**Janet**: Today is August 12th, 1995. I’m here at the Ellis Island Oral History Studio with Delaine, called Del Heliotis who worked here in the Marine Hospital as far as Del can remember July and August of 1949. I’m delighted that you could come in today, so most interested in anything you can remember about this. Let’s start with your life prior to working here. Give your birth date and where you were born for the tape.

**Delaine**: I was born in Flushing, Long Island and grew up in Great Neck, Long Island. I was born on February 28th, 1929. Therefore, I was 20 when I was here in Ellis Island. Prior to that, I was a student at New York University and this was part of my education. I was training to be an occupational therapist and we had various affiliations at various hospitals.

This one was the psychiatric affiliation. We usually spend two to three months in each hospital. These people in the US Marine Hospital were all merchant mariners actually. Some of them were foreign people. I got to work with the psychiatric patients.

**Janet**: Was this your first psychiatric affiliation?

**Delaine**: Yes, it was my first psychiatric affiliation.

**Janet**: Let me ask you. Where you living when you were here working with the Marine Hospital?

**Delaine**: I was still living in Great Neck, Long Island and I had to commute between three islands from Long Island to Manhattan and then over here to Ellis Island. It was quite a trip but I loved the boat trip back and forth.

**Janet**: Tell me where you left from?

**Delaine**: I left from … Great Neck you mean?

**Janet**: No, to get to Ellis Island to work.

**Delaine**: Now it’s the battery I guess. It was what we called it. We got the ferry from there. It’s hard for me to say because I came early in the morning and left after five in the evening, but I think they were running fairly regularly. A lot of staff and patients who were on leave took it as well.

**Janet**: How many patients roughly were in the Marine Hospital? Do you have any idea?

**Delaine**: I’m not sure. I can only compare it to a hospital I worked in more recently, another federal hospital. I would say easily 1000-1,200. All those building were filled with patients, all the buildings over there.

**Janet**: They were merchant marines.

**Delaine**: Exactly. It’s kind of interesting because people used all kinds of nautical terms, the patients. I learned not to say, “Go upstairs,” we all went topside. They say, “Time to surgy the decks.” You didn’t look at the Queen Elizabeth coming through and saying, “Look at the nice boat.” You were killed for that.

**Janet**: Now, what would you say … When you say they were over 1000, these were medical patients and psychiatric.

**Delaine**: It was general medical, and surgical, and psychiatric, but I worked particularly with the psychiatric patients because that was my area of study at the time.

**Janet**: How many of those would you say they were roughly?

**Delaine**: All together in the hospital, I really couldn’t tell you, but I would certainly say at least 100. I really can’t tell you. I did go into one ward which was the criminally insane ward. I would go in my little 20 year old self and people would be unlocking doors and bars and things, “I’d go in and say, “Good morning.” May I tell one little act?

**Janet**: Absolutely.

**Delaine**: I had just been newly engaged to my Greek fiancé later to become my husband. I was learning a little bit of Greek very slowly. There was a Greek patient in the ward for the criminally insane. I would see him in the morning as I walking past on the outside. He’d be staring out of the window with this kind of grim stare, very intense.

I would say him as I went past, “[Foreign language 00:04:55],” which was okay, good day or good morning. Then I’d say, “[Foreign language 00:04:59],” which I thought was saying something like, “I hope you’re feeling well. What I was saying was, “Thank you very much.” I’m sure I thought, “Poor man, he looks so confused.” He was saying, “What is she thanking me for,” in his head I’m sure.

**Janet**: What were your duties here?

**Delaine**: I kind of hate to say it but most of it was the old days they were still having OTs in some places, that’s occupation therapists doing artsy crafty work and certain things. For the psychiatric patients, all they did was have us go around and have them make little things. I was interested mainly in orthopedics although I like psychiatric work and it got much more complex later on. At this time, it was really crafts work. It was no orthopedic work, really stuff that was really scientific.

