm sure you have this down—the first full professor who was a woman. I think that's correct. And I don't know if anybody's told you this, but a lot of the people who had been through her specialty with her call themselves "Susie's boys." And I don't know if Chi [Pulley,

daughter of Dr. Susan Dees] told you that, but it was kind of—every once in a while you'd hear that. People came from all over to see her, because she was the leading—and maybe one of the few, if there were any other—pediatric—(*pauses*)

ROSEBERRY: Allergist?

SEMANS: Yeah, I guess a pediatric allergist—in the state, and I'm sure in this whole area. So people would bring their children over and over. I mean, she really built up a great practice. As far as we were concerned, when I was living here as a widow, John [Dees] and Susie were particularly nice to me. You know, when you lose somebody like a husband, people tend to just forget you're there, if you're just living alone. And—but, they didn't do that; they would call me in and have me over for an evening and that sort of thing. And so I found out that he (*laughs*)—that John was trying to get his friend, Jim Semans, in Atlanta, to come up so that we could meet. And it was kind of a nice arrangement! But Jim had said, "I'm just too busy; I cannot come right now." So then later on, he asked him to come up and speak. And so we met that weekend, ostensibly to look at the library I had at home of my first husband's medical history. And he came and saw that. So—it all worked out, though. I asked him how many children he had, and he said, "I've never been married." And so by the next fall, we were married. Anyway, the Dees and the Semans had a very nice relationship, and always, you know, did enjoy each other. And John and Jim worked together in Urology, and it was very nice. Anybody whom you ask about Susan Dees has—I've never heard an unkind word spoken about her. She was really exceptional. And late in life, after she retired, she learned how to use the computer immediately. She was up with everything that came along, she really was! She

was quite a remarkable person. We were always very proud that she was a professor at Duke.

ROSEBERRY: So—when I spoke with her daughter, she mentioned kind of a natural curiosity in Dr. Susan Dees' character.

SEMANS: Oh, yeah. Well, that's it, you see. She didn't really have to learn the computer, particularly, but she was determined to do it, because she knew it was the thing of the future. And she was—her curiosity, it's true.

ROSEBERRY: What was she like in your friendship? What was she like?

SEMANS: Oh, well, she was just a lovely person, you know. She just—we would—none of us did very much socializing in those days, and they weren't people who went to lots of parties, nor did we. But whenever we got together, it was just really pleasant. She was just a charming person, interested in everything. She covered the waterfront, as far as her interests were concerned.

ROSEBERRY: So socializing, was that—people were fairly busy, is that—?

SEMANS: Oh, yeah! Oh, absolutely! And longer hours, I think, than people put in now: very long hours. And we didn't have as much—I mean, it's funny. They talk about limiting hours now, but that's a whole other subject. It's interesting, you know, trying to cut down on residents' hours and that sort of thing. I don't know if that really helps or not. It certainly gets in the way of some things in medicine. But Susan and John worked a lot, and when I say that we weren't—they went out to dinners and so forth, but none of us were very big partygoers, if you know what I mean. And that's all I can really say about it, I think.

ROSEBERRY: Do you feel that, you know, as being a—she was a woman in medicine. Do you feel like there was any kind of difficult line that she had to walk between her family and—

SEMANS: I never, never—I mean, she may have felt it, I don't know. But I never felt it for her, because she never let anybody know if, indeed, that was true. She was just extraordinarily gifted that way. She was, I would say, a very—a person with a lot of content in life—and she managed very well the family and her work, totally dedicated. And all the patients felt that way.

ROSEBERRY: Another thing that her daughter mentioned in our interview together was that sense of, you know, she was a doctor at work, and she was mother at home.

SEMANS: At home, that's very good. That's right, mm-hm.

ROSEBERRY: Do you feel that that was maybe typical of any female physicians that you might have known at that time, or of just women in general at that time?

SEMANS: Well, of course, it was a little different. I mean, it's gone through several things since then—evolutions. There were so many women who wanted to excel in medicine. And then it got to the point where a lot of women had children very late in life, because they wanted to excel first and then have their children. And now, there's this business of, well, they're not sure whether they want all that excellence in the beginning—and that very dedicated, busy life first, or should they, you know, have half-time jobs? You know, you notice that much more now. Women are going through a lot of examining of what they really want. So in those days, I expect Susan made her decision all on her own. She didn't—she wasn't a trend person, so I think that she did what she really felt was right for her, and right for her profession. And she didn't—it is

amazing. She didn't really mix it up much. She didn't—I don't think she sacrificed one for the other. But there are not many people who can do that.

ROSEBERRY: Well, if there was maybe someone who wanted to write a biography of Dr. Susan Dees—

SEMANS: Yes.

ROSEBERRY: And one of the things that they would want to turn to, maybe, would be this interview, what would you specifically want them to know?

SEMANS: Well, that she was sort of a pioneer among women in this area, for one thing. And legitimately so, because she was so good! She was very talented, and she was also, I would say, very wise and down to earth with her recommendations. But she was a pioneer, also, in that she managed her private life very well, as well as doing extremely well in her professional life. So she was really a model for women, and it would be good for a lot of women to read about her, because she was extremely well put together.

(laughter) She put her life together very well, she was inspired that way.

ROSEBERRY: Do you remember any specific stories that stand out, maybe, about her, or memories that you have of her?

SEMANS: Not—I don't think so, not really. I mean, personally, that they were wonderful to Jim and me, and they were also wonderful to me after my—my first husband's mother was Dr. Dees'—Dr. John Dees'—patient, so we knew each other pretty well. And they were always very good to me after he died. So you know, personally, I felt very special about them. And of course, they arranged for Jim and me to meet—I mean, that's very special, too. So that's the best of all things. So I would say, you know, she's a real role model.

ROSEBERRY: Are there other women, kind of during this time period, that stand out to you as—?

SEMANS: Well, there are women. We had some remarkable people in blood work. Mary Poston—have you heard about Mary Poston?

ROSEBERRY: Please tell me more.

SEMANS: Well, I don't know whole lots about her, because I didn't know her real, really well socially, because she was very quiet, and we only saw her occasionally at functions. But I knew her pretty well through the hospital, and boy, she was really—her life was her work! And she was a role model, too. People who really worked hard for an institution—she was amazing. Elsie Martin was another one. She had—and you've probably heard about her.

ROSEBERRY: And—I'm sorry, go ahead.

SEMANS: Wasn't she head of pharmacy?

ROSEBERRY: Mm-hm.

SEMANS: Very, very good, too—excellent. And then we had—I know you've heard of Helen [Kaiser]—oh, my goodness! Head of Physical Therapy. Helen—I'll think of her name in a minute, but I know you know.

ROSEBERRY: Her last name eludes me, too, so—.

SEMANS: Yeah, but she was particularly good, too. She set up a standard for rehabilitation—and physical therapy—that was really extraordinary. And it still is an excellent department. She's been gone a number of years, but it's very good. So they're three non-physicians that were outstanding. And of course, Bessie Baker and some of the people in nursing were outstanding. Ms. Baker came from Hopkins, and she was

commandeering, there's no question about it! And starved to the limit. I don't know if you've had people talk about her?

ROSEBERRY: Some, but please.

