cers refused to let the women leave the barracks for their evening meal until so equipped. Therefore, most enlisted women bought slacks tailored of an Indian mesh cotton. Mosquito boots were also purchased, as well as cotton anklets, sandals, and sometimes bush jackets. Also, Air Forces headquarters proved prompt in remedying deficiencies, and some months later succeeded in getting shipment for each woman of five cotton skirts and seven short-sleeved shirts for office wear, as well as three pairs of women's khaki slacks for wear after 1800. For the two or three colder months, wool clothing was provided. Eventually, CBI Wacs, by their own and theater efforts, had about double the amount provided for Wacs in semitropical climates in the United States, although no more than medical authorities deemed necessary in view of the frequent changes of perspiration-soaked garments that were required to prevent illness.[16]

All of the provisions of Air Forces headquarters for its men and women, although frequently exceeding the average for military facilities elsewhere, paid off in respect to the health rate. At the time of Major Craighill's inspection in March of 1945, no Wacs had been evacuated to the United States for medical reasons, except the original seven, who had disqualifying defects upon arrival. If these were counted, the loss rate was still only about 2 percent per year as compared with 2.1 percent for the theater.[17]

Major Craighill reported, "The medical care and condition of women is in general, good. They seem to stand the strain of overseas service as well as do men."[18] Both WAC and theater authorities attributed the low loss rate to the fact that Wacs were not only encouraged but ordered to report to the sick bay in their barracks at the slightest sign of any disorder, or even for advice. As a result, as many as 10 percent of the women in winter months, and 20 percent in summer, reported each month to the sick bay for cases not requiring hospitalization, as against 5 and 9 percent, respectively, for men. Theater authorities urged women to patronize medical facilities even more frequently if necessary, and provided not only a nurse for the well-equipped dispensary, but a gynecologist in the local hospital.

There was every indication that, without such constant care, the health hazards of the area would have been comparable to those of the Southwest Pacific Area, for illnesses included both amoebic and bacillary dysentery, impetigo, hepatitis, various fevers, and respiratory disorders. Major Craighill recommended that two years' service in the area be the limit, since "Among nurses who have been overseas two years or more, there is an obvious increase in tension, manifested by irritability, depression, insomnia, and loss of effective energy."[19]

An additional health problem was what Major Craighill called the "great emotional strain" from the social demands of "a group of isolated and lonesome men." While Wacs were by no means the only white women in the theater, they were nevertheless overwhelmed upon arrival with such numerous offers of social engagements that not all could be accepted. In the interests of health and working efficiency, WAC commanders from time to time prescribed dateless nights, quiet

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[16] *Ibid.* Also (1) IBT WAC Survey, pp. 9–10. (2) Ltr, WAC Stf Dir to Air WAC Off, 7 Oct 44. Folder CBI, CBI WAC files.

[17] From Stat Div SGO: total over-all loss by medical evacuation in 1944 was 2.1 percent; in 1945, 2.7 percent.

[18] Craighill IBT Rpt.

[19] (1) *Ibid.* (2) IBT WAC Survey, pp. 10–13: Comparative statistics for men and women.