**Janet**: Did you have a supervisor whose name you remember?

**Delaine**: Oh yes. I have blocked her name out because we all had such a grand time, the students and the supervisor. At the end, I got a B for my affiliation. I ended up getting as in all of my others, and I had never been informed that I was doing anything wrong. She said, “You weren’t up to snuff.” She was very imprecise as to why I got the B. I have blocked her name from my memory. I can see her face in my mind, but I can’t remember her name.

**Janet**: How about other people who worked here with you? Do you remember any names?

**Delaine**: I can’t remember any names at all. It was really for such a short time, relatively short. I’ve really thought about it, but I can’t remember the names. I suppose somewhere I could look up at least the name of the director. Maybe it’s just as well that I don’t mention her name.

**Janet**: What could you describe where on Ellis Island you were and anything about the setting of where you were working?

**Delaine**: I’d be glad to. When I would first arrive in the morning, I loved it. I loved coming into this little dork and walking in. I remember walking to the left on my right or the ruins of the immigration center. To the left, I would walk between some buildings and then walk to the far end now. It’s called Island Three now. Is that right?

I just know that I worked in the building … What direction would that be? I don’t know. Anyway, as I told you before the main work place had many, many windows all across one wall and we could look out and see the Statue of Liberty. We could see the big ships coming in. It seems to me-

**Janet**: I think its south of here.

**Delaine**: South. It was the furthest South. The building looked a little bit different from the other building as I recall and that it had so many windows … Seeing the ships’ coming in, the big ships coming in from oversees. They’d just crossed the Atlantic. We’d see the fire boats coming out and spraying water in the air and touting their horns.

It was just something exciting happening in the harbor all the time. It was beautiful in the sunshine, and in the rain, and all kinds of weather. I loved being here. I loved walking along and fighting the pigeons.

**Janet**: They were here then too.

**Delaine**: Oh my goodness, yes. I’m sure the great, great, great grandchildren of those pigeons are still around here. Then at lunch time, I did a forbidden thing many times. I would walk back to the center near the dork and I would walk into the ruins of the immigration building.

They were big signs. You weren’t supposed to go in because it was dangerous. I heard the whispers of the people who passed through. I could feel their spirits. I really did and I could the feel the joy, and the pain, and apprehension because my husband was an immigrant. He had come over right after World War II.

At the time he left the civil war that was going in Greece. I know what he went through coming over as an immigrant. I had a great feeling for that. I couldn’t stay away from it. I think in the film that they show currently now, they show pictures of some of the ruins. I would say, “I swear I saw that rocking chair or something lying there in the dust, those old films.” Let’s see, I’m trying to think.

**Janet**: When you say you went back in, you went into this main building that is now restored.

**Delaine**: Yes. As I say absolutely forbidden, but I couldn’t stay away. I climbed over things and I went in-

**Janet**: Alone?

**Delaine**: All by myself. I didn’t want to tell anybody I was …

**Janet**: Tell me about what’s right opposite the ferry slip now which is what we call Island Two. Were those buildings operative at that time?

**Delaine**: Yes.

**Janet**: Everything but this part where the main building [crosstalk 00:10:44] is going on as a hospital.

**Delaine**: Yes. As I recall, as I say its 46 years ago which seems impossible, but certainly all those building and I forgot how many there are. You probably know that that they form a circle, an oval. They were in operation as the US Marine Hospital.

**Janet**: Were people living on the island at this time?

**Delaine**: As far as I know, no, but I could be wrong. There may have been some residences that I wasn’t aware of.

**Janet**: They would have been on the island, part of the island that you were working on.

**Delaine**: Probably they were. In fact, probably part of the hospital may have had dormitories for nurses, for staff. I wouldn’t be surprised. I have one memory. I’m certainly not putting down psychiatric patients. I enjoyed working with psychiatric patients very much but we had very interesting softball game every now and then outside. We’d go into a fenced in area. I think I found it. I think I saw it once when I came on here and snuck around there.

