

A Filipino medical assistant bandages the injured arm of a woman in a PCAU clinic at San Rogue on Leyte Island, January 1945.

“Hard, Bitter, Unpleasantly Necessary Duty”

A Little-Known World War II Story
of the Philippines

By David Smollar



In the steamy dawn of Friday, May 4, 1945, hundreds of Filipino residents in the western Leyte port of Palompon lined the shore along the Visayan Sea.

The special U.S. Army team known as PCAU 17, after four months of helping to heal and jump-start their war-torn community, was sailing to another island needing aid. For more than two hours under an already baking sun, they watched the boat slowly make its way from the pier, serenading the departing soldiers and wishing them Godspeed.

“The local citizens sought us out to wring our hands, thank us, and bless us, and thank us again in their own version of Bon Voyage,” the medical officer with Philippine Civil Affairs Unit (PCAU) 17 wrote in one of his many letters home.

“Lots of emotion was expressed,” he added. “A real poverty stricken mother of a skeletal child I saw during the first days after fighting stopped, reckoned now as long ago in ‘war time,’ handed me a dozen fresh eggs. Another former patient gave me fried chicken. The hospital men and women, they financed a pair of house slippers and tea cloth as a ‘thank you’ for me.

“You know, I’m pretty gruff, and I was often damn tough in getting these people to understand how to fight illness and disease, but all this made me, well, downright sentimental. It feels good to know that for them a hospital is no longer a place to shun, not a place to go to die, but rather a place to go to get well.”

The medical officer was my father, Leo Smollar.

The team of 10 officers and 39 enlisted men had assisted tens of thousands of Filipinos to recover medically, educationally, and economically from three years of Japanese military occupation. It was one of 30 special units that, between October 1944 and July 1945, followed in the footsteps of invasion forces retaking the Philippines island by island. Each unit provided immediate food relief, reopened schools, helped local government reemerge, assisted fishermen and farmers to resume work, and set up hospitals and clinics to treat war wounds and endemic disease.

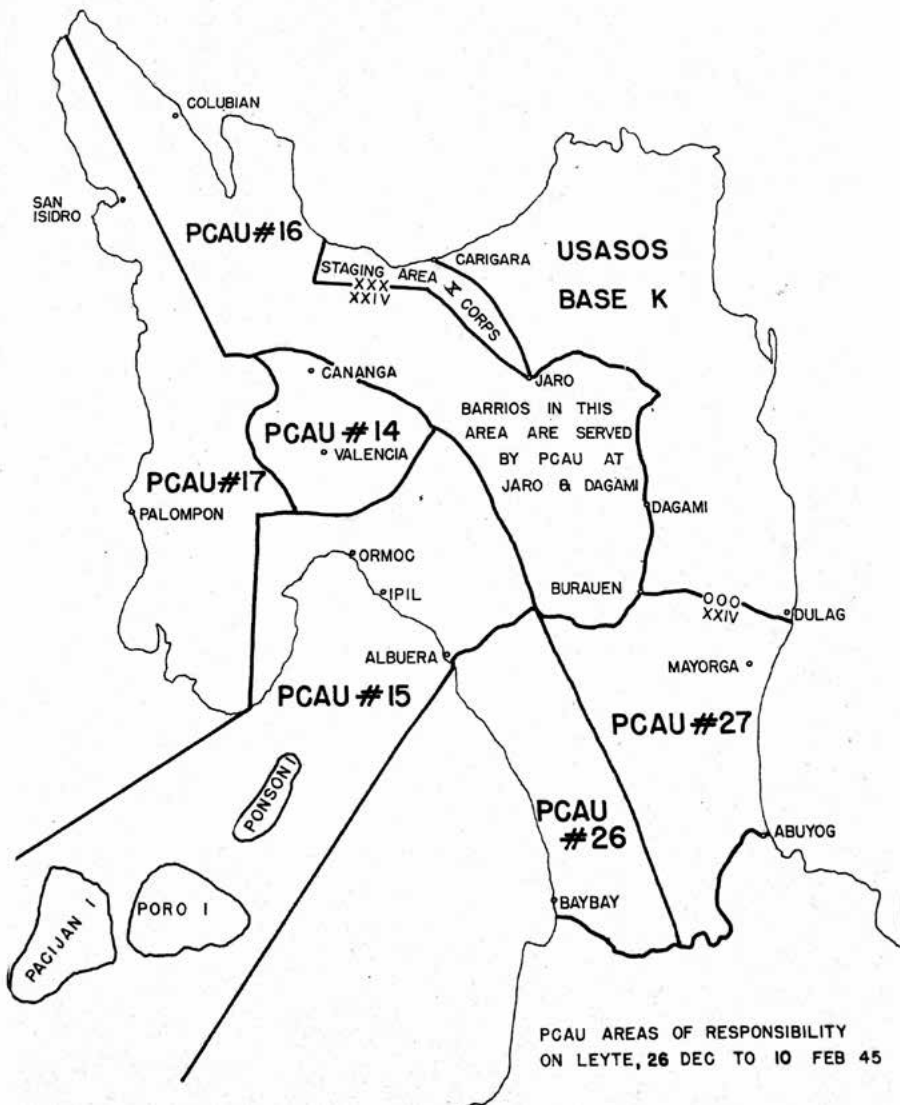
Letters from My Father Shed Light on War Duties