SEMANS: Well, I didn't know her well at all, because I was way down on the totem pole, and you just didn't know a lot of people. I mean, it was very formal; formal, but very friendly. It was an unusual—there's not much of that around anymore, because it's gotten so big. But everyone knew just about everybody else in the medical school. We knew it all across lines, and especially if you'd been through a residency, which was a long period. You just got to know everybody! So it was a good opportunity to see how people felt about each other. And the wives were very much involved, too. Now, there was another woman connected—I don't know if she would be part of what you're talking about, but Elizabeth Swett. Have you talked about her? She was the wife of a professor of Anatomy [Dr. Francis Huntington Swett], and she knew everybody. She knew all the—you know, the wives and the husbands, and so on—and how they interacted. And she sort of led the parade for the residents' wives, because many of them in those days did not work, or didn't really have children. So there was a lot they could do as far as, I would say, volunteer work. And she would have regular meetings with us, and tell us what was open for that. And she was quite extraordinary, and we all loved her, all called her Lizzie. And she was—she had no children, and she and Dr. Swett just kind of helped all of us, you know. They represented the institution—and she worked for Dr. Davison. So it was—that was an extraordinary time for some women like that.

ROSEBERRY: Did she work in Dr. Davison's office?

SEMANS: I'm not sure. She had an office there, but it was in that area.

ROSEBERRY: So she had a formal capacity, it sounds like?

SEMANS: Yes, I would think so; I'm not sure. I really am not even sure that she was paid. I really don't know. But it would be interesting to know. She had a great influence on people and she kept up with them—and knew when people had losses and grief and happy things happen. And she just knew about everybody, all the residents going through. So she was—there's nobody like her around there now.

ROSEBERRY: And what were some of the things that the residents' wives were doing?

SEMANS: Well, they were volunteering in the clinics, and that kind of thing. If they needed—she'd place people various areas, you know, and tell them where it would be good for them to work. And they worked in the clinics; they worked in the admissions offices and that sort of thing.

ROSEBERRY: So was this almost an early women's auxiliary?

SEMANS: Yeah, right. Very much so. And of course, as an offshoot of all that came the Nearly New Shoppe, which the wives started—Mrs. Carter and Mrs. Eagle, and a few of those people, in the very early years. And Mrs. Wyngaarden. It was—that was mostly women who did the volunteer services. They were all very highly respected, and if they appealed for something, they were not brushed off. They were very respected.

ROSEBERRY: So the wives of the important doctors had a certain amount of clout?

SEMANS: Oh, yes, they did! They certainly did. It was very interesting. (*telephone rings*) You don't see very much of that either anymore.

ROSEBERRY: So being the wife of a resident at that time, was that something—I know that that takes up a lot of hours—to be in your residency?

SEMANS: Well, that's right; that's right. And a lot of nights, you know. I mean, I don't know how it works now, but every other night on, and so you just—there's a lot of time. Which, as I say, (*telephone rings*) I don't know if they do that now, I really don't. But it was almost automatic that every other night, they were on all night. And it's, oh, I would say—I wouldn't tell you what year, but it was almost like a complete shift when they started to get married and have children. Because many, you know, many medical schools would not take married interns, and [Johns] Hopkins didn't. I think some people were—had their wives out of town, and they would be at Hopkins—I don't know any specifics. Somebody told me that happened. But, and they did take—here they took married interns. And we were at [Henry] Ford Hospital, and that's where my first husband applied, and they welcomed married interns. But a lot of them didn't! So it—they had children much later, and it was a very—it happened sort of like overnight, that the change happened. And that's one of those things. You just don't know exactly how it happened so fast.

ROSEBERRY: But it was always true at Duke, that they did accept—?

SEMANS: Yes, but many of them weren't married. So it was a real social situation. Many of the residents weren't. I remember their dating and all that.

ROSEBERRY: So did the wives tend to stick together?

SEMANS: Well, there was a wives' situation. I mean, they did. They tried to do what they could to help the university along. And that's how the Nearly New Shoppe came about. They wanted to be able to raise money for the medical school scholarships, particularly, because it was expensive to go to medical school. So yeah, what wives there were got together, and they had—I don't know how often we met. But, for example, Mrs.

Carter—Mrs. Bayard Carter, he was head of Ob-Gyn—she was a little bit like Mrs. Swett, although she did it sort of on her own. She taught a lot of the doctors' wives how to be volunteers. Because volunteerism wasn't that popular in those days! And that's also become a totally different thing. And she would send us out to the Salvation Army Home and Hospital, which was on the edge of town, and teach the people how to be volunteers. She was marvelous that way! She had been a nurse at Hopkins. There's a lecture named for her now in the nursing school. And she took us on, and planned for what the nursing—I mean, what the hospital wives, residents' wives—could do. So there was a lot of that going on in the background, and the women were the ones who did it.

ROSEBERRY: What about, you know, we've mentioned the women who started the Nearly New, and some other physicians' wives, but maybe I'll mention some—Dr. Hanes' wife, Elizabeth Hanes?

SEMANS: Yes, did they mention—have you talked to people about her?

ROSEBERRY: Not much. Not much.

SEMANS: Well, I'll tell you. Betty Hanes was a very elegant sort of person—rather, I think, in some ways, she was formal, I would say. And Dr. Hanes was formal, too. We were—I didn't know her as well as I did him. He took over my mother's case, so I just, you know, revered him, and my grandmother just adored him. So that was, especially—I felt very in awe of both of them. But Betty Hanes really poured a lot of her life into the nursing school. See, she had been a nurse at Hopkins. And they had no children, so they took their nephew and helped rear him. I never knew them then. And their nephew became a great businessman, Gordon Hanes. And they did a great job with him. And they lived there, you know, where the—on Campus Drive, where the Development

Office is now. And they would have—Betty and Dr. Fred—would have, oh, groups of residents and people like that over, for instance, for Christmas parties, and so on. They were very good to everybody. (*telephone rings*) And Betty Hanes was wonderful to people that she got to know very well. We were way down low on the totem pole, and that meant a lot. I mean, you didn't get to know the chiefs as well, but you knew the chief of your own specialty. So we got to know the Harts very well. But Betty Hanes was really a great person.

ROSEBERRY: Well, tell me about Mrs. Hart.

SEMANS: Well, I'm sure you've heard everybody talk about Mrs. Hart. She, too, just mothered everybody. And she never looked like anybody's mother! She always looked young. And she had those five children and she was just a wonder—she really was—just a great person! And she meant a great deal to the wives around. These are people who, you know, now we don't see the chiefs' wives as much. Of course, I'm not on the house staff picture and so I don't know exactly how they feel, but I just have the feeling that we were all in the—in a sort of special way, in those days, with the house staff being a very—oh, it was a wonderland of medicine, you know. And everybody kind of worked together, and everybody thought of Duke as being so special. And they thought of it, in a way, as a family. And it's pretty hard when you get big like it is now to have that feeling, but a lot of us talk about it who've been around a long time.

ROSEBERRY: Was that family feeling because it was so new?

SEMANS: Because it was so new, and the beauty of Duke Hospital is that when Dr. [Wilburt] Davison was appointed, Dr. [William Preston] Few appointed him. He went there personally and selected him, with the specific recommendation of Dr. [William H.?)

Welch, who was the great man at Hopkins. And when he became dean, he brought down the first collection of doctors. And they all knew each other, so it really was like a family growing a new home. And they never—that just never left them. So it's something that's very rare, and they carried it out beautifully, and that's why it grew so fast.

ROSEBERRY: So do you think those wives felt part of that family?

SEMANS: Yes, I think they did, very definitely. It was really quite special. And when you had wives like Harriet Carter who had been a nurse, who had been at Hopkins, who had grown up with most of those people, you just felt an affinity for the institution that wouldn't have been possible had it not been for those particular people. They were remarkable, there's no question about it! And the women had a lot to say. It's true that we didn't have very many full professors, but it certainly led into it. And I think we were pretty slow about all that, but, nonetheless, the women were very important.

ROSEBERRY: The women physicians?

SEMANS: Well, the women—not only the women physicians, but the women who were around, as well as women physicians. But the women like Mary Poston and all those people—they all mixed in with everybody else, too. So socially, it was a kind of one-class situation. Everybody was on an equal basis, and it made a big difference. Helen Kaiser.