Nobody followed any rules of baseball at all, not that I am a great baseball fan. I knew they were doing things wrong. Suddenly one of the patients, who had been very friendly with me, suddenly slipped a rope around my two hands and tied it very tightly and sort of pulled me off into a corner. Nobody noticed this. He is kind of grinning and saying, “What do you think of that?” I tried to--

**Janet**: You mean you were like on the field.

**Delaine**: Yeah. I was on the field with the patients. We were playing ball with these patients and it was all males. I don’t know whether they had any … I doubt that they had female patients at that time. He took me off in this corner and I instinctively knew not to get hysterical at all. I said, “That’s a beautiful knot but I’ll bet you don’t know how to untie it.” He said, “I am in the merchant marine. Of course I know.” I said, “No. I don’t think you can.” He fell for my little rouse and untied it. I moved quickly and firmly to a more central part of the field and that was that.

I had one other experience going back on the ferry at the end of the day one day where few patients who had a pass for the day, or the week, or whatever to go home and see family. It was a great big guy that I used to see. I always remember his name was Eddy. He suddenly said, “How would you like to be thrown into the harbor?” At that time I could be picked up.

He couldn’t do it now, but he picked me up and sort of held me halfway over the edge. I tried to stay cool. I couldn’t even swim. I was scared to death, but then he put me back down. I reported him the next day but everybody got a good laugh out of it, but nobody seemed too disturbed. I was.

**Janet**: Did you encounter him after that?

**Delaine**: Yes, he did all kinds of threatening things with a big smile on his face. He would do it only to me. I don’t know why.

**Janet**: He liked you.

**Delaine**: He was showing affection for me.

**Janet**: What were the kinds of problems that these merchant marines had? Can you say anything about that?

**Delaine**: I can’t remember. I’m sure I looked through their charts and so on. Most of these men had exhibited some kind of irrational behavior on ships. It probably had to be pretty bad to be hospitalized for it. It’s the same sort of thing that you see in VA hospitals with some of the old patients there and you know that they may have had something lightened and suddenly went off the deep end.

I think there were a lot of paranoid schizophrenics at the time. I know there were a number of depressives. In fact, the nicest ones were the depressive. They were very sweet and kind and kind of sad. I don’t think they had the sort of drugs that we have nowadays, anti-depressive medication. They were very nice.

For some reason, I remember a tall, dark haired young man and his name was Farris. I assumed that was his last name. He was very clever. He was half Cherokee. He was a delightful man to work with, but apparently he had tried to commit suicide a number of times. He was hospitalized. I always feel psychiatric patients are a little more human than the rest of us. They suffer with human failings and human difficulties.

**Janet**: Do you remember any kinds of treatment that were being offered to them?

**Delaine**: I know they were using electro shock therapy.

**Janet**: Do you have any recollection of [crosstalk 00:16:01]?

**Delaine**: Yes, a very strong recollection. It was really primitive in those days. They’ve come back to it a little bit now, but first of all, they don’t use the kind of voltage that they used in those days. I was walking down the hall one day in an unfamiliar building, a nurse rushed out of a room and said, “Come in and help us hold down this patient.”

I didn’t know what she was even asking me to do and this was my first introduction to electro shock therapy and this poor man was terrified. Who wouldn’t be? People are sedated and so on. They were six people holding this guy down to strap him down and then shoot I don’t know how much electricity into him. It was a very frightening experience for me. I saw a spine arching like an epileptic…

**Janet**: Like a compulsion.

**Delaine**: Exactly. Of course, these people then lost their memory for many days after that. I saw this in other hospitals too at that time. It’s certainly the way they were doing it then did people did have some brain damage. I guess it’s better than being a bad depressive or whatever or being violent. It was to me anyway barbarous treatment, but I certainly got a quick initiation into it. It was something.

**Janet**: They really didn’t have the psychotropic drugs at that point.

**Delaine**: No, they really didn’t. Years later, I think the first of one that I remember coming out was [inaudible 00:17:54]. Then you’d see patients lying around in the halls asleep because they were so overmedicated.