Three years ago, I finally unbundled my father’s cache of 700 World War II letters to my mother, written while he was overseas for 17 months, and saved by her for reasons I will never know. During three



cases in the hospital, and if I had laboratory equipment the interest and learning could hold me 24 hrs. a day. The results of Jap starvation of Filipinos has resulted in all types of and grades of malnutrition diseases, particularly vitamin deficiency diseases. And when I think of the difference today from the first day our unit came here, the improvement is heart warming. People have filled out; no longer do I see that look of hunger, the signs

Top: Dr. Leo Smollar, the author’s father, at the hospital and dispensary in Palompon, Leyte Island, Philippines, in early 1945. Smollar was part of special Army civil affairs teams that established medical and other services on Leyte as Japanese forces were pushed out.” Above: In a February 28 letter to his wife, Smollar writes of the gratifying improvement he had witnessed—that the locals “have filled out; no longer do I see that look of hunger.”



A February 1945 Army map shows that Smollar's unit, PCAU 17, was assigned the western portion of the island, centered at Palompon.

decades of medical practice in San Diego, he never once talked to me about his Philippine experiences. But the written chronicle (intermixed with deeply personal expressions about family, life, and love) opened a door for me to research the unusual history behind these units and my father's role.

Historian Morton Netzorg, who annotated a massive bibliography of World War II works on the Philippines, called the PCAU story one that “few Filipinos or Americans know of even vaguely.”

The PCAUs were the brainchild of Gen. Douglas MacArthur and his civil affairs staff. In May 1942, MacArthur escaped by submarine from the Philippines as the Japanese army closed in on U.S. forces isolated on the island of Corregidor in Manila Bay. MacArthur had

held military and government posts in the colony on and off since the early 1900s and felt a close attachment to its people. In planning to retake the islands, the general believed deeply that his prestige was linked to successful post-combat civil recovery.

MacArthur's Idea: Restore Civil Society

Novelist and war correspondent John Hersey's 1944 novel, *A Bell for Adano*, had fictionalized the bungled effort by Allied forces in 1943 to restore civil society in Sicily after the German withdrawal, where combat staff officers micro-managed beleaguered civil affairs personnel. Lt. Col. Joseph Rauh, the top planner for MacArthur, used Hersey's novel as a template

for drawing up the Philippines strategy. He knew that the general dearly wanted to avoid chaos in the aftermath of invasion. In an oral history, he recalled, “I've always said that I helped write the plan based on the novel. I read it, and reread it, and read it again; a marvelous book, it taught you how to do civil affairs.” (Rauh, a U.S. Supreme Court law clerk before the war, later worked for President Harry Truman and became a longtime force in the Democratic Party.)

The final plans, which MacArthur forced on a reluctant War Department in September 1944, called for the 30 teams to revitalize combat-damaged areas with as little meddling as possible from regular military units. The idea was that self-contained teams would allow for a shorter period of military government and prepare the islands for independence, promised by the United States before the Japanese invasion.

The officers had specialties in medicine, law enforcement, agriculture, labor relations, and administration; enlisted men were culled almost exclusively from Filipino Americans from California who had volunteered for all-Filipino regiments to fight in the Pacific.

“I will finally . . . put my medical training to work.”

Of the political and military calculus factored into plans for PCAUs, my father knew nothing. In October 1944, he was simply one of thousands of soldiers cooling their heels in Hollandia, British New Guinea, awaiting a unit assignment. He was spending most days taking advanced coursework on tropical medicine—he had been sent to the Pacific because of that expertise—when word came in early November designating him as the medical officer for a civil affairs unit.

“Thank God I will finally have an opportunity to put my medical training to work!” he enthused. For the next several weeks, PCAU units 9–20 crammed information on Filipino language, politics, economics, and related topics. (The first eight units had gone ashore in the

initial invasion of eastern Leyte on October 20.) “There is quite a nice crew of lawyers, judges, prosecutors, doctors, college teachers, fellows who have been abroad, quite a contrast from the ‘dese and dosers’ of other units,” he wrote.

The units transferred to Oro Bay in Dutch New Guinea, then sailed on December 21 as part of a 48-ship troop convoy zigzagging its way to Leyte. On board, my father described an atmosphere at once of boredom and apprehension, with daily air raid drills.

“The closer you get to an area of action, the ‘cinema glamour’ of war presented back in the States is exposed for the fraud it is,” he wrote. “Everyone here sees war as hard, bitter, unpleasantly necessary duty.”