ROSEBERRY: Oh, very good! (*laughter*) Very good!

SEMANS: Yeah.

ROSEBERRY: So even though there was a hierarchy, there was still that sense of—

SEMANS: Oh, yes, very definitely! And you could get an appointment with anybody if you, you know, if you gave them a little bit of time. It wasn't too formal.

ROSEBERRY: Do you think there was an expectation of—you know, at one point I interviewed Mrs. Anne Tyor, who was married to the chief of Gastroenterology at one time.

SEMANS: I don't know who that is.

ROSEBERRY: Malcolm Tyor was her husband.

SEMANS: Yeah, now, I didn't know that.

ROSEBERRY: They were in the Department of Medicine, and she said there was kind of an expectation for those wives, again, to entertain the residents, to have them over to the house—

SEMANS: Yes, oh yes!

ROSEBERRY: Is—that's—?

SEMANS: That's right.

ROSEBERRY: So, did the wives seem to—was there any resentment towards that?

Were there any wives that didn't want to do that? (*laughter*)

SEMANS: No, and I'm sure if they didn't want it, nobody'd fuss. I mean, nobody'd say anything. Because there was no—I mean, when I was there, there was no particular—I didn't notice any particular expectation, so I don't know. And I know there would be no resentment when I was there. But I'm sure Mrs. Tyor was long after I was. I never knew her, I'm sorry to say.

ROSEBERRY: Well, did you know Grace Kerby?

SEMANS: I did. Not well, but I admired her greatly. She—now see, there again, she was sort of a pioneer. And she just sort of did everything, and she was just everywhere.

And she had the Duke imprint wherever she'd go. I never knew her well personally, but I always admired her tremendously. So she was one of the first, too.

ROSEBERRY: I understand that she was a fairly private person as well?

SEMANS: Yes, that's right. You didn't see her at many big occasions, you know.

That's right. Of course, Rebecca Buckley also. Now, I never knew her when I was—not well. But she and her husband are kind of quiet, too, so none of us went a lot. But highly respected and just the sort of person whom anyone would look up to. I can't remember—Grace and Rebecca, and I was thinking about Jackie Harris, whom you will, I hope, interview, because she was—I think she was a full professor—she may not have been full.

ROSEBERRY: She was in the medical center?

SEMANS: She was in the medical center. She was—her husband was head of Pediatrics, Jerome Harris. What other women were there? Well, Eleanor Easley, of course. And, of course, she went out and practiced in town, too, and then came back. And she had a big town practice, and was—I mean, she was such a wonderful person! After Dr. Carter died, I asked her if she'd look after me, and she did. So I know what a good doctor she was, too—she was marvelous. But she had a great sense of humor. She was very strong on women in medicine, and she helped people who went through, very definitely. And she was—her sister was the wife of one of the professors of English, so she knew a broad number of people down on campus, too. And she was just a great person.

ROSEBERRY: How did she help the young women in medicine?

SEMANS: Well, I think she would mentor them, you know. I'm sure that's what she would do. I didn't, you know, know her. Since she was in town I didn't follow her every move, but I always heard that—that she would advise people, and that sort of thing.

ROSEBERRY: So did she have a reputation in the Durham community?

SEMANS: Oh, yes, she had a huge practice! Just huge. And of course, she was married to the head of the county commissioners. And so—it was either head, or a member of them—for years. And so they knew people all over Durham. She just had a huge practice, and she was in with Dr. Pearse, who was very popular. So they really had a big hold on the Durham community. People just loved them both!

ROSEBERRY: Well, you mentioned that she was your physician at one time. How was she as a physician?

SEMANS: Oh, excellent! She gave you a lot of good solid advice, and was, you know, you didn't particularly think about her, necessarily, as being feminine. (*telephone rings*) Because I'm so used to doctors, you know, for all my life—because my grandfather's best friend was a physician and so he used to travel with us, and he had his practice across the street from us in New York. All my life I've been with doctors, you know, so it was just like—she was very thoughtful. I knew she would be. In fact, I'd known her since I came down, before I got married. I was still living in New York, and I went to Dr. Hanes's. He gave a Christmas party, and I went. And the two people that I sat with were Dr. and Mrs. Easley. And so I knew her before she went into practice. So you know, I knew her pretty well, but she was just a very patient, fine person. But I am—I didn't particularly—I went to her not because she was a woman, but because she was Eleanor Easley. We all called her Sis. And I never thought—yeah, I was always proud of the fact that she was a physician, but I always—I think about the person, and not the gender. I tend, I mean, I'm interested in gender, and pushing women, because my daughter is a

doctor. But I don't particularly—it didn't matter to me whether man or woman. I wouldn't go to a person just because she was a woman, either.

ROSEBERRY: Do you think that attitude of not mattering whether it's a man or a woman—do you think that was typical at Duke?

SEMANS: I don't really know about that. That's just my own personal thing. I mean, we just have to be, you know—it would just be the quality, and the reputation of the person, rather than—so I went to her because, of course, a lot of it because I knew her so well. I knew what a wonderful person she was. But she was also an excellent doctor with a wonderful reputation, and that's why I went to her. But I wouldn't have said that I just went because she was a woman. I think it's a little bit different, but I don't know.

ROSEBERRY: Well, I've read something that she said or wrote that kind of mentioned that World War II really impacted her practice in a positive way.

SEMANS: Oh, I'm sure! Oh, yes! Because she was one of the ones left here, and who was so good. Oh, yeah, I'm sure.

ROSEBERRY: Do you know if that's at all true at Duke, that there was a rise of women doctors when—during World War II?

SEMANS: Now, that I'm not sure of, because my first husband was very much involved in that. He was 4-F, because he'd had his first operation. So Dr. [Deryl] Hart took him—he was, you know, about third down the list—and he said, “I want you to do all the thoracic from now on.” And the ones who were left behind—either 4-F or were chosen to stay behind—got a lot of practice. And whether—I imagine it did increase Eleanor's practice. But I didn't know a whole lot of other women at that time that I could say that of. So that—I could not be honest about it.

ROSEBERRY: So there weren't necessarily more women that were hired at Duke, that you know of?

SEMANS: I didn't think so! But you might—it would be an interesting question to ask. I was right here during that time, and I don't think I remember. I couldn't help with that.

ROSEBERRY: Well, I'm going to ask about these women that we've been talking about. Would you say that they were fairly ambitious women?

SEMANS: Yes. I think before ambition they were innately dedicated—definitely dedicated people. One or two of them were more ambitious than others. Ambition, you know, to kind of rise to the top. But the others were so dedicated that I—yes, I think they all wanted to do an excellent job. But the majority were so dedicated that ambition sort of came with it—but I wouldn't put that first.

ROSEBERRY: So it wasn't as if you needed to be more ambitious because you were a woman? That just—

SEMANS: Well, I don't know. I mean, I think Duke was so slow! I never did understand that, either. I mean, that's something I really didn't understand. I just don't, because as Jim Semans said—at Hopkins, you see, women were mandated by Mr. Johns Hopkins, that they had to take a certain number of women in order to open as a medical school with his name on it.

ROSEBERRY: As medical students?

SEMANS: As medical students, and that's going back that way. So women were always very prominent at Hopkins—more than here. I have to admit that. I don't know. I mean, it's a normal thing—if you have a lot more women in medical school, they'll be more women in residencies, and so on and so on. So they always—I would think they led us in

that situation. And I hope I'm not right—I hope I'm not wrong with that, but I'm pretty sure I am right—that for a long time, I mean, we were pretty slow taking women in the medical school.

ROSEBERRY: When did that begin to change?

