

Trudy Rice's Story

Nursing and Race in Oregon History

by Christin L. Hancock

IN 1968, GERTRUDE “Trudy” Rice became one of Oregon’s first African American registered nurses (RN). She recently narrated her life story, particularly focusing on her education and work in this state. Rice’s story specifically reflects the history of black women nurses in Oregon; the region itself and the state’s long history of racial exclusion and discrimination played integral roles in shaping her experience. Her story is also reflective of a broader national narrative, one that engages the history and experiences of professional African American women more generally. As such, Rice’s oral narrative is not only a significant contribution to local Oregon history but also contributes to important historical themes regarding race, gender, and power inequalities in the paid labor force.

The historical and scholarly significance of Trudy Rice’s narration of her story cannot be overstated. As Gwendolyn Etter-Lewis has argued, the devaluation of oral narratives as inferior to other forms of autobiog-

raphy is the result of cultural bias that has privileged white male voices. According to Etter-Lewis, oral narrative is an essential and valuable genre for highlighting African American women’s experiences in particular. It is a genre that challenges the myth of “invisibility” that often obscures the experiences of women of color in scholarship on both women’s history and African American history.¹

Rice’s oral narrative makes visible her work and her life experience as an African American woman by highlighting not only the ways in which she faced obvious and direct racism and discrimination, but also how she resolutely resisted that prejudice. In the narrative, for example, Rice describes watching white patients repeatedly walk past her desk, looking for the Team Leader Trudy Rice, whom they expected to be white. She recalls responding to their confusion: “Well Trudy hasn’t gone anywhere. I’m right here. I’m right here.” Literally working to make herself visible, Rice’s professional career — like that



Gertrude “Trudy” Rice joined a small number of African American registered nurses (RN) in Oregon when she graduated from Portland Community College (PCC) in 1968. Rice was part of the first RN program at PCC (then based at the Sylvania campus). Rice offers an analysis of her success, saying: “I’ve come this far by faith!”

of many African American women across the country — has been one in which she steadfastly connected nursing to social justice. In reflecting on both the challenges she faced as well as her perseverance, Rice attributes her success to an unwavering faith in God.² Finding support in friends, family, and

faith, Rice portrays her story as one ultimately steeped in hope.

And yet, the very fact that Rice found it necessary to resist racism in her daily work life suggests one of the most important contributions of her story. The oral narrative reveals that Rice regularly engaged in the unofficial and unpaid work of educating others about racism. As Etter-Lewis argues, African American women professionals were often well versed in dealing with explicit racism, sexism, and exclusion by the time they entered white, male-dominated professional positions.³ “In fact,” writes Etter-Lewis, “the discrimination often intensified as a woman advanced to higher levels in her profession.”⁴ Certainly that reality is reflected in Rice’s nursing career in Oregon, both in her work as a surveyor with the Health Department as well as in her role as nursing supervisor at Kaiser. Rice’s consistent interventions in racism and discrimination in the workplace, her creation of the Harmony Group as a cooperative response to that racism, and her role as a mentor to younger African American nurses all suggest that her job responsibilities unofficially expanded to include the work of fighting racism.

Historian Elsa Barkley Brown has argued for the importance of highlighting the “relational nature of difference” in understanding women’s pasts.⁵ Recognizing social interconnectedness, Barkley Brown notes that simply acknowledging difference in the historical record is not enough; that contributory process — merely adding the experiences of women of

color to a pre-existing historical narrative — only serves to reify difference and inequality. By contrast, Barkley Brown challenges women’s historians to explore “difference” in relationship. Rice’s story provides a rich point of entry for asking questions about the relationships between and among nurses of color and white nurses in Oregon.

Twentieth-century nursing history stands as a microcosm of the larger issues of race and gender in American history and culture. Long associated with women’s assumed roles as “care-taker” and “nurturer,” nursing provided women an opportunity to bring characteristics deemed acceptably “feminine” into the public sphere. In part, nursing history reflects a narrative of progress and professionalism as women moved from untrained and unpaid caretaking work to rigorous training programs that delineated that traditionally female work as a respectable, professional career path.⁶ As white women in particular benefited from that professionalization, however, they often carved out public careers at the exclusion and expense of black women and other women of color. Historian Evelyn Nakano Glenn has noted that during the latter half of the twentieth century,

racial-ethnic women [were] disproportionately employed as service workers in institutional settings to carry out lower-level “public” reproductive labor, while cleaner white collar supervisory and lower professional positions [were] filled by white women.⁷

Professionalization in nursing had the practical effect of continuing and

exacerbating racial, ethnic, and class exclusion as well as stratification in the profession. In other words, registered nurses, at the top of the hierarchy, were overwhelmingly white and middle class, whereas women of color and working class women predominately filled the less prestigious, lower paid positions of practical nurses and nurse's aids.⁸ Increasingly during the first two decades of the twentieth century, women of color found training programs and professional organizations closed to them, thus cutting off professional opportunities in nursing.⁹

In Oregon, in order to make headway into nursing and other professions, African Americans needed full integration and equal access to educational opportunities and professional organizations. Although by 1900 several important individuals had blazed trails in Portland, establishing black-owned businesses and newspapers, overall few roles existed for blacks in the professions.¹⁰ As historian William Toll has noted, during the first two decades of the twentieth century, Portland's black population was successful in establishing a "home-owning working-class community," but its small size combined with racial hostility meant that most blacks continued to depend on white-owned wage labor, resulting in "economic stagnation" for the next generation.¹¹

Efforts at passing legislation to illegalize discrimination, which began early in the twentieth century, increased in the aftermath of World War II. Through the work of the Urban League and the local chapter of the

National Association for the Advancement of Colored People (NAACP) in particular, Oregon finally passed a State Public Accommodations law in 1953, outlawing racial discrimination.¹² Although that law was an important step in opening the professions to Portland's African American community, it was, nonetheless, only a first step. Like the national civil rights legislation of 1964, it was negative legislation, simply outlawing overt discrimination—necessary, but not enough to eradicate a long history of racism.