Only a Christmas Eve variety show provided a respite, held in the late afternoon heat before blackout began; a solo trumpeter “brought the crowd to tears with a full-of-feeling rendition of White Christmas.”

Ashore at Dulag city on December 28, the unit waited for equipment to be off-loaded amid stifling heat, humidity, monsoon rains and nightly air raids, although MacArthur had declared victory on Leyte. On January 3,

PCAU 17 moved west over tortuous mountain roads and set up in Palompon, the scene of heavy fighting through Christmas Day.

The town had been pummeled by American air and artillery bombardment, with only two buildings left undamaged; it swarmed with refugees forced to the coastal plain by the retreating Japanese. An estimated 25,000 Japanese troops remained scattered but potent in mountains to the east.

Letters Offer Detailed Descriptions Of the Worst of Human Suffering

The first of many medical reports that my father, along with other PCAU doctors, filed weekly with MacArthur’s headquarters in Australia (and now stored at the National Archives) provide only a staccato-like glimpse into Palompon’s initial medical situation: one tent hospital with 27 beds, all filled; 17 civilian war casualties; two dispensaries (clinics) with 1,122 patients, a third of them with tropical ulcers (skin lesions known as jungle rot) or yaws (a bacterial infection where skin and bones swell); 396 serious cases.

His letters affix the desperate human suffering to the statistics:

The population has been underfed, under-clothed and overworked by the Japs. Many, many cases of worms and parasitic infestations. Child mortality is high. Vitamin deficiencies and beri-beri are widespread. Tuberculosis is high. Sanitation is very poor. Most common diseases are intestinal and spread by bowel movements done everywhere. Must alter the custom of defecating whenever and wherever urge comes. No hospital but only a half-destroyed two-room structure used as a clinic. The sick are numerous and there’s a continuous stream of civilian infected and wounded, some deliberately bayoneted by Japs. It’s more than enough to make your heart bleed.

In the first week, PCAU-employed laborers cleared rubble along the shoreline for a permanent 50-bed hospital in addition to the tent. In a single day on January 6, my father treated 200 starving refugees in rags, vaccinated for smallpox 35 children who had never seen a doctor,

“The closer you get to an area of action, the ‘cinema glamour’ of war presented back in the States is exposed for the fraud it is,” he wrote. “Everyone here sees war as hard, bitter, unpleasantly necessary duty.”



This image taken by Smollar shows some of the Filipino children who came to the clinic.

and lectured a large group on how to dispose of human waste to prevent the spread of disease.

A Rockefeller Finds Medical Supplies

But death was everywhere, including for American soldiers in what MacArthur had called "mopping up." Wrote my father: "Watching wounded come in is not the prettiest pastime. You can tell the dead at first sight by the undisturbed flies on the yellowing white skin or face or whatever anatomical surface you can see. The real job of mankind should be war prevention, just like disease prevention."

Equally wrenching were the ulcerated children, "so many emaciated, undernourished, with even two- three- and four-year olds suckling at their mothers' breast, so deficient has been the diet under the Japs."

Below: Smollar mentioned meeting Winthrop Rockefeller, a supply officer with the Army's 77th Division, in his letter of February 1. Rockefeller helped procure medical supplies for PCAU 17.

The initial shipment of supplies quickly ran short, but my father struck up a friendship with Winthrop Rockefeller (a scion of the famed family and later governor of Arkansas), the supply officer for the 77th Division of the Eighth Army, which was still fighting nearby in the mountainous terrain.

Rockefeller provided many needed medical provisions for a month and was singled out for recognition by one of MacArthur's aides. "He's very efficient, he's an OK guy," my father agreed, a major concession for a poor Chicago native who leaned left politically.

If his medical descriptions breathed life into the dry weekly reports, his assurances to my mother that combat was apart from his daily routine were substantially understated. In a January 12 letter he recounted the rough, muddy, and corkscrew mountain road required to drive between Palompon and the larger port of Ormoc, where Rockefeller's supply depot was located. Four days later, he wrote that for "comfort's sake" he would now travel by boat between two towns, his

rank of major sufficient to procure services of a small Navy craft. What he failed to mention was that the PCAU's commanding officer and four enlisted men were killed that same day on the same mountain road in a Japanese ambush while riding in a supply convoy.

In late January, he apologized that he had not written for several days because of urgent hospital business, omitting details of a rushed boat trip north to Villaba town. There, nasty fighting with many casualties, military and civilian, took place between American troops and organized Japanese army units making a last-ditch effort. A few rounds of friendly fire from the fighting were directed by mistake toward his craft.

And only several months later, in May, did he recount the nightly Japanese air raids from January until March, when he would climb out from his slit trench to hear civilians calling, "Doctor Smollar, come quickly, there are wounded" and throw clothes over pajamas and rush to the hospital to treat assorted injuries.

Philippine civilian doctors, and I expect to have some relief. I am getting to the stage where I don't care too much how competent they are; sooner or later they (the locals) have to take over and sink or swim. So I'm giving them free reign while I supervise, make rounds on patients, and check public sanitation. And I'm starting this now.