SEMANS: I don't know the date. I think that'd be very good to look up. Because I think some of it is a transitional thing. If you got—it's quite obvious that, you know, you take a certain percentage of your graduating class in residencies and internships. And if there aren't women there, you don't take women. Of course, they could have taken them from somewhere else. But it slowed us down, I think. This is only my own opinion, but I think that's what happened. I don't know why it was so slow, but it's just one of those things. We didn't have any—and I don't think Hopkins did, either—have very many people in the administration who were women. And we still don't. And I wouldn't have wanted any of them to take women who weren't as qualified as the men, I don't mean that. But I think they were a bit slow.

ROSEBERRY: Did you know Mary Bernheim?

SEMANS: Oh, yes, I knew her quite well. Now, there again, Fred and Mary Bernheim were—I never knew them well. See, they were in pre-clinical, and they called them in those days—oh, what did they call them? Not on the clinical services. And I'm not sure what Mary—what was Mary in, Biochemistry?

ROSEBERRY: I believe so.

SEMANS: Yeah, wonderful person. And I never knew her well personally. But Fred and Mary were looked up to, really very much so. I can't tell you much about her, but I know she was very special. Well, she started earlier than some—she came in.

ROSEBERRY: I believe she was on the first faculty.

SEMANS: She was. I think she came when the place opened, yeah. And she, you know, she was part of that whole—I'm pretty sure I'm right, that she didn't have a clinical position. But I could be wrong.

ROSEBERRY: So she was a scientist?

SEMANS: Yeah, I think, and research. And I think Fred—what was Fred? Not Anatomy, but Physiology, I believe.

ROSEBERRY: So they were both well respected at the—?

SEMANS: Oh, yes! Very much so, yeah. She hasn't been gone for too long. I think she died about, what, five years ago? Something like that.

ROSEBERRY: I'm not sure.

SEMANS: Now, have you interviewed anybody about her?

ROSEBERRY: No, I haven't.

SEMANS: I'm just wondering if there's anybody—it might be that Jackie Harris might remember Mary.

ROSEBERRY: Jackie Harris.

SEMANS: She is going to be a good one for you to interview, because she'll know a lot of those people.

ROSEBERRY: Thank you, um-hm.

SEMANS: She's very quiet, and she and her husband are very, very quiet. And he didn't marry, as I say, until very late in life. And he's only been gone about—I would say about three, four years, something like that. I can't think of anyone we've left out. Do you know of any others?

ROSEBERRY: Well, we've talked before a little bit about Reba Hobgood, who was in Social Services.

SEMANS: Well, now, I worked for her, and she was also a beloved person! And she sort of told us by, you know—we learned by kind of walking around with her and working with her. And I worked there in the clinic and admitted people and that sort of thing, and I learned about her. And then there was a lady after her—Perry? Hm. We have to find out about that, because she was a physician, I think, and moved to Charlotte, (*telephone rings*) and became very influential there. And by the time she took over—I worked for her just a very short time, and then I, you know, had children and so on. But I worked for Mrs. Hobgood for quite a while. She was just a love of a person! But I can't remember, Perry—

ROSEBERRY: So she worked with—?

SEMANS: She was head of the admissions and clinic, and that sort of thing. And Mrs. Hobgood was the first head of the admissions and financial aid. I think that's right, Mrs. Reba Hobgood.

ROSEBERRY: Well, I'll kind of ask that same question that I asked about Susan Dees: if there was anybody who was kind of—looking back—who was maybe going to write an article or something about Mrs. Hobgood, what would you want them specifically to know?

SEMANS: Well, she just loved the place, and she loved people. And she was absolutely, completely race-blind, so everyone was treated the same. It established a great feeling about Duke in the community. And we were all taught that we would—you know, she would negotiate with people about their bills, and so on. And any sticky wicket we'd

send to her, because she would work it out with people—they were happy about the situation. It was quite marvelous to see her react with people. But she set a precedent for people to be treated properly, no matter who they were, no matter how little they had. She was a real role model! So yeah, she—I'm glad you mentioned her, because she was just a very big influence.

ROSEBERRY: Did she ever articulate that philosophy?

SEMANS: I don't know that she did. I'm sure she told us the way she felt about it, because I know that that's the way she acted. And that's sort of the way—oh, yeah, she'd say, you know, everybody was to be treated properly. And oh, yeah, she articulated that to us as we learned. Now the person who came in—Perry—oh, was very highly educated. And I don't know how she happened to come in to that situation, I really don't. She came in from somewhere else, and we'd have to pick it up, and ask somebody who Perry was. Because she did have quite a career in Charlotte. She married—I think she married a urologist. Blackie Daniels—yes, she did! In Charlotte—and they, you know, became well known down there. But I only saw her about once or twice after she left.

ROSEBERRY: I'll have to look up Perry.

SEMANS: Yeah, Perry something. Perry Daniels she might have been named—I don't know how she'd be in the history books.

ROSEBERRY: Okay. Did you know Dr. Davison's wife, Atala Davison?

SEMANS: Yes, I did.

ROSEBERRY: Mm-hm.

SEMANS: Now, there again, she was very, very quiet. And she did not—she didn't socialize. She was a physician.

ROSEBERRY: At Duke?

SEMANS: I don't think she ever practiced at Duke. I think she practiced some in town. I'd have to look that up. But—and it might be that Jim Gifford's book has some of that in it—I'm sure it does. But she was—I think she had been—I'm not certain about any of this. I think she had been educated in England. She was very British in some of her approaches. She and Dr. Davison were—well, I hope you can read something about that in Jim Gifford's book, because I wouldn't know about—. I always liked her enormously, but I was always in awe of her, very much in awe of her! And he was so much—everything he did was walking around. He walked through the halls. That's why everybody respected him so. In his shirtsleeves, or in his coat with his sleeves rolled up. And he had a thing on the wall with all the medical students' pictures, and he knew every medical student by name! And he was one of the most effective people I've ever known—totally effective, everything he did! He was sort of like a father to some of us, and he was so helpful! And if he knew about you, or knew that you—particularly if you'd ever been to Princeton, or if you'd ever been to Hopkins, you were in his special diary. You know, he always was exceptional. And Atala, she was a very thoughtful; I think she did a lot of research, and I believe she worked sometimes for the health department here. And she was very—she was brilliant! Now, it may be—I think that the Davison's son is still living in Hillsborough. Not Sandy, because he's in New England. But it's—I don't know, it's one of the Davison boys, married to a nurse. And wonderful people—and I don't know if he's still there. He certainly should be interviewed, if possible! And I think you'd get a great feeling about Mary Hart, interviewing—see, her oldest daughter just died, so—much too young! And then Julia—one of the other

younger children—died about four years ago. So, I think you might have to ask Bill or Margaret, and I'm not sure—Margaret lives in New Jersey, and I think Bill lives in Chicago.

ROSEBERRY: And those are his children, their children?

SEMANS: Yes, and Deryl, and John. Bill, Deryl, and John are still living—and Margaret. They—I guess they had six children. But I think, I'm sure that somebody can get their addresses. In fact, I know the president's office will have all of them. And you might want to write Bill or Margaret. Deryl lives so far away, he lives up in north—I mean in the West, up on the coast somewhere. So it might be just as well to—I think Bill's in Chicago, and Margaret's in New Jersey.

ROSEBERRY: Thank you.

SEMANS: Oh, yeah. I think you should definitely talk about that, about Mary, if you're still, you know, sticking to the women.

ROSEBERRY: Yeah, absolutely. Well, it's interesting to hear you say that Dr. Davison's wife was so reserved, because what I picture in hearing about him was that he was very—

SEMANS: Oh, yeah!

ROSEBERRY: Just kind of outgoing and bubbly and—

SEMANS: Jolly! Jolly, and bubbly, and just—of course, I worked with him on the Duke Endowment, too, so I got to know him really well. He was just a marvelous person, he really was! But she was a marvelous person, but very reserved. And funny, and—but very definitely a world of her own, in a world of her own.