When Trudy Rice graduated from the nursing program at Portland Community College (PCC) in 1968 and began her nursing career, she was clearly still an early pioneer. Historian Patricia Schechter has noted that "in the 1970s, RNs in Oregon were 95% white."¹³ During Oregon's post-civil rights era, a still relatively small black population, combined with continued racial hostility, set the context for Rice's work as a nurse. As Rice began to establish her career during the 1970s, she, along with a handful of other women of color, began to write the pages of a new and continuing history of black women in the professions.¹⁴ That more recent history importantly highlights the distinctive nature of African American women's experiences. It reveals power inequalities in the workforce even as it provides an example of determined resistance. Very much under-studied, this recent history demands the attention of scholars and new scholarship; in other words, we historians have much more work to do. Thankfully, we have the

stories of women like Trudy Rice to guide us in examining the time period.

Rice's story is particularly powerful because it acknowledges the continuing, recent historical injustices of American racism: from her descriptions of white medical personnel's assumptions that she must have been a member of housekeeping rather than a nurse to her experiences as a surveyor with the Oregon Department of Health in which skeptical business employees regularly called to confirm

her status as a state employee to the painful racial stereotyping that led subordinate nurses to give her a birthday cake decorated with the image of Aunt Jemima. Throughout such rich descriptions, Rice astutely employs her own analysis of racism through what she calls the "flip-side," a re-imagining of various situations in which race is reversed. Ultimately, it is Rice's telling of her story that provides readers a potential road map for change, for racial justice in Oregon.

TRUDY RICE: My full name is Gertrude Woods Rice, and my family was from Louisiana. We came here [Oregon] when I was four years old. So, I know little about actually living in Louisiana, but I did visit back and forth quite a bit. My middle name, Woods, is my original name [from] my father's side of the family, and he was from Louisiana, too. He was a neighbor of my mother's; they lived about a half a mile from each other down in Louisiana, down in the bayou, in the swamps, and that's where they came from. They came up here [to Portland, Oregon] during the [Kaiser] shipyard days. My father came in 1945, because he was in World War II, and he came after the war was over. So, my mom and my grandmother and grandfather and my sister and myself came here in 1944. That was a big thing that happened at that time. I guess lots of people came from down South up to the Pacific Northwest. We lived in Vancouver, Washington, and then we moved to Vanport, [Oregon], and we moved about six months before the flood in Vanport in Northeast Portland.

CHRISTIN HANCOCK: When did your dad join you?

TR: He joined us the end of 1945, after the war was over. I guess when they first came, they thought that they would be going back to Louisiana to live; but for some reason they decided to stay in Portland.

CH: Can you tell us what schools you attended?

TR: I attended Boise grade school — I loved it. And I attended Jefferson High School. I'm a proud Jeffersonian, proud Democrat, you know. So, I love Jeff and Boise, and I had lots of fun there. I really enjoyed going to school. We lived about



Rice (née Woods) and her family came to the Pacific Northwest from Louisiana in 1944, first settling in Vancouver, Washington, and then in Vanport, Oregon. The family moved to Portland in 1948, just a few months before Vanport flooded. This image, taken in Vancouver, is of three-year-old Trudy (far left) with her mother Pereace, infant sister Gertiemae, and her aunt Berniece (far right). Rice's father, Themous Woods, joined the family in 1945 after he was discharged from military service.



A thirteen-year-old Rice, wearing her Campfire Girls uniform, poses in 1954. By this time, Rice's family was living in Northeast Portland where she attended Jefferson High School.

a block from Boise, so we could hear the school bell when it rang and we [would run] over to the schoolyard to play. We lived probably a couple miles away from Jefferson, but we walked. We loved walking to school. It was very much a community. Our neighborhood was that village that they talk about. Everybody knew everybody's children, and everybody felt responsible. My neighbors were just as responsible for me as my parents were.

CH: Did you and your family attend any other organizations, like a church or a political organization?

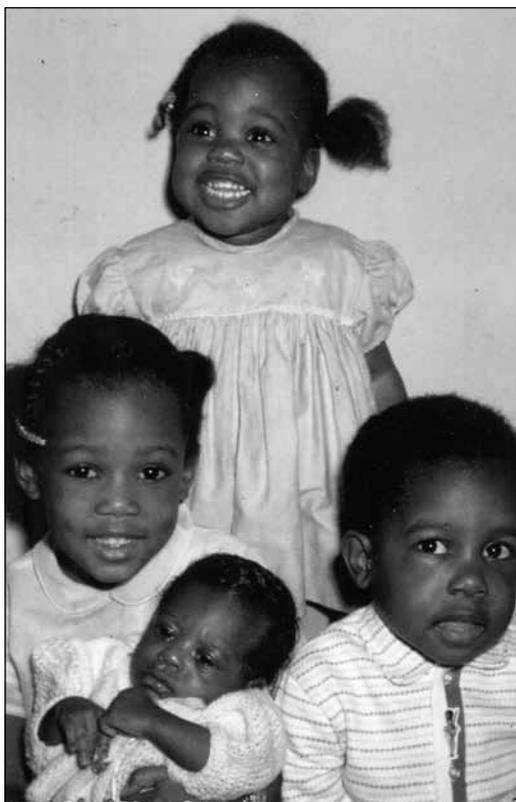
TR: Yes, we did. We were very religious. My parents had joined a church when they were in Vancouver, Washington, and the min-

ister of that church had moved to Portland [and] started up a little church. So, we were members of the Vancouver Avenue First Baptist Church. It became a bigger church later on, but we were very devout members. We attended church practically all day long. We came for Sunday school, and then we came for regular church, and then we'd come back for a program later on. Basically, on Sunday, we were in church most of that day. It was such a small community of African Americans that we basically all knew each other, and even though some of my friends went to other churches, we knew them, too, from school or from where they lived. So, we were pretty tight-knit.