At supper last night one of the guests was Winthrop Rockefeller, and he and I (fact - no pomposity involved. Know you're interested) shot the bull. I avoided politico-economic subjects, merely discussed his cousin^(or was) in the 33rd when I was there - and "uplift" work. You know, darling; how to help the poorer classes and elevate the foreigner. Of course brother John is the "foundatio

Dr. Smollar Performs His First Surgeries

Rockefeller was never able to procure laboratory or other equipment for PCAU 17, so my father was forced to work without a microscope, x-ray equipment, or specialty devices. “It’s heart-wrenching to have to send someone home with aspirin knowing that the patient could die” for lack of surgical equipment.

Though trained as an internist, he began to perform operations out of necessity.

In February, he did his first major surgery, amputating a hand above the wrist on a patient whose fingers and thumb had been blown off by vengeful Japanese. The following week he performed an emergency amputation of an arm to save a fisherman and did an appendectomy for an elderly woman. He undertook a knee surgery five days later. “I finally chiseled a surgery book from a combat medical unit and that’s helped a lot,” he wrote. “The only thing I dread now would be a case of demanding bowel surgery.”

His first encounter with Japanese prisoners came in late January, brought to his hospital by Filipino guerrillas who had captured them in the hills—one with a bullet wound to the chest.

“The MPs (military police) from the PCAU had to protect them because they would have lasted about two minutes if the local civvies got their hands on them,” he wrote. “Giving them medical help seemed strange at first. It’s the first contact I’ve had with the Laws of International Medicine and it brings home the emotional contradiction between war and law. They were so underfed and pathetic, and although I realized they were enemies, and dangerous ones if they had weapons in the hills, I could feel no personal animosity. All of this intrudes on the glamorization of war from armchair philosophers.”

High Marks from the Brass, But No Liquor in the Mail

My father, never entirely comfortable with career Army officers, crossed swords with the first one to replace the killed PCAU commander.

“He’s one of those careerists who keeps interfering,” he wrote on February 16. “Today I told him to go screw himself and that I will ask for a transfer if he keeps intruding, and he asked me not to do so, so I know that inspections from the higher-ups have rated my work highly.”

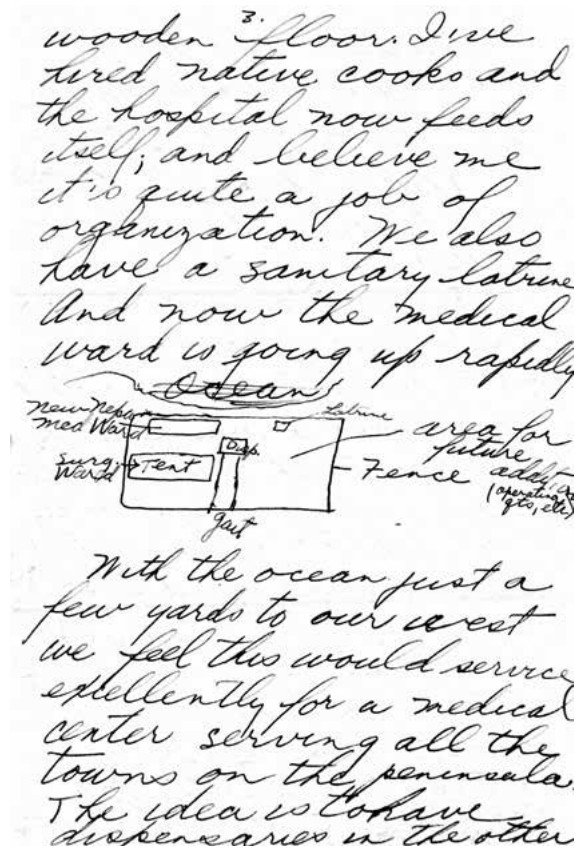
In fact, the previous week, Lt. Col. Edgar Crossman, a member of MacArthur’s staff, had visited PCAU 17 along with Maj. Ray Laux from the War Department’s Civil Affairs Division in Washington, D.C. Crossman wanted Laux to see a PCAU functioning close to continuing combat, to confirm reports of Rockefeller’s assistance and validate rumors of problems with the new commander. My father wrote that Laux took numerous photographs of the medical set-up and offered high praise.

In an unpublished memoir, Crossman said the visit confirmed his view of the commander’s incompetence. Within weeks, he replaced him with an officer who my father said “actually is a swell fellow with plenty of brains.”

Mail delivery was a perennial complaint in field units, and the new commander brought sacks of overdue mail with him. He also provided proof of mail theft within the Army’s postal service, another common gripe, “having carefully mailed a package to himself from New Guinea with a bottle of liquor, and it arrived finally, minus the liquor.”