ROSEBERRY: So did she maybe pull back from the Duke scene a little bit?

SEMANS: No, I don't think she—I think she was just never—I think, as dean's wife, I think she just wanted to let him have the spotlight. I don't know a whole lot about it, but I wonder if there's anybody who knew her around? Right this minute, I can't think of anybody, but I'll see if I can think of somebody. There ought to be somebody.

ROSEBERRY: Okay, thanks. Well, I wanted to ask about—if you were able to see what was going on, kind of, with the nurse anesthetists, and women like that, who were—?

SEMANS: Well, and then I didn't mention Ruth, and there's—we were very close. She moved to Florida. I never got close to the rhythm of that. There were nurse anesthetists when I first came, (*telephone rings*) and they held sway. And I don't—I've forgotten. That's mine. If you don't mind, excuse me just a sec. (*pause in recording*) What were we talking about?

ROSEBERRY: Let me turn this back on. I think we were speaking about the nurse anesthetists.

SEMANS: Yes, I never got caught up in the kind of melee. I just never knew if there were any—if somebody objected that we didn't have anesthesiologists. I don't know. But we had these marvelous nurse anesthetists! And Ruth—

ROSEBERRY: Ruth Martin? Ruth Martin?

SEMANS: Yeah, Ruth Martin. We were very close. She anesthetized me when I had my last one. And we kept up with each other. The one thing that I am sad about is that I don't think that I heard from her last Christmas, and I wonder if she's still living. Does anybody know?

ROSEBERRY: I don't believe so, but I don't want to speak out of turn.

SEMANS: She might have died, but anyway, she was very strong! And very—I wouldn't use the word in a bad way—ambitious—but she was really a very dedicated, very—pushed for her friends a lot. She'd do a lot for her friends. And she was an excellent person! And I think she was an anesthesiologist, I think.

ROSEBERRY: So an MD?

SEMANS: I think so.

ROSEBERRY: I believe that's right. I think so.

SEMANS: I believe that's right. I don't know if she's the first MD. We always had very, very good people. And then, of course, you might want to talk to Merel Harmel, because he's just turned ninety; he knows everything! He looks not ninety at all, and is just as bright as can be. And he was at Hopkins, so he knows all these people, and he probably knew a lot about what the situation was. So I think he'd be absolutely the person to talk to. He's just been honored—he's gotten honors all his life from Hopkins and places like that. And he still lives here, so I think he's the one to talk to. But that—I never knew exactly whether there was any—I don't really know how to say it—whether there was any planning behind the MDs versus the—I just don't know what that was, but I know it happened. And I don't think there was anyone in X-ray who was a woman, because I knew those people very well. Know of any others?

ROSEBERRY: I do know Sara Dent came along not long after Ruth Martin.

SEMANS: Yes, and people respected her enormously, but I never got to know her well.

ROSEBERRY: Okay. Well, tell me what Ruth Martin was like.

SEMANS: Oh, she was a lovely person! She was, as I say, very personal and very—she was tall and stately, and extremely a—great conversationalist. And she knew a lot about

a lot of things—I mean, she really had broad interests. And she was very kind to her friends—and a wonderful anesthesiologist, she really was! And we kept up when she moved to Florida. And then every once in a while we would write each other, but all of a sudden I didn't hear again, and I thought maybe something had happened. She was married to Sam Martin, and I think he moved down there. I'm not sure, I'm a little bit hazy about that.

ROSEBERRY: She was in an early leadership position in Surgery, is that right? Or kind of—maybe of the nurse anesthetists?

SEMANS: I couldn't tell you about that, because I thought she was an MD anesthetist, so I just don't know.

ROSEBERRY: Okay, but it does kind of bring up the point that we were talking about before, about women in leadership positions. And I wonder if there are any of those that maybe come to your mind? I know that Susan Dees was—?

SEMANS: The first.

ROSEBERRY: —the first, and she had a division, which I guess maybe was a division of one, and then eventually there were a few more? (*telephone rings*)

SEMANS: That's right.

ROSEBERRY: Were there other women that you can think of who might have been—?

SEMANS: Well, I think we've talked about all the women who could hold leadership positions. The person—Grace, I think, probably—Grace Kerby—probably had more influence, administratively, than any other woman. I think that's true. And at some point, you might want to talk to Dr. William Anlyan. Have you talked to him at all?

ROSEBERRY: I have.

SEMANS: Did you mention Grace to him? Didn't he say something about the fact that she was pretty influential?

ROSEBERRY: Yes.

SEMANS: Yeah, I think she was. Now, at that particular point, I don't know. I mean, see, we went twice to Michigan, and I lived there a year and a half, right in the middle—or, toward the end of Joe Trent's situation. So a lot of those things started then, and that final part of Grace Kerby's—I probably wasn't particularly, you know, involved in. But I knew that she was extremely—a fine leader. And she had great ideas. And she was listened to, also. So things started to turn in those directions. And Rebecca Buckley has had a very—you know, she's full professor. And she's been—I don't know her well at all, but I know she's been a strong influence. But it is surprising, in a way, that we don't have a few more.

ROSEBERRY: There are some other scientists that I can think of—Hilda Willett? Are you familiar with her?

SEMANS: Don't know her.

ROSEBERRY: Okay. And, oh, actually a clinician—Violet Turner, in ob-gyn?

SEMANS: Oh, now, I knew Vi very well! That's true. She died sort of young, but you know, if—and Larry died, too. It might be that you could get a good thing about her—her, hm—I think one of the Turner children—or maybe it's grandchildren, I'm not sure which—is a babysitter for—I'll think about that, too. But I think that is the family. I'm just trying to think if there were any pediatricians. No, even the people in town were men. Violet Turner was just a wonderful person. I didn't know her really well, but she had a

good practice, and she and her husband both were at Duke. And I don't remember exactly—was she in Ophthalmology? No.

ROSEBERRY: Ob-gyn, I think.

SEMANS: Yeah, was she? Yeah. And I didn't—I knew them as, you know, friends, but I didn't know anything about her influence, really.

ROSEBERRY: Well, were there departments or fields that seemed to be more—where more women were than others that you can think of?

SEMANS: No, I don't think so. I really can't think. I was going to say Ob-Gyn, because of Eleanor Easley's amazing and very, very early influence. But, see, I don't think they've had any strong women since—well, except for Vi. No, I can't, I really can't think of any, right offhand. But if, you know, if I think of any of these things—I'll roll them around in my mind. But I think there are people that—Jackie Harris being one, and—so you've talked to Dr. Anlyan? It's funny, there aren't very many that just come across my mind. And see, my own daughter went—after Duke Medical School—she went to University of Pennsylvania, and Baylor, Baylor, and Baylor. So I just—I don't think she'd help a lot, either. Except I'm sure she'd say Duke was sort of, maybe behind a little bit, in catching up. I can't, right this second—of course, there were all those women whom Dr. Kempner brought. And they were all women! I think everybody in his division were women. And it might be that you might want to talk to Barbara Newborg. Have you thought about that, or do you know about her?

ROSEBERRY: I have met her, yes, and we've talked some about her career, but not about this particular topic. It would be interesting.

SEMANS: Well, do. She might be able to help you some.

ROSEBERRY: That's interesting.

SEMANS: I think the world of her! I've never known her really well, and I've never talked to her about this, but now that is one division which almost everybody there was a woman. They were all very unusual. They were nearly all from abroad. Of course, he was a refugee whom Dr. Hanes brought. And they were there, those women who helped him. She's the only one I can think of now, because one of them—I'm not sure. I think one or two of them have died. But, well, they weren't all women, either, because Dr. Peschel was with him. But there were a lot of women, so you might want to talk to her. So I'll try to think!