CH: What about getting married, having your own family life, raising children, all of that?

TR: I started off at an early age having kids. I had one right out of high school, and I ended up with five kids. I loved each one of them dearly. I became an RN in 1968, [and] then I was married in 1969 and divorced in 1974. I ended up basically raising my five kids by myself. I didn't marry again until 1989; and then, in 1991, I was widowed. So those were all of their growing up years. At one time I raised five teenagers alone! And now I'm happily married. I married Harvey Rice in 1996, and we are still happily married.

I loved my kids; we enjoyed each other. It was hard work, but I loved the work and we just had a happy household. It was a struggle; but looking back on it, I would do it again. At one time, I worked three different jobs, and I was just very well organized. When I think how organized I was — I'm not anymore because I don't have to be — but with the five kids, you had to be organized and know what everybody was doing. I just really put my life into dealing with my children for a number of years, because I felt like it was what I needed to do. I think, because of them, I kept a good work ethic, because I wanted them to see that you could work and still be okay and make it. We were not rich, but we could make it okay. You could have a roof over your head, and you could have clothes, and we could have food; and we went places every now and then. We went to Lincoln City a lot, and we enjoyed it there. It was great fun, and if we didn't go to the beach, we liked to go to the parks on the Sandy River and just have a nice picnic. I could have stayed home and felt bitter about being single with five kids and being overwhelmed; but I thought it was important to get out and get the kids off the street. And I took



By 1964, Rice had her Licensed Practical Nurse (LPN) certification and was raising four children (and was pregnant with her fifth, Kelvin): Kathy (left), Keith (infant), Kimberly (top), and Kenneth (right).



From 1968 to 1973, Rice worked as an RN at the Holladay Park Hospital in Northeast Portland, rotating between the Psych and Medical Surgery Departments. In this photo, Rice's coworkers surprised her with a cake for her thirtieth birthday in 1971.

the kids to Disneyland a couple of times.

CH: So at one point you mentioned that you worked three jobs at one time [Trudy laughs]. What were those three jobs?

TR: I was working full time for Portland Public Schools. I was the health coordinator, and I had to be at work at 8:30. I worked from 8:30 to 4:30; and every Tuesday and Thursday evening from 7 o'clock to 11 o'clock, I worked in a community clinic. We had residents [physicians], I think they were, who came down from University of Oregon Health Science Center [in Portland] to work in the clinic, and I was one of the nurses. And every other weekend I worked at Holladay Park Hospital from eleven

at night to seven in the morning on Friday and Saturday evenings. I had it scheduled so it just worked out. I have three check stubs somewhere that I put away, and I can't find them. I guess I'll eventually find them [Trudy laughs]. I have my first paycheck for Holladay Park [for] \$1.68 an hour [Trudy laughs] that I was proud of. I did those three jobs for probably three or four years, and I worked because I wanted them [the kids] to have all the things that kids want when they're that age. I didn't want them to go without. I don't think they even thought anything about it. I just would arrange things and go to work. On a Saturday, sometimes, I would cook three or four different dishes. I might make spaghetti and lasagna and chili or whatever, and then I would put some in the freezer so that on those Tuesday and Thursday evenings, when I knew I was going to be working, I could just pull something out of the freezer. And it worked.

CH: When did you first know that you wanted to be a nurse?

TR: When we were like eleven, twelve, we lived maybe four blocks from Emanuel Hospital. My sister and I used to ride our bikes up that way and look in the window, and we'd see the nurses in there with their starch-white uniforms on and their white caps on and I would look in there and I'd say: "Well I'm going to be a nurse like that one day." I always liked to help people. I was always concerned

about people, and my mother was one who if someone in the neighborhood had been sick or hurt or hospitalized or whatever, she would tell us to go over and ask them if there was something we could do for them.

As I got older, I still wanted to do things to help people in any way that I could. At one time, I remember, after my junior year in high school, we had gone to Louisiana, and I had seen some of the injustices that happened there. I saw all the signs: “No Colored Allowed,” “Whites Only,” you know, the colored taxicabs. And we had cousins that lived in Houston, Texas, and they worked in a restaurant where no coloreds were allowed, but still they worked there. And I remember becoming very upset about that and just something in me rose up. I was — I felt militant and all those different things — and at that time I said: “I’m going to be a lawyer, I’m going to right all the wrongs, personally, by myself” [Trudy laughs]. “I’m going to go out and right all the wrong.” And that was one way I thought I could help. But the way it ended up, I decided that I would like to be a nurse.