Life Gets Back to Normal As Hospital Visits Drop

By early March, the Palompon region was slowly on the mend despite the daily drama of life and death. The PCAU unit had established a working system of food distribution, price controls, and retail stores. A few farmers had returned to the fields, and daytime fishing resumed as



Smollar’s letter of January 20 reported the good early progress being made on the Palompon hospital and included a sketch. The ward was “going up rapidly,” and staff had organized the kitchen and built a sanitary latrine.

a Navy embargo was loosened. Schools were functioning, and some local government functions had been handed over to commonwealth officials. The town received a working short-wave radio.

The weekly statistical reports throughout March showed a decrease in hospital admissions to an average of 16 a week. Four clinics now operated in the region; almost 2,000 residents were being seen weekly for noncombat injuries or illnesses, with dysenteries, vitamin deficiencies, tropical ulcers, and tuberculosis cases still predominating, though many less severe.

“People have filled out,” my father wrote. “No longer do I see that look of hunger, the signs of under- and malnutrition,” though “fat and chubby persons are still unusual.” Three days later, he penned, “I can now leave the community with a functioning medical system where there was none when I arrived.”

A handful of Filipino doctors had come back to the area and were working alongside my father. “They will gain in competence and

sooner or later they have to take over and sink or swim, so I am starting to do more supervising now.” On March 26, the hospital got electric lights, “the equivalence of the Union Pacific meeting the Central Pacific for the transcontinental railroad.” This made refrigeration possible for long-term medicine storage.

Children Who Survive, Children Who Die

Nevertheless, there continued to be mood swings day to day. On March 19, a 12-year-old girl died from a rare infection, several mothers had miscarriages, and another amputation was required. A week later, a year-old child came to the hospital with severe amoebic dysentery, too late to save. “It’s depressing that the baby would have lived easily had the mother brought it here earlier but many still never come in time,” he wrote.

On April 4 he described the too-common scene of a child’s funeral procession, a slow, sad movement down the main street, from the church next to the hospital to the local cemetery. Yet the next day, he was enthusing about the PCAU’s new mascot, a six-year-old named Bartholomew, an orphan who had been near death from malnourishment when brought to the hospital in February but now a healthy, mischievous boy. And he took pride in the large number of smallpox and typhoid vaccinations for children.

Because of censorship, my father could not mention his specific location in letters. In one letter, he had described a well-to-do young woman whose family had been trapped in the area when the war began in December 1941, and who had managed to intercede with Japanese commanders during the occupation to free some prisoners. Because she had pharmaceutical training, my father hired her as a hospital assistant. In the first days after Christmas, a wire service war correspondent with the 77th Division interviewed her about her experiences because she spoke idiomatic English, and the story was printed widely in stateside newspapers with a Palompon dateline.

“It’s depressing that the baby would have lived easily had the mother brought it here earlier but many still never come in time.”

That’s how my mother found out where my father’s unit was situated. Only in April could he begin to dateline his letters from the town. Japanese resistance was finally being subdued; one-third of the 80,000 Japanese army deaths on Leyte came in the “mopping up” period, “physically the most terrible fighting we were ever to know,” a U.S. Army history recounted.

“No subject of Hirohito kowtows to a Filipino.”

The incongruities of postwar recovery continued apace. As life returned to normal, several of the PCAU’s Filipino-American enlisted men took local women as brides in elaborate church ceremonies. My father’s driver was married on April 30 by an American military priest. “The local priest had been charging 76 pesos (33 dollars) even though the prewar fee was 14 pesos and still is except for soldiers. Our CO finally said the gouging had to stop and brought in our own priest,” he wrote.

Another church-related story was less amusing.

Because he treated their injuries, my father had extensive conversations with Filipino guerrillas, who had carried on hit-and-run tactics against the Japanese throughout the occupation. At one point, several Japanese officers had been trapped in a village church by guerrillas. They refused to surrender, asserting that “no subject of Hirohito kowtows to a Filipino.”

So the guerrillas had a war council and decided to burn the church down despite protestations from the priest about destroying a House of God. “But the guerrillas said that the devil was now in God’s house and it must be destroyed,” he wrote. “And so it was. In telling the story, they find the act heroic but I personally don’t find it noble to for a mob to cremate a few individuals. For me, it’s just another in the long series of bloody incidents of war.”

In early May, the PCAU prepared for transfer to northern Mindanao, the latest island in the Army’s methodical retaking of the archipelago. A contingent of personnel had already been dispatched to the small island of Masbate, whose 5,000 residents needed food, supplies, and a clinic after brief fighting in April to liberate it. Sanitation issues continued to vex my father and his PCAU colleagues to the final day on Leyte, since improvements were key to long-term health improvements, especially for children.

“It’s just hard work because squatters don’t like box latrines,” he wrote. “We have seen some improvement because the CO has had 14 people arrested for indiscriminate defecation. Usage is now up but we have to hope the local officials will keep on it after we are gone.”

Dr. Smollar Finally Gets Some Help

The PCAU contingent had three days of real meals—not out of cans—while the Navy transported them to Macajalar Bay in northern Mindanao, where elements of the 40th Division had landed on May 10 to



To learn more about . . .