ROSEBERRY: Okay! (*laughs*)

SEMANS: You've brought a lot of women's names up.

ROSEBERRY: I have a few more, if that's okay?

SEMANS: Yeah, go right ahead!

ROSEBERRY: (*laughter*) Jane Elchlepp?

SEMANS: Jane Elchlepp. You know, it's funny. Did Dr. Anlyan speak about her? See, I'm getting her mixed up with Grace Kerby, because I didn't know Grace Kerby very well. Now, Jane Elchlepp I used to see a lot. Now, she did have a lot to say! She did have an administrative position. I almost forgot that. I don't know what her title was, you'll have to look that up. But she was listened to a lot. And I think she was in Dr. Anlyan's term. Did you get that feeling?

ROSEBERRY: Mm-hm.

SEMANS: Yeah. She had great ideas, and I think she helped him plan Duke North. I could be wrong about that. But I knew there was something funny about Grace Kerby,

whom I didn't really know that well. But Jane Elchlepp is the one who really had a lot of—I didn't know her well, but I watched her with great admiration, because she really knew what she was doing. A very good planner. And then I think she got some illness, I don't remember what it was. Now, anybody else?

ROSEBERRY: Eva Salber?

SEMANS: I didn't know her.

ROSEBERRY: Okay. She was in Community and Family Medicine, and did some outreach into the community. And kind of along those same lines, I'm thinking of women who are more current, such as Jean Spaulding?

SEMANS: Oh, yeah, well, that's easy to describe, because she's right here. And I think she's had quite a bit of influence on the Duke-Durham community approach. You know, she's very good that way. And she's on the Duke Endowment, and she is listened to. She was the first—I think the first full scholar in Psychiatry. We'll have to look that up. But she was very—she was pretty much of a pioneer, and race-wise, of course, she definitely was. But she's so good! I know her really well, so you know, I just—she has a very strong feeling about the community, and friends. And people like her a lot. Anybody else?

ROSEBERRY: Well, kind of—I wanted to ask about her mother-in-law, Elna Spaulding. I know she's not in the medical center per se, but—

SEMANS: Well, she had a lot to do in Durham. I mean, definitely. And she saved Durham a lot of grief in helping to integrate it by starting the Women in Action. And it was in the middle of a very bad time, when Martin Luther King was killed, and there was a Durham boycott of—I mean, a black boycott of Durham white business. And it was

very serious. And she called everybody—well, it was amazing. If—you know, I don't want to lengthen this too much, but she won a prize for the McCall's contest for ideas about integrating communities. And she won the first prize. And she used whatever she got in that prize to establish this thing that she called Women in Action. And she wrote everybody she knew in Durham. And she had a great—people had great respect for her. Also—because of her husband to a certain extent, but also because she had been so wonderful. And she wrote them and asked them to come to the Y[MCA], which was where the police station is now, and we'd hash out the whole thing. And she wrote people in the clubs—Hope Valley and whatever clubs were around—and people, you know, in every walk of life. And many, many of them came, because they respected her so much. And a lot of the club people came, too, which really was interesting. And I don't think there's ever been anything quite like it. They called each other terrible names. They'd point at somebody and say, He's a slumlord. And it was really bad! Blacks calling blacks terrible names. And she talked, and she said, "This is the sort of thing we have to work on." And so she established this, and it's still going. And they pay a great deal of attention to really desperately impoverished people. And they collect money every year, and they're part of the—they're on the United Fund list. So she's just—she was an amazing woman, and decided to do these things all on her own. Of course, she had a—her husband had this great reputation as being one of the pioneers of black business in the world, really. And he would bring people from all over the world, especially Africa—heads of state and some. And she became known to be just a remarkable woman! So she was the in-law of Jean, Jean's mother-in-law. And she [Jean] and her husband have separated or divorced, but Mrs. Spaulding always said, "She'll

always be my daughter-in-law.” It’s great. And Jean—have you talked to Jean some?

Oh, that’s great. Very good!

ROSEBERRY: Well, what about Evelyn Schmidt?

SEMANS: Well, she’s just amazing! She really—she’s a leader of Durham. And I think if anybody needs a medal for what she’s done, it’s Evie. She—I’ll never forget. This symbolizes what—I mean, one of the men in town who has been very outspoken, and was very strong race—he was a black man—very, well, you know, he was very nervous about integrating. And he was—he didn’t think it’d ever happen, and all that kind of stuff—very, kind of bitter, in a way. But then he changed a lot. And so when it all happened, I said, “You wait ‘til you see about Evie Schmidt. She’s just being—.” And he was very, very paternalistic about the Lincoln Hospital. And we’ve all been involved with Lincoln Hospital, and he just couldn’t imagine a white woman could do anything. So one day, several months after she’d been here, he said, “You know what? That Dr. Schmidt is a white angel.” And I said, “Well, Howard, thank you very much. I agree with you.” She’s just—and she fights for it all the time. But she never wants to leave it. She’s ambitious for what she’s doing, but not for herself. She’s just amazing! So that’s nice. I mean, we have strong women in the community, and they’ve taken a lot of leadership.

ROSEBERRY: Do you know where her determination comes from, or what that—?

SEMANS: Well, I think she’s just born with it; she’s just amazing. She went all the way through pediatrics at Duke, and I think she’s just driven, personally. I don’t think—I’ve never heard her say, and of course she may—have you interviewed her?

ROSEBERRY: No.

SEMANS: Well, if you do, she may say that people, certain people influenced her. But I think that it's her own—she's sort of driven to do these things. Very progressive, liberal person.

ROSEBERRY: Some other people involved in the community come to my mind as well. Mary Ann Black comes to my mind.

SEMANS: Yeah, well, she's wonderful, she really is. Of course, she's as of now—but she's great. And I'm hoping that she can continue to lead. I was very disappointed that she didn't win that position that she ran for. She was only, I think, just a handful of votes behind. She was running, you know, for—anyway, a position in the House in Raleigh. And the lady who held it died very suddenly, and they had to get somebody. And Mary Ann Black ran against Floyd McKissick and lost. But we told her, you know, "Just keep on doing it, because you can do it." I don't know—it was a political move of some sort. And I was, I don't know—there was a lot of political wheeling and dealing in downtown Durham, Lavonia Allison being one of them. And she's a big influence, and she means well. She's just a very strong political mover and shaker. But—and I like her a lot, and she and I get along fine—but people are really kind of frightened of her, I think. But I don't know that—she's a leader, there's no question about it. She's a leader of the black community.

ROSEBERRY: Well, I wanted to ask about both Jean Spaulding and MaryAnn Black, and kind of ask what has their impact been on Duke?

SEMANS: Well, of course. Well, I think Jean's has been mostly in the Medical School. She's done a lot for that. She has reached out to the Duke Endowment. She's very effective on the Duke Endowment, and of course they've given a lot of money to Duke.

Mary Ann, of course, has been employed in a Duke administrative position, so her influence has been very good—it's been through Dr. Dzau's office, and she's been doing a lot of outreach. Well, it's been strong—both of them have been very strong at Duke.

ROSEBERRY: Susan Yaggy.

SEMANS: I don't know Susan Yaggy well. I know when they came from Baltimore, but I don't really—what does she do?

ROSEBERRY: She's in Community and Family Medicine, and she runs a division and does a lot of outreach.

SEMANS: Yes, but I don't know her—at least, not well. I've met her.

ROSEBERRY: Are there other maybe community liaisons at Duke that come to your mind, even current day, or—?

SEMANS: Well, I'm sure I'm skipping a lot, because I don't know. The Duke Neighborhood Association—you know, that does so much for the community—is mostly men, I think. There are some women working in it, I know—my daughter's on the board. But as far as, you know, major leadership is concerned, I don't connect any one woman with that. That'd take me some time to think it through. I don't know.