So I had a couple of kids, and I saw a program that someone had told me about to become a licensed practical nurse. It was through Portland Community College [PCC]. It was an evening program, so it worked out really great for me. So, I took advantage of that and got into that program and went through it and got my license as an LPN. I worked my first job at that time where I really made supposedly decent money. After five years, the program at Portland Community College opened up for the two-year RNs — the associate degree nursing program. So, I thought: “Okay, this is what I want to do.” Even though there were a number of people who applied — I think it was like two hundred or more applicants and they were only going to take in like fifty — I thought: “Okay, I guess I’ll have to take a chance.” So I took a chance, and I made the cut, and then the next cut, and then the next cut. So, I did get in. I was one of only two African Americans that they took in the program.

CH: This was in the RN program?

TR: This was in the RN program in 1967. So, I got into the program. It was difficult, and the person that was in charge was very strict and had lots of things she had to say about, you know, the different ones coming in. She didn’t think that I would be able to make it through, because she felt that all my kids would [make it] difficult for me. She taught me the word, “stick-to-it-ness.” She said you’ve got to have “stick-to-it-ness”: you have [to] be able to hang in there. She said she had a history of having some African Americans in programs, and they never stuck to it. So, I thought: “Okay, this is something that I’m going to do.” I mean, she didn’t know me, and she didn’t know how determined I was. I think she found out later [that] there were several other older people in the class — we were considered older, that had kids — and I think we all

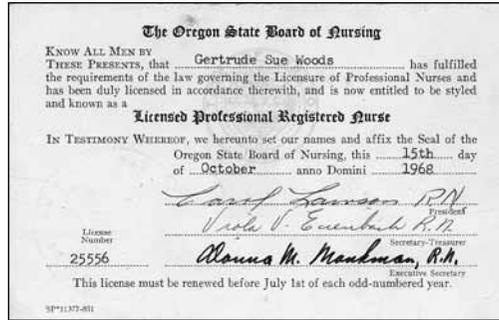
graduated. We were the ones that she thought were going to drop out, but I think the way it happened was I really didn't have time to waste. I was there for business, and so, I did the business that I needed to do. I saw other people, you know, playing around, and some of them didn't really study, or didn't do things until the last minute or whatever. But I was there for business. It was like I knew that I had to do this, because I had a family that was waiting for me. So, I went through it even though it was really challenging, even from just being in the training.

I [faced] obstacles where people made racist comments, and they had certain prejudices that they displayed to me in certain ways. For instance, everybody had to wear scrubs in surgery. So, one day, I was supposed to meet my group somewhere, and I had some scrubs on, and I was walking from one operating room and going down to another, and one of the doctors just bumped into me and said: "We need room three clean, can you clean it right now? I need it in ten minutes." He just assumed that I was on housekeeping. And I just looked at him, didn't say anything, and just kept walking. But, I mean, it's just things like that. And then the other terrible experience was [when] I was supposed to be observing a surgery and one of the doctors looked up and saw me and said: "Oh, how'd you get here?" And from that moment forward he started asking me every question that he ever wanted to ask a black person. I was supposed to be observing surgery, so I kept looking to my instructor for help, and she just kept her head down. She never looked up, and she never helped me. When it was over I said to her, "I needed your help." And she said, "I'm sorry but he's doctor so-and-so and he's the head this-and-this, and there's nothing I can do about it." But he just basically asked me every question in the world about black people: What do we eat? Where do we come from? What did my parents do? Did they really like it here? Were they planning on going back to Louisiana? And on and on and on. All while I was a student trying to learn.

At night when I put them [the kids] to bed at 8:30, I would go to bed too; and then I would set my alarm clock and get up at 12 o'clock and study for a couple a hours to 2 o'clock. That was my best time, because the house was quiet and I was able to concentrate. So, that's when I would do my hard reading. Other times, I'd take the kids to the park, and while they played I would sit with my books at the table in the park. I took them to the library, and I would sit in the little kiddy part of the library. My son was three when he got a library card and was one of the youngest kids to get a library card at that time — they did a little article on him in the paper from the North Portland library because he wanted his own books. We would go to the library, and I'd sit in that part and let them look in their books, and while they were looking in their books, I would study. I got good grades and got through.

CH: Did you see or have any role models of black women who were nurses?

TR: I think I knew two women who were RNs. One worked at OHSU, and the other one worked at Holladay Park Hospital. I didn't know them well, but I knew of them and knew that they were RNs. My aunt was an LPN, and I used to see her walk from where she lived up to Emanuel Hospital. She was busy, but I did talk to her a lot and we talked about nursing. [She] was my biggest role model as far as nurses go.



Rice had worked as a Licensed Practical Nurse (LPN) since the mid 1960s but wanted to pursue additional training. She completed her RN training in 1968 and received her Oregon State Board of Nursing license.

CH: You said that the supervisor in charge of the training program said that she didn't think you would make it because you wouldn't have the "stick-to-it-ness." Were there other people [who said] you were not going to make it?

TR: A lot of people said: "Okay you're a single mom with five kids. How are you going to do this?" It just seemed like such a huge mountain to climb; they just couldn't imagine that I would do it. At Holladay Park, where I had been working as an LPN, I realized that I was doing a lot of things that RNs did, but I wasn't getting paid for it. The head nurse there encouraged me. She said: "If you want to go back to school, you should try. You should go get your RN." And after I got [the RN], three or four LPNs came to me [for advice]. One lady in particular said: "Well, if you can do it, then I think I can try and do it." She got in the program, and she eventually did become an RN.

In my family, my mother and father [told me]: "Well if you're going to try to do it, go ahead and try." They called me the dreamer from when I was a kid. But I think everybody was surprised when I really finished up. Portland Community College really helped me out a lot, because I got a tuition waiver every year. They said if I kept my grade point above a C, I think it was, I got tuition waivers all seven terms. After each term, I would send them a thank you note and tell them how much I appreciated that. I still had to pay for my books. But I think everyone was surprised when I became an RN.