- How the Allies moved island-by-island toward the Japanese mainland, www.archives.gov/publications/prologue/2010/fall/.
- How the Japanese plan for a decisive naval battle, the “Z” plan, ended up in American hands, go to www.archives.gov/publications/prologue/2005/fall/.
- How FDR asked for a declaration of war, go to www.archives.gov/publications/prologue/2001/winter/.

sweep Japanese forces into a pincer trap with troops of the 31st Division moving north.

The area is one of the most fertile regions of the Philippines and included the Del Monte Pineapple Plantation. As such, the urban area was far more developed than Leyte, with asphalt roads, modern buildings, and water systems, though badly damaged by artillery and bombing. There were numerous native physicians to help my father establish seven clinics and two hospitals for a large region with some 200,000 civilians, and reopen two hospitals that had operated before the war.

While supplies were usually adequate, as division headquarters were next door to his unit, sufficient nursing help was a problem because so many women had fled to rural areas away from major Japanese military concentrations. (My father would learn some of the reasons later.)

Noncombat medical cases centered on malnutrition and dysentery-related illnesses. They were exacerbated by the need to shift some PCAU food stocks to a reemerging Filipino Army and the fact that 95 percent of the population was infected with worms as a consequence of unsanitary wartime conditions.

Less Medical Work, More Administration

On Mindanao my father spent much of his time on administration, plying dusty roads in a Jeep, checking on clinics and supplies, or making two-day boat trips to the farthest reaches of the PCAU's responsibility. In one town, he was spurned over and over by guerrillas who refused to turn over a closed hospital for a new clinic. After five weeks of frustration, he turned to the local priest, who overnight procured the building. "You can get cynical fast, but then you have this religious father who relishes the never-ending struggle to improve the lot of people here."

In one of his clinical encounters, 12 Filipino women were brought to the main hospital for treatment of venereal disease after

3.
secondly, I had never catered to them, but had been gruff on many occasions, tough when I thought it necessary, and never hesitated to deliver almost abusive harangues when I thought it necessary—that was often.

Sweetheart, you should have seen me in action when those pathetic, skeletal-looking, starving children were brought in. They were really sad. And the children and infants would be so desperately sick. Yet I could and did steel myself to scold the mothers unmercifully, accusing them of harming their own children; and then I'd explain things. As I look back on it I wonder that someone didn't run me out of town. But they seemed to like it, actually did, and before I left the hospital was not a place to shun, was not a place to go to die, but rather a place to go to get well.

I realize all that now, and it feels good to know you've done something, made a start toward future progress.

And public sanitation! You'll be amazed to know that I've

Smollar's passion for his work was evident in his May 4 letter. He wrote of the "pathetic, skeletal-looking, starving, children" who were brought in and how he scolded the mothers for not improving their nutrition. Yet locals accepted the ward as a place to come and get well.

being freed from an inland town. They had been forced to work as prostitutes for Japanese soldiers for almost a year.

"They make us work just like carabao (buffalo)," they recounted in describing their forced sexual work. "Very, very painful." At the time, my father's reaction was disgust at "the war and the Japs who truly are inhuman." Decades later, their plight would be recognized as part of a system by Japanese occupiers in Asia to force women into prostitution for their troops; today it's

known by the Japanese euphemism "comfort women."

By July, PCAU 17 was one of only five special units still functioning, all on a reduced level, as the commonwealth government assumed most PCAU functions on the battle-scarred islands. With his work on Mindanao winding down, my father learned that his singular labor of love in the Philippines, the hospital in Palompon, had been closed, along with three other PCAU facilities on the west coast, because Leyte health officials

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SECRET

Villaba Reports not included, record have not arrived by barge.