ROSEBERRY: Well, as we kind of go back inside the medical center, are there women who are scientists or who inspire you, or who—?

SEMANS: Well, they all have been—all the people we've mentioned have inspired me. But I don't think any that we haven't—I can't think of any others. They've all been wonderful people. And if I can think of any others, I'll certainly call you about it. But I think of all of them—Susan Dees comes out strongest for me, but of course that's partly because we were such close friends. They've all been excellent, and there are more now

than there were. But it's too bad we didn't have more in the early days, but it's just one of those things. I still think that one of the reasons that we didn't—and I emphasize that, and I'd love to hear somebody else say—I'd love to hear what Dr. Anlyan says—I'll ask him—the fact that we didn't have women early in the medical school held us back.

Because if we'd of had a few more women in medicine, they would have automatically, probably some of them, come on as interns, and then interns come up residents, and some of them might have been, you know. So I don't know. It's one of those things you just aren't sure of. But that's one of the—I think that's one of the blocks.

ROSEBERRY: Do you know Catherine Wilfert?

SEMANS: Well, I know she—I don't know her well, but I do think she's just marvelous! And she is somebody, you know, who's inspiring. I should have mentioned her, because I don't, as I say, I don't know her. I've known Sam [Katz] really well, but she's been gone so much. And she's just an amazing lady! You saw where he put all of his money into the fellowship for her? That was great! She's just marvelous. And she, of course, is a researcher, and a lot of people admire her tremendously.

ROSEBERRY: Well, how has women's health changed?

SEMANS: Women's health?

ROSEBERRY: Mm-hm, or kind of—I guess I'm speaking specifically about at Duke. That would obviously follow national trends.

SEMANS: Well, I like to think that they pay attention to what women's health advice from Duke is—I mean, I would think. I hadn't thought about it, really, because I think we just follow what they tell us is the best. And that's a stupid answer, but I hadn't thought about it.

ROSEBERRY: I guess I mean the trends in thinking about women, from the physician's standpoint. For example, ob-gyn, and those kinds of things.

SEMANS: Well, I'm sure that women—although I noticed yesterday, nationally, when Robin Roberts announced that she had breast cancer, they kept saying, But fewer and fewer women are having mammograms, nationally. So it's hard to know what people do. But I'm sure the people at Duke listen to that. I mean, what they're advised to do about their health. As far as I know, they do. I haven't really, you know, kept up with it much. But I'm sure that—and they pay much more attention to women's health in the way they plan things at Duke. I think that's, you know—they talk sometimes about diseases of black people, especially diabetes and heart disease and things like that. They have special, you know, clinics about that and talks about that. And they do that about women. And I think—I'm sure it has a great influence, I think. I've not seen any statistics, so I just really don't know. Have you?

ROSEBERRY: No.

SEMANS: No. But it would be good to know. I think the trend, for instance, about no mammograms—I mean fewer and fewer—is very strange! I don't know what people are thinking, but very strange. So I must ask my daughter if she has any idea about why that is. But I think people are paying more attention to what to say to women about their health. And every once in a while you see a brochure or a lecture or a program announced for women's health. So I think Duke itself is doing very well toward women's health, and talking about it much more than they used to.

ROSEBERRY: So there was obviously a time when maybe that wasn't talked about as much?

SEMANS: No, I don't think they singled women out for health talks so much. I know Dr. [Bayard] Carter used to. He talked a lot about, well, you know, about C-sections by choice, things like that, and all kinds of things that matter to women. And he tried to place his graduates in central places throughout the South—which he did—thinking that, oh, you know, stillborns and all kinds of diseases of obstetrics could be pretty well eliminated, really. And he did a lot of that. Duke started that very early. Changing diets—and pellagra, for instance, was wiped out pretty soon after Duke came, because they changed the diets of people. So I would say that on the whole, Duke's had a lot of—but I don't know that women were—I mean, they joined in, but I think that wasn't particularly a women's triumph. I think it was just everybody helping the health of the South. The health of the South was really enormously increased affirmatively by Duke being here.

ROSEBERRY: Did you know Dorothy Beard by any chance?

SEMANS: I knew Dottie Beard, yes, mm-hm. Not really well. And she did a lot to help her husband in his work with leucoma, and various things like that. But I did not know her well. She was a very nice person. And he was very authoritarian, and very opinionated, and so on. But they were married a long time, and I'm sure she did a lot to help him. Do you know much about her?

ROSEBERRY: Not much about her. I've heard more about him than I have her.

SEMANS: Yeah; well, he's written up in various magazines and so on. No, Dottie was, you know, really one of the people who came very early and stayed just right close to the problem. She was good. So you see, there were a lot of wives who not only helped, but

professionally—I don't know if she's a doctor or not—helped professionally as well as in a volunteer way. There were a lot of volunteer women, no question about that.

ROSEBERRY: Were you aware of when licensed practical nurses first came to Duke?

SEMANS: Not really. I couldn't tell you that. They discussed it a lot, but I don't think I ever was aware of it.

ROSEBERRY: What did they discuss?

SEMANS: I don't know. I'm sure that had a lot to do with the nursing school, so I think that's something that you'd have to get from them. Dean [Catherine] Gillis, she would know a good deal about that, I think.

ROSEBERRY: Another name I think of is Shirley Osterhout. Did you know—

SEMANS: Shirley Osterhout was wonderful, too. Both of them were. It was he [Dr. Suydam Osterhout] or she that was a niece or a nephew of Dr. Davison—I'm not sure which. They were fine people. I didn't know them very well personally, but that was—they were great—wasn't he head of admissions, for one thing?

ROSEBERRY: I think they were both in some administrative capacity.

SEMANS: Yes, I think they both did. When they left I know people were very unhappy, so they made quite a career for themselves. It was a shame when he retired. I remember hearing everybody say that.

ROSEBERRY: Well, is there anything that we can generalize about the women that we've talked about? Or anything—

SEMANS: Well, no. I think that the people—the women who worked at Duke were all exceptionally dedicated. And in a way, they were more dedicated than ambitious. In other words, I didn't see any pushing people down to get ahead—I never saw any of that.

I may be wrong about it, but they were totally dedicated to the Duke idea, and therefore I think the people who succeeded those early people have been of the same stripe. I think it's been a very dedicated group. I'm just sorry they didn't start earlier.

ROSEBERRY: Were the men totally dedicated to the Duke idea as well?

SEMANS: Oh, yes. Oh, yes! They really were. And I think most of the physicians still are, in their way, but they came in in a different—medicine has changed so. I think you'd have to talk to some of the doctors. They—Dr. Allan Friedman and Dr. Frank Neelon and some of those people will tell you—because my daughter talks about it all the time—medicine has changed in a big way! So that there's not very much—well, I don't know that there are very many—I'm not sure, but I think grand rounds with the med students, I don't think that—I'm not sure that that happens as much. But those are the kinds of things that if you wanted to talk about the changes, you should probably ask about.

Because times, and you know, the fact that they—I don't know if they do it at Duke, but I think they do most places—count the number of hours the residents have to put in—all those kinds of things are new. And the whole idea of spending just so much, like fifteen minutes per patient, that's propelled the medical students into a sort of time constraint. I don't mean medical students, residents and doctors. And I think it's—I can see why the burnout. There's a lot of burnout in doctors. Some doctors aren't staying in medicine. Some of them are quitting early. So there's so much difference, that it's pretty hard to tell, you know. Somebody said, Well, there won't be anybody left. Well, that's not true, but they've got to do something. It's just not the same.

ROSEBERRY: What has Doris Duke's impact been on Duke?