CH: Did you take time to celebrate that accomplishment?

TR: Well, I just jumped right into work, but I had to slow down a little bit. I

didn't realize how tired and beat I was. I had a doctor's appointment for some reason, and he said: "You have mono [mononucleosis]; you have just done it to yourself. You really need to rest." Rest, what's that? I had never rested for years, and so, he forced me to take off a month and he gave me an excuse from work and everything. I was getting ready to start working full time.

CH: Do you remember how many people graduated with you?

TR: I think it was about thirty of us that graduated.

CH: And you and one other woman were African American in the group?

TR: Yes, yes. The other woman was Ms. Lenora Morris. Lenora and I were friends for years, and right now, she's in a care facility. I've gone and seen her once, but she's still alive, yes.

CH: Can you tell us about the different jobs you held as a registered nurse in Oregon?

TR: I had worked as an LPN at Holladay Park Hospital — I had worked there part time while I was in training — so I continued to work there. I went back on the floor where I first started. The head nurse there, the one that had encouraged me to go back to school, told me when I came back that she was thinking about retiring. Maybe within a year after I came back, she retired, and guess what? I became the head nurse on that floor. So I was head nurse on the med[ical]-surg[ery] floor at Holladay Park Hospital, which was a big challenge, but I really enjoyed it. I learned all the basic things that you're supposed to learn as a nurse. I mean, you go through training, but you really, really learn it once you're at



Mrs. Trudy Woods and Mrs. Lenora Morris

Mrs. Trudy Woods and Mrs. Lenora Morris will be the first black women to graduate from Portland Community College through a new federally funded program which allows the student an Associate Degree in Nursing. The program differs from other nursing programs in that it takes six to seven quarters to complete the schooling when the others take from three to four years. The students will have Registered Nurses' Degrees when finished.

Both of the women were Licensed Practical Nurses before continuing their education. Graduation will be held August 16, 1968. After that date, the students will be eligible to take the State Board Exams in nursing. There is money available where need can be shown. Most of the women in the class have children. Older women were most interested in taking the class, as younger nurses are more interested in living on campus and enjoying the college life.

Rice and classmate Lenora Morris received press in local newspapers for their completion of the PCC Nursing program. Morris went on to a distinguished career as a nurse at Oregon Health and Sciences University.

work; and so, I learned all about IVs and catheters and all those kinds of good things and all the different procedures.

And, of course, the biggest thing that you learn is how to get along with the doctors and staff members and how to be a good team member. So, I worked at Holladay Park full time for five years from '68, full time, to '73. And then my marriage was falling apart, so my kids were at the age where I wanted to really be with them, because of what had happened. So, I had a chance to get a job with the school district, and I thought: "Okay, this'll be neat because I'll have the exact same hours they have — off on the weekends and off on the holidays — so this will give me a chance to be with them and not leave them so much."

When I worked at Holladay Park Hospital, I had to work every other weekend, and so, the kids would be at home alone on those Saturdays and Sundays. I would get these phone calls [from them], and of course I had told them: "Don't call me unless it's a dire emergency, do not call the hospital and call me." So [my] daughter Kimberly would call and say: "This is a dire emergency." And I would say: "Oh boy, what is it?" And then she would tell me something like, "there are two dogs in the backyard that are fighting" [Both laugh]. My one son — I have to tell this — they were fixing breakfast, and my youngest son, [the older siblings] picked on him, so he called me. Now this is Holladay Park Hospital. It's not a huge, huge hospital, but a nice size hospital, and he would call the hospital, the operator would answer the phone, and he'd say: "Let me speak to my mom" [Both laugh]. And they're like: "Okay, who is your mom?" And he had done it so much that all the operators knew him. He'd say: "I want to speak to my mama." And they'd say: "Okay, hold on Kelvin, we'll get you there."

So, when I got a chance to work for the school district, I said: "Okay, so now you know you guys really messed up because I'm going to be home with you every weekend. Now you won't be home alone again." So, I got the job with the school district. They wouldn't let me completely quit at Holladay Park. They said, "No, no, no, no, you're working for the school district you can probably still work part time for us," or "come back during the summer." After that, the next three or four summers, I still worked at the hospital. In both places — at Holladay Park and at the school district — I met good people that are still my friends. So, you know, that made up for all the other rude comments; it made up for anything else that might have happened. Good friends have helped me along the way, throughout all the years.

I worked at the school district from '73 to 1980. In 1980, I started working for the Department of Health through the state. I was a surveyor, as they called us, and so, I went in and checked out any complaints or anything that was going on. We had to see to it that everybody lived up to the regulations of the state, so any formal complaint had to be investigated. I ended up being on a team that investigated complaints, traveling all over the state, going to all the little small cities. You know, being raised in Portland, I knew how people felt and the

attitude of a lot of people; but when I worked for the state and I traveled to all the different little small places in Oregon, I think it was even more prominent, because I was going to places where some of those people had never been around people of color.

They had never worked with any people of color, never went to school with them, never in their neighborhoods, [never] went to church with them. So, this was a new thing to see a person of color come in and be in a position [to say]: “You either are in compliance or you’re not in compliance.” So, I wanted to represent in a way that would make everybody know that it was okay and to give them a different impression maybe from what they had about people of color or minorities — everybody had their way of describing it. Some said minorities, some said people of color, some people said African Americans, blacks; but everybody had their opinions about what they had heard or what they had seen. Every place I went, this was so.