Form C-1, P.H.-1, Hq Eighth Army

COMMUNICABLE DISEASE REPORT (WEEKLY)	NUMBER OF NEW CASES FOUND DURING THE PERIOD OF THIS REPORT	ESTIMATE IS TO WHETHER THE NUMBER OF CASES IS "MORE", "AVERAGE", OR "LESS" THAN THE USU/L NUMBER EXPECTED IN THE AREA
PHILIPPINE CIVIL AFFAIRS UNIT # 27		
GEOGRAPHIC AREA: <u>Falcompon, Leyte, RA</u>		
ESTIMATED PRESENT POPULATION OF THIS AREA: <u>8000 to 10,000</u>		Doctor unavailable for <u>barrio dispensaries. No</u>
PERIOD OF THE REPORT: FROM <u>17 March</u> TO <u>22 March</u> , 1945		<u>over all patients are sent to Falcompon. No</u>
DATE REPORT DISPATCHED <u>23 Mar 1945</u>		<u>less may do escape our observation and diagnosis</u>
SIGNATURE OF COAU OFFICER		
First case to be found should be reported by tele-graph or radio to Public Health Officer, Civil Affairs, Hq 8th Army	(Cholera) (Smallpox) (Plague) (Typhus epidem-ic, louse born) (Tautsugamushi (scrub thypus))	
1. Malaria	2	
2. Dengue	17	
3. Dysentery, bacillary		
4. Dysentery, amebic		
5. Dysentery, undiagnosed cause		
6. Gastro-enteritis		Less than usual count
7. Typhoid fever	ENTERIC 57	though this report is
8. Paratyphoid fever	UNIDENTIFIED	for six day period of
9. Meningitis, epidemic		does not include Vill-
10. Measles		aba.
11. Chickenpox		
12. Diptheria		
13. Encephalitis		
14. Poliomyelitis		
15. Influenza	5	
16. Mumps		
17. Pneumonia	2	
18. Weil's disease		
19. Typhus, murino, flea borne		
20. Jaundice epidemic		
21. Yaws	10 (Diminished but the second new clinic is	
22. Ascariasis	17 (on Friday, and change of day may account	
23. Hookworm	(for this, those patients do not come be-	
24. Schistosomiasis	cause it is known that treatment is not	
25. Tuberculosis, active, infective	(available)	
26. Syphilis		
27. Gonorrhoea		
28. Lymphopathia venereum		
29. Granuloma inguinale		
30. Leprosy		
31. Rabies		
32. Tetanus	1	
33. Anthrax		
34. Trachoma		
35.		
36.		

II. STATUS OF MEDICAL SUPPLIES.

Good at present.

III. GENERAL SANITATION.

Improving steadily

IV. IMPROVEMENTS MADE OR CONTEMPLATED DURING PERIOD OF REPORT.

Plans for school children immunisations finally completed. To be carried out.

V. REMARKS. *By use of threatened legal punishment, preliminary education, persistent urging by sanitary men, the laborious work shows steady improvement. Enteric diseases showing diminished incidence.*

LEO SMOGLAR, Maj., MD
(Medical Officer)

had a budget sufficient for only one regional hospital. One of his clinics remained open to continue the sanitation effort.

"There's no use discussing the reasons because these things always boil down to money and politics, and of course there is nothing I can do," he wrote bitterly. "My efforts count for about as much as a cockroach in a restaurant."

PCAU's Relieved Combat Units Of Civil Affairs Functions

But similar closings and consolidations took place on every island, as the American propensity to "save the world" ran up against real world barriers of time, money, and culture. Some civil affairs officers had cautioned early on that the Philippines' infrastructure could not sustain all the PCAU accomplishments after the teams departed. (Today, two hospitals established by PCAUs in the capital of Manila are still operating.)

Disillusioned, my father's thoughts increasingly turned to postwar life at home, even though he feared his team's next assignment would be to accompany a fall invasion of Japan. A return became realistic only with news on August 9 that the first atom bomb had been dropped on Hiroshima and that Russia had invaded Japanese-occupied China.

"Right now I take no joy in having been part of the Philippine's [sic] liberation," he wrote. "My joy is seeing us defeat the Japs. Everyone is asking only one thing, when do we go back to the States?"

In his August 1945 final report on Philippine Civil Affairs, MacArthur stressed that the units prevented widespread starvation, epidemics, and public disorder, all real fears at the time of his island-by-island invasions.

His aide, Lt. Colonel Crossman, wrote that the "nearer that Army units got to the fighting, the more the Army appreciated civil affairs" because PCAUs relieved combat

Left: Smollar's weekly report of March 23 reveals medical cases of malaria, dengue, typhoid fever, yaws, pneumonia, and others. With immunizations planned, the general situation was improving, he reported.

16 June 1945

Subject: Transfer of Medical Installations under
PCAU # 25 to the Philippine Commonwealth
Government.

TO : Civil Affairs Hqs. Eighth Army
APO 343

Thru : Channels

1. The following information is submitted relative to the transfer of medical installations on the Baybay - Ormoc - Palompon - Villaba Area, to the Philippine Commonwealth Government.

a. Baybay Civilian Hospital and Dispensary, (Baybay, Leyte) was designated by the Commonwealth Government as the only Civilian Hospital to be maintained on the western coast of Leyte.

The Philippine Commonwealth Government representatives suggested that a 45-bed hospital is necessary to accommodate all the western towns. The suggestion was carried out and facilities for such were completed before it was officially transferred on June 13, 1945.

All the hospital equipments in Ormoc and Palompon Civilian Hospital were transferred to the above installation to equip it as fully as possible.

Food and medical supplies were given to sustain the hospital for the coming month.

b. Ormoc Civilian Hospital and Dispensary (Ormoc, Leyte): The Ormoc Civilian Hospital was closed on June 12, 1945 and its equipment moved to Baybay. The Dispensary, however, is continuing and was officially transferred to the 11th Sanitary Division, Bureau of Health, Philippine Commonwealth Government on June 13, 1945. The 11th Sanitary Division has a staff of one medical officer and three sanitary inspectors.