SEMANS: Well, I'm not the one to say, because I really don't know. I know there are a lot of things she's done. She did a lot anonymously, and so she's the person who started—you see, she and Dr. Davison were like—he was sort of like a father to her, so she would do almost anything he asked. And when he asked her to start the Social Services Department, she did it. So she established Social Services. And she gave him money off and on to start very good things, and most people didn't know it. And I think she did a lot for Duke Hospital, but most of it was anonymous. So I would say, you know, she had quite an influence.

ROSEBERRY: May I ask what your own impact has been on Duke?

SEMANS: Oh, I couldn't tell you that! (*laughter*) I've just had a good time, married to two perfectly marvelous doctors! (*laughter*) That's it! And I really have been lucky that way. They've just been wonderful, very dedicated physicians. So I say I was married—I started going with my first husband when I was fourteen, and we married when I was eighteen. So that's a lot! And he was at University of Pennsylvania, so I knew a lot about what people were doing and saying about medicine all the way through that. I was at Duke. And then we got married, and we went to the University of Michigan and Ford Hospital, and you pick up a lot that way. And then came back here for nine years in Dr. Hart's service, and then back to Michigan again. So you know, you pick up a lot! (*laughter*) And it's been a real privilege. It's given me a very happy—you know, you get a kind of attitude when you're married to doctors! (*laughter*) It's a real privilege, that's all I can say, whatever has happened at Duke. And if I think of other things, you know, I'll let you know. It's—I think some of my interest was also pushed along a lot by my first husband's interest in medical history, and then Jim Semans' real dedication to

the [Brady] Urologic Institute at Hopkins. And I got to know a lot more about that specialty, and about his mentor, who was just such a marvelous man, Hugh Young! That's his picture up there. And the Brady Institute he brought to Hopkins. So I don't know, it's just been fun all the way through. It was great. So I'm just hoping that things can go well. I've gotten to know—Dr. Anlyan and I have been getting to know Dr. Dzau, and that's nice. And I think he's interested in hearing about the past. We have to know a little bit more about the past! (*laughter*) There are things that happened that nobody can remember, and that's why I'm very glad you're doing what you're doing, because most people don't realize what went in to the founding.

ROSEBERRY: Why is that important to know?

SEMANS: Why? Well, often times, as Santa Anna said, you have to repeat it if you don't know it. And then it shows you how an institution develops, and how it develops is what the meat of the institution is, what it becomes. I mean, it's much different here from what it is at Penn, than what it is at Mayo Clinic. And it's because what these people did—and I think it's very important for people to know what's gone before, I really do.

ROSEBERRY: What has that meat been? How would you describe that?

SEMANS: Oh, well, it's the Duke way I was talking about—like a family, which we can recapture if they'll work on it. Now, it can never be what it was, because these people started something, and that's different. When you start a place, it's different from carrying it on. And I know this because my husband was the founding chairman of the Board of Trustees of the [North Carolina] School of the Arts. And he was that for fifteen years. And when you start something it grabs you—if you're that interested—and you want to pour everything you can into it. That's what happened at Duke. Those first

people—they all knew each other. You can't do that now! But it's very important for people to know that those people really ironed out how things should be taken care of. A lot of people still talk about the Duke way. You may want to talk to Allan Friedman sometime, and you can tell him that I said that he's somebody who can describe the Duke way. And he's been here for thirty years, but I mean, he didn't start it or anything. But there are people who come and go, and some of them never do catch on. But I think that we've been very lucky with most of the people who've led Duke. And it's a mixture of research and clinical, and people talk about the seventy-to-thirty, or the thirty-to-seventy, and that kind of thing. See, it's different. Because you take the Cleveland Clinic, which is one of the top places in the country—I don't believe—they don't have a medical school, and they don't have—I know they have some research, but it's not the same kind as a medical school's research. So you look at each place, and it has a different approach and attitude. And Duke always has had a combination, which I think is good, research and clinical. But you can't lose sight of the reason that Mr. Duke set it up was to take care of patients. And he says so in the indentures. And that's when he established the hospital—that's what he cared about was patients. And then he said, "And research." So it goes back all the way to 1900 or 1920. So it has its own *métier*, or whatever you want to call it. It's good.

ROSEBERRY: Well, you mentioned Eleanor Easley, and I wonder if you don't mind my asking, if your health care has been at Duke, if you've received health care at Duke?

SEMANS: You mean, in those days, or—?

ROSEBERRY: In general, I suppose.

SEMANS: Oh, yeah, all my health care has been at Duke, except when I was growing up. See, I grew up in New York. But all my health care has been at Duke, and I've been very fortunate. And I remember I made the decision, but when my first husband was so ill, we were at a medical meeting, and he just all of a sudden got very much worse. And so Dr. [Barnes] Woodhall took me to breakfast, and he said, "What do you want me to do?" He said, "It's bad, isn't it?" I said, "It's bad." He said, "If you want to take him anywhere else, I want you to tell me. I want you to do it, too." And I said, "Barnes, I don't think there's a better place anywhere." And he was a Hopkins man, and he would have done it in a minute. And I said, "Well, I think it's—." But now, if something came up and there was a place that was a specialty, then, you know, I'd think about going. But I've just had excellent care, oh, yeah, all the way through. See, Dr. Carter delivered every one of our seven children. And when I went in the last time, it was about midnight or something like that. And they asked me, they said, "Mrs. Semans, what doctor should I call?" because that's what they do. And I said, "Dr. Carter." And they said, "Well, we don't have a Dr. Carter on our call list." And I said, "Well, he's here, and he's head of the department." "Oh," they said, "You mean the chief, Nick Carter?" I said, "Yes, Dr. Bayard Nick Carter." They said, "Well, let's all see this! We've never seen him deliver a baby!" (*laughter*) And he always promised that he'd deliver any children I had. We were really very close friends. I had just marvelous care, just great! So, you know, I'm very fond of the place. But I'm the first one to carry it, you know—Dr. Anlyan and I both get complaints. I mean, I've been there so long that people think, Well, I can travel over to see her and tell her about it. And so we pass those on. I think it's important, because we're living in a very difficult spot for medical care, as they'll all tell you. It's a

tough time for medicine, very! And just think of the people who've given up being ob-gyn! It's just amazing! So we just have to hope that soon things right themselves.

(telephone rings)

ROSEBERRY: Have you seen women along the way who have kind of maybe pushed back against—you know, wanted to have more women in the medical center, or who have—?

SEMANS: Well, I think Eleanor Easley probably was, but I have not been close to any women—except my daughter—who definitely works on that. But she's been at Baylor, in Houston. And she's very interested in promoting women.

ROSEBERRY: Has that been an interest of yours as well?

SEMANS: Promoting women in medicine? Well, not being in medicine, I can't do that very well. And so, fine, if anybody asked me. But no, that's not—I'm not a professional, so I just—no. But Rebecca [Kirkland] I think has done a very good job of pushing people. She's loved it.

ROSEBERRY: How has she done that?

SEMANS: Oh, I couldn't tell you, because I don't see her working. She has done a lot of—she's been the associate dean down there at Baylor, so I know she's been speaking. She speaks a lot. And she's also head of the Duke Safety for the trustees. So she's done all kinds of things in medicine. She's a pediatric endocrinologist. But she encourages women—but I imagine it's mostly by speaking and mentoring. She does a lot of mentoring.

ROSEBERRY: Well, what have I not asked you today?

SEMANS: Oh, I can't think of a thing! (*laughter*) I think you've been very thorough, I really do. But if there's anything that occurs to me, I'll call you.

ROSEBERRY: Thank you. Well, it's been such a pleasure to talk with you!

SEMANS: I've been very, very pleased about that. That's really great. You're doing a good job!

ROSEBERRY: Thank you.

(end of interview)