This was so amazing to a couple of the nurses that worked [and traveled] with me. Every place I went either an administrator, or the director of nursing services, or somebody in a position like that would either have a story to tell about black people, a joke to tell, or some kind of little something that they just felt like they needed to say, just seeing me there. We couldn’t just come in, do the survey, do the exit interview, and leave. They always felt like they had to at least let me know that they either knew a black person, or that they once had a black person as a neighbor, or that this was the latest thing that they heard, or they just had to mention the fact — or let me know — that they knew that I was black. They couldn’t just leave it. So, I accepted it and [told myself]: “Okay, I’m just really doing my teaching thing.” I felt like, alright, every time they would step into it, it would give me a chance to either correct something or make a good comment, or whatever. But the person with me, it was upsetting them [Trudy laughs], because they were saying: “My goodness I’ve done this many times before, and these people have never acted this way, but now they see you and they feel like they need to say something or act a certain way.” So, it was interesting.

And I had many little incidents happen, especially when I was traveling alone. The way we were supposed to do it, when you walk in a place, you say who you are: “My name is Trudy Rice and I’m from the State Health Division and here’s my card.” And you wore your name tag, and you presented your card. So, they saw that, and then you would state the reason why you were there — either to do a survey or to follow up on a complaint or whatever. And I would do this and inevitably — it never failed, nine out of ten times — they would step back, look at me, and say: “Okay, excuse me a minute.” Then they’d go back and get on the phone and call my office [Trudy laughs]. They would call my office and say: “Do you have a person by this name?” The boss at the office was confused the first few times that it happened. He mentioned it to me when I was back in

the office: “When you go in, what do you do? Do you let people know who you are?” And I said: “Of course I do.” And he said: “Well, I get a phone call, a couple times a day, saying, you know, ‘This person is here, saying that she’s from the state health division and we just want to know for sure if she really is.’” So, [Trudy laughs] I had to make a joke out of it. I said: “I guess I’m going around the state, impersonating a surveyor,” which is crazy. Then one day, the boss mentioned it to me again, and I said: “You know why they’re doing that don’t you?” And he said: “You know, I think I’m finally getting it. At first I didn’t want to admit it, but I guess, I guess I see now.” And then it happened again, you know. Again they called him and asked him [about me], and he said: “They never do it with anybody else. They never call me and ask me, ‘is this really the person?’”

CH: And you were the only African American surveyor?

TR: Yes, in that office. That was from the State Health Division at the time. One time, we went in to do a survey, and as soon as the director of nursing services saw me, she said: “Will you do me a favor afterwards?” and I said: “Sure.” So, after we were finished, she took my hand and we walked down the hallway, and there in that room was a little old black lady. [The nurse] said to me: “Can you just talk with her for a few minutes? She hasn’t seen another black person in the last three or four years.” I [thought], “Whoa.” So, I said: “Of course I’ll do it. I don’t mind.” I went in and talked to this woman, and she was coherent but in and out a little bit; but I think was aware of who I was and that I was there, and she was surprised. I remember her eyes really opened up when she saw me like, “Well, who are you?” And I told her who I was and held her hand, talked. I got the brush and brushed her hair, talked to her for a few minutes. In the meantime, my partner waiting out there for me is dying. So, when I came back [and] told her what had happened, she just about went through the floor. She said: “Oh I’ve never heard them [administrators] act like this before, never, never.” But you know, it was one of those things that happened.

Another time, I flew into Pendleton — I had done it several times. We’d fly into Pendleton, get a state car, and then would drive to Redmond [or] near Redmond where there was a care facility. This particular day I got off the plane and headed over to the desk to have them send a car out around for me, and one of the young women behind the counter came out and blocked my way. She got in front of me and said: “What business do you have here in Pendleton?” And I said: “Excuse me?” And she says: “Well I want to know what business do you have here in Pendleton?” I said: “Well I have state business. But, you know, you need to move out of my way.” “Well I was just wondering,” she said. “Well do you have a card, do you have something to show that, that’s why you’re here?” Here is someone that’s working behind a candy counter in the airport that sees me come in. I’m dressed in a suit, with a briefcase, and she has nerve

enough to come around that counter and confront me and ask me what is my business there. I started developing this thing years ago — I call it the flip side. Can you imagine if a white woman had come with a suit on, with a briefcase, and a young black woman came up around the counter and confronted her? She would have lost her job. She would have been gone. It would never ever have happened. So that's how I look at things. If it was the flip side, what would have happened? And, yeah, this young woman, she was saying: "Well why are you here? What, what are you doing?" She couldn't understand how I could be getting off a plane and having a state car that they were bringing around for me to drive. Incidents like that really make you think.

I had pretty good rapport with most of the different facilities where I had to go in. I worked for the Beverly Corporation for several months, and then I went to Kaiser and, of course, I ended up working at Kaiser for twenty years. That was from 1984 through 2004. They needed a nurse at Interstate Clinic, and I thought: "Oh my goodness. That's only ten minutes away from my house." I was going to take the place of a nurse on sick leave and then I went on and stayed there. I worked in OBGYN for four years, and then there was a position open in the general surgery clinic. They kept asking me about that. So I applied [and] became their team leader, and that was another whole different type of challenge, believe me.

CH: And as team leader you had supervisory roles, right?