Sufficient equipment and medical supplies to carry on emergency and dispensary work were consigned to them.

c. Palompon Civilian Hospital and Dispensary (Palompon, Leyte). The above Civilian Hospital was closed

By June 1945, the Army planned to transfer medical functions to the new Philippine Commonwealth Government. However, to Smollar's dismay, the Palompon Civilian Hospital and Dispensary was closed.

units of responsibility for civilians. A public relations officer for several PCAUs, Capt. Ted Sendak, noted that the "we know best" attitude among Americans sometimes grated on Filipinos, who nevertheless remained grateful.

"If certain weaknesses in the relief effort suffered from the American and Filipino character, the PCAU strengths also boasted the idealism and practicality of both," Sendak wrote. "It was no pristine panacea but still a very human American effort."

And my father came around again to a more positive view of his time in the Philippines, despite his deep disappointment that much of the work now seemed ephemeral. In one of the last letters before coming home, he wrote, "We kept the civilians out of the Army's hair and did a lot of health and welfare assistance. I realize that it feels good to know you've done something, that in the midst of war we made even a start toward future progress." P

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NOTE ON SOURCES

My father's letters, written over a 17-month period in 1944–1945, provide the basic narrative. Several record groups at the National Archives in College Park, Maryland, contain critical documents that confirm and expand upon material from the letters. The most important is Record Group (RG) 496, Records of General Headquarters, Southwest Pacific and United States Army Forces Pacific. Entry 385 has documents from the Civil Affairs Section, and boxes 2289–2295 contain the weekly PCAU reports filed by the 30 teams. Entry 233 has files of the Adjutant General, and box 1805 holds a detailed history of the PCAUs, written in August 1945 by the Civil Affairs Section of U.S. Army Forces Pacific (GHQ, AFPAC). Entry 589, box 351, contains periodic special reports by a few PCAUs compiled by the Civil Affairs Detachment of U.S. Army Forces in the Far East (USAFFE).

Records of the World War II Philippine Archives with PCAU references are in RG 407, Records of the Adjutant General's Office, 1917–, World War II Operations Reports, at entry 427, boxes 17838–17840. While not comprehensive, these reports are still useful in understanding PCAU activities. Records for several PCAU operations are found in RG 112, Records of the Office of the Surgeon General, U.S. Army, at entry 31,

box 213, Office of the Surgeon General (Army), Southwest Pacific Area; and at entry 1012, box 529, the HUMEDS Collection. Other PCAU information comes from RG 165, Records of the War Department General and Special Staffs, Administrative History, at entry 463, box 38, Civil Affairs Correspondence.

Donovan Research Library at Fort Benning, Georgia, contains comprehensive Leyte invasion operations reports for the Sixth Army, Eighth Army, XXIV Corps and 77th Division; all include PCAU and Civil Affairs discussions. CARL, the online Combined Arms Research Library for the U.S. Army Command and General Staff Library, offers the document "Cases and Materials on Military Government," containing PCAU reports, issued September 15, 1945, by the U.S. Army Civil Affairs Staging Area in Monterey, California.

The Joseph Rauh oral history is held at the Harry S. Truman Library in Independence, Missouri. The unpublished wartime memoir of Lt. Col. Edgar Crossman is online courtesy of his children.

The most useful secondary sources include: "The Philippines and Okinawa," chapter 16, by Thomas Turner M.D. in *Civil Affairs/Military Government Public Health Activities*, vol. 8, of *Preventive Medicine in World War II* series (Medical Department, U.S. Army, 1976); *Leyte: The Return to the Philippines* (Office of Military History, U.S. Army,

1954) by M. Hamlin Cannon; *Triumph in the Philippines* (Office of Military History, U.S. Army, 1963) by Robert Ross Smith; *The Philippines in World War II and to Independence, An Annotated Biography* (The Cellar Book Shop Press, 1995) by Morton J. Netzorg; *In Our Image: America's Empire in the Philippines* (Random House, 1989) by Stanley Karnow; *The Japanese Occupation of the Philippines*, vol. 2, (Bookmark Manila, 1967) by A.V.H. Hartendorp; "Operations of the 77th Infantry Division (XXIV Corps) in the Ormoc Corridor, Leyte Island, 7 December 1944–February 1945" (The Infantry School, Ft. Benning, 1948) by Maj. Marshall O. Becker; "The Operations of the 164 Regimental Combat Team (Americal Division) in Western Leyte, Philippine Islands, 1 February–10 March 1945" (Command and Staff College, Fort. Leavenworth, 1947) by Lt. Col. James Taylor, Jr.

Two individuals helped me immensely: Eric Van Slander, World War II military archivist at the National Archives at College Park, patiently guided me through the maze of war documents until I uncovered the critical PCAU weekly reports; and Genoa R. Stanford, reference librarian at Fort Benning's Donovan Research Library, located key PCAU-related material to expedite my search at the National Archives.