TR: Yes, yes, and I had all these doctors and these surgeons that are — how can I describe surgeons? Arrogant comes to mind. Oh they were everything: arrogant, opinionated, bleh, on and on and on. You know, [they] thought they were the world's saviors. [I had] to deal with all those personalities, but basically I got along with all of them. [I] finally won them all over and [learned] to work with them and their personalities and get the right people to work with them on a daily basis. Then, once you get the right people to work with them, then you have to keep everybody together. It's like a family: keep everybody from killing each other. It was a real challenge, and there were comments made and assumptions made.

I had a desk out in an open space and there [were] nurses in modules: one was down there, and one was to right, and one was to left, and I was in the center. Out front, the receptionist and people from the other different departments — x-ray, wherever — they'd say: "Go see the team leader in surgery about whatever the situation is. Go see the team leader, Trudy." And people would come back. They'd walk straight back, straight past me to this other nurse, and say, "Trudy, blah, blah, blah, blah." And she'd go, "I'm not Trudy. That's Trudy right there." "Oh." And I had a big sign at the desk and everything, but they would look at me and walk straight to her. I'd stand there and wait, because I knew she'd be sending them to me. It happened over and over until she finally got it. I said:



Rice spent the majority of her career as a nursing team leader at Kaiser beginning in the 1980s and following her time with Portland Public Schools and the State of Oregon. This early 1990s photo shows Rice (center) with her outpatient surgery team at Kaiser's West Interstate Clinic.

“Linda, do you get it?” And she said: “Yeah, I do.” [But] at first she said: “Why do people keep coming to me?” And I said: “Because it never comes across their little mind that they might be talking to a black person.” They assumed that the team leader was going to be a white person, and so, they just walked right past me.

The funny thing is, when we moved to a new building, I had my own office. They would look at the name, they would look at me, they would look back at the name again, and — it happened over and over again — people would say: “Uh, when is Trudy gonna be back?” I had to learn to keep a straight face. I said: “Well, Trudy hasn’t gone anywhere. I’m right here. I’m right here.” It’s just amazing how people would do that, but there’s no way that they thought that they would be talking to a black person.

On our campus, the RNs [took] care of general complaints during the day, [problems] that individuals felt they couldn’t handle. We had the team leaders take turns doing this. My day was a Wednesday. When people were sent to talk to me, they would just be [Trudy sighs forcefully], and people would say to me right in front of my face: “Well, what are you going to do? How are you going to help us?” And I would say: “Well have a seat and let’s talk about it, and I’ll see what I can do, and maybe I might surprise you.” Usually it was something that I could solve. This one man was mad about some appointment or something that his son had, and he was so angry they sent him to me, and he [when he saw me, he said]: “Oh no.” And I said: “Well, what is it? Just tell me the story; I



In 1988, Rice's coworkers at Kaiser surprised her with a birthday cake inscribed "We Love Ya Mammy." Rice used the incident (and this photo) to help institute diversity training for the staff.

might be able to help you." So he told me this long story. So, I said: "Okay, I might be able to help you with that." So, I made a couple of phone calls, and I said: "Guess what? I've solved that. Your son will be able to be seen." [Then] he left. He wrote a letter back to the clinic: "How did that black person get that kind of power?" One of the supervisors came and brought it to me: "I want you to see this. This man had nerve enough." And I said: "Oh my goodness." Yeah, he wanted to know how I could do something that the rest of the people couldn't do, and who gave me that kind of power.

It's things like that that happen. I had asked this young nurse to prepare a room because a doctor was coming over and only had a few minutes, and he was going to run from the hospital to do a quick procedure

and needed to get back. So, I said to this young lady: "Can you please have the room ready? The doctor's going to be here." About ten minutes later the patient arrived, [and] I said: "Oh, did you ever do that room? You were supposed to get that room ready. The doctor's on his way over." And so she looked at me and she said: "Okay. Yes. Yes, ma'am." Then she said under her breath: "Yes mammy." And so I said: "Oh, please don't do that. Don't call me mammy." And I think she thought she got to me when I said: "Please don't call me mammy."

About a week later it was my birthday, and they [coworkers] wanted to do this surprise thing, and I kept saying: "Oh, you don't need to." They said, "Oh, we want to do it." So I went down to a little luncheon room. When I walked in the door they started clapping and laughing, and they had a cake with the picture of Aunt Jemima on it, and it said: "We love you mammy." And of course

the story goes that I looked at them and — after they stopped clapping and laughing and everything — I told them: “You just made a huge mistake.” I told them that that was very insulting and I didn’t appreciate it, and I was going to talk to the administrator about it. They had taken a couple of pictures, so I [took] the pictures and went down to the administrator’s office to talk to her. But on my way down there I had no idea what I was going to say; all kinds of thoughts went through my head. One thought was: “Why don’t you just walk out the door and say forget it?”

But the reason I didn’t do that was because I was concerned about the young women that worked there, and I didn’t want to let them down. I felt like if I just walked away then they would think: “Well, my goodness, you know, our main person just walked out the door.” So, I decided to stay and talk to the administrator. Once the secretary saw me — and I told her that I needed to talk to [the administrator] immediately — I guess I must have had a look on my face, so she told me go ahead and talk to the administrator. When I got in there, I showed her the picture, and she turned pale [and said]: “Oh my God.” I told her: “We need to do something about this. We need some diversity training.”

From there we got the entire campus, a month or so later, set up for diversity training, and I was on a cultural diversity committee. Plus I started a group — I did that before [the cake event] — I started a group called “Harmony” where the young women were able to come and talk to me about different things that would happen to them during the day. As I would walk through the clinic, I would always say: “Oh, what kind of day are you having? Having a good day today?” And people would tell me stories about different comments that had been made to them like: “How’d you get your hair like that?” or “So, what tribe do you belong to?” Just different little comments that they had to hear. And, you know, people forget that your receptionists and people like that are your first line of people — the first impression of [the] clinic — and if they’re unhappy, then it causes a lot of problems and turmoil. So, they would come to me and tell me about things that happened to them, and I would tell them: “Okay, if this person says this to you, this is what you can say back to them.” And [I] try to tell them not to just explode, but to think through what is being said and why it’s being said, and to keep their jobs; because if you explode, you’re going to end up being fired and that other person will still be there. You’ll be the one fired.

I did a lot of that at Kaiser. My work with that and with the cultural group — and I had attended several of their national conferences — and I ended up with an award for my diversity work. I was up against some people who had done some tremendous things — at least ten, twelve other people were up for that award — and I got it. So I just feel like that was worthwhile. I feel like the work I did at Kaiser, not only with patients and with working with the staff, but also working with the diversity problems, was really worthwhile.

I ran across a letter not too long ago that one of the staff had written me when I retired. And I hadn’t read that letter in five years, six years, and I was amazed



Rice with her five children in 1997: (left to right) Kathy, Kimberly, Keith, Kelvin and Kenneth. The tradition of naming her children with names starting with “K” has been continued by her son Kenneth.

at how she mentioned all these things — and I’m talking about a white person, I’m not talking about a black person. She wrote me a letter. Every now and then she sends me an email, so some of the work that I did there — there’s no way of putting a name or a label on it. To have the whole place run smoothly: it’s a chore, it’s a real challenge. I enjoyed that. I enjoyed working and using all of my skills.

CH: It sounds like you were a mentor and a role model for a lot of younger women at the time.

TR: Yeah, and I had one young woman call me, and I hadn’t heard from her for three or four years, and she wanted me to come to her wedding. I thought: “Oh, my goodness. I thought she had forgotten about me.” But I guess she hadn’t. I always wanted to help people. I always wanted to especially help young women, because I remember being a young woman with a bunch of kids. I needed all the help I could get. I had a couple of friends that I met at Holladay Park Hospital, Perry and Danella, and they really helped me when I was struggling with my kids. My friends and my faith helped throughout. And I tried to encourage the young women I saw that way. I would say to them: “Is this something that you want to be doing five years from now? Are you satisfied with the position that you’re in?” I’d say: “You know PCC is right here in our back door, so take advantage of it. If you don’t do anything but take one class, just take one class

a semester, or whatever. At least that will get you started. Don't just be in a job where you're dissatisfied." So I tried to encourage them to do this. Some people, they hear the name of something — like registered nurse — and they think it'd be so difficult to do that; but if you take little baby steps you can get there.

CH: If you think back on your whole nursing career, what would you say you're most proud of?

TR: Well, first of all, working with young people, I'm proud of that. And I'm proud of the fact that I was able to be one of the first African Americans in that field and that I inspired other people to become RNs. I'm proud of the fact that I was able to make a decent living, and of the award I got for doing my work.

NOTES

I would like to thank the anonymous reviewers of this essay for their insightful comments, in particular the suggestion to highlight Rice's "unwritten job description." Both Trudy and Christi also thank Tim Hills, McMenamins Historian, for introducing us and first bringing Trudy's story to the public through a History Pub program in June 2012. Readers who are interested in accessing the entire transcript of the oral history interview can find it at the Oregon Historical Society Research Library in Portland.

1. Gwendolyn Etter-Lewis, *My Soul is My Own: Oral Narratives of African American Women in the Professions* (New York: Routledge, 1993), xi–xvii, 113–114, 154.

2. Gertrude Rice, communication with author, April 9, 2013.

3. Etter-Lewis, *My Soul is My Own*, 95.

4. Ibid.

5. Elsa Barkley Brown, "What has Happened Here: The Politics of Difference in Women's History and Feminist Politics," *Feminist Studies* 18 (Summer 1992): 295–312.

6. For more on nursing history, see Nona Y. Glazer, "Between a Rock and a Hard Place: Women's Professional Organizations in Nursing and Class, Racial, and Ethnic Inequalities," Special Issue: Marxist Feminist Theory, *Gender and Society* 5:3 (September 1991): 351–72; Darlene Hine Clark, *Black Women in White:*

Racial Conflict and Cooperation in the Nursing Profession 1890–1950 (Bloomington: Indiana University Press, 1989); and Patricia Schechter, "The Labor of Caring: A History of the Oregon Nurses Association," *Oregon Historical Quarterly* 108:1 (Spring 2007): 6–33.

7. Evelyn Nakano Glenn, "From Servitude to Service Work: Historical Continuities in the Racial Division of Paid Reproductive Labor," *Signs* 18:1 (Autumn 1992): 3.

8. Glazer, "Between and Rock and a Hard Place," 352–54, 356, 360–61, 366, 369

9. Clark, *Black Women in White*, xix.

10. McLagan notes that 98 percent of black families worked in "working class" jobs prior to WWII. Elizabeth McLagan, *A Peculiar Paradise: A History of Blacks in Oregon, 1788–1940* (Athens: The Georgian Press, 1980), 109, 185.

11. William Toll, "Black Families and Migration to a Multiracial Society: Portland, Oregon, 1900–1924," *Journal of Ethnic History* 17:3 (Spring 1998): 38–70, 42 (table), 64–65.

12. McLagan notes that this struggle was "long and difficult." McLagan, *A Peculiar Paradise*, 129.

13. Schechter, "The Labor of Caring," 22.

14. Schechter provides a brief biography of another important African American nurse, Elizabeth Washington. Schechter, "The Labor of Caring," 22.