**Janet**: This is after.

**Delaine**: This is after Ellis. I don’t remember it now. As I say, I could certainly be wrong. I was a young student and I certainly didn’t know everything that was going on, but I don’t recall giving those drugs. They’ve come a long way in the pharmaceutical profession as far as these drugs go.

**Janet**: You must have socialized with patients while you were doing [crosstalk 00:18:29].

**Delaine**: Well playing soft ball, yes. As you see, I enjoy chatting.

**Janet**: Yes. Would they talk to you about those issues or their problems?

**Delaine**: Most of them were responsive. Obviously I wasn’t going to discuss their [inaudible 00:18:46] with them, but I would try and talk about family or their experiences on the ships which I was honestly interested in going through with storm at sea or something.

**Janet**: Just of the population as a whole which you probably didn’t have much to do before that. Where is there anything about them as a group that sticks in your mind that kind of characterizes [crosstalk 00:19:09]?

**Delaine**: Psychiatric merchant marines. They all looked sort of tanned and weather beaten … I know you’re speaking about personality. I can’t really think of anything that stands out. I can’t really differentiate them. They were human beings, but what they all loved the sea obviously because till the best of my knowledge nobody was ever drafted into the merchant marine.

Of course, this was 1949 so it wasn’t that long after World War II so a lot of these young men and older men had stories to tell. I can’t remember any specific stories but they were very frightening. They would go on convoys across the Atlantic bringing things to England. Certainly prior to our entrance into the war, they worked with the land lease program, getting equipment over to the English.

They had some very dangerous experiences and some of the hardship building up in the navy. It was quite an experience. I’m old enough now that when I say the war, that’s the war I’m talking about, World War II.

**Janet**: Were some of their psychiatric problems the result of trauma?

**Delaine**: I can’t tell you that. I am sure that some of these things probably exacerbated usually, not always but usually there is a basic problem to begin with. I saw this on other VA hospitals, people who had been in the war that they may have had certain latent problems. This was bringing all to the surface were some of the horrors they saw and lived through.

**Janet**: You said there were different ethnic groups represented.

**Delaine**: Yes. I never understood how the law handled it, federal law handled it. As I told you, there was Greek there whom I befuddled. I probably threw backwards in his illness, but now there were people from all over the place. A lot of the Norwegian, a lot of Dutch.

**Janet**: They were speaking their native language.

**Delaine**: Yeah. Some of them did but most of them spoke English I think because they probably had to. I don’t know how they could be in the US Merchant Marine. I have no idea. I’m sorry I didn’t research that, but [crosstalk 00:21:53].

**Janet**: No. Somebody else can research that.

**Delaine**: It was very interesting and I’ve always liked foreign languages. I do a little better in Greek than I did at that time. I enjoyed talking to them and asking them certain words in their language which I think everybody appreciates hearing something in their own language. I tried to get it straight and not confuse it.

**Janet**: What kind of an effect do you think the experience had on you looking back on it? Do you think it was …?

**Delaine**: It was, first of all, unforgettable one to be working on Ellis Island. Ellis Island, of course, was very famous at that time. The immigrants obviously were not going through at that time. I think with the year is where they stopped processing immigrants.

**Janet**: It was opened till 54, but I know the [crosstalk 00:22:51].

**Delaine**: I have a friend. I think I mentioned to you and I’m trying to get in touch with him who was in the US coast guard and stationed here in 1953.

**Janet**: We do occasionally get people who came through here after World War II and for some reason were detained because of medical or papers [crosstalk 00:23:13].

**Delaine**: Legal problems I was fascinated for one thing to have this experience of dealing with people from many different countries. From my childhood, I was interested in language and then foreign countries. I hated Geography and History in school. I don’t know why. I like to blame it on the teachers but it was probably my closed mind but since that time and when I started to meet various people I was fascinated by it, so I liked to hear these stories and also about life on the sea.

It was like opening a lot of new books and learning new things. I had very vivid memories of it and as I say, coming in every morning was sheer pleasure. Nobody enjoyed going to work as I much as I did at that time.

**Janet**: How would you describe yourself as a 20 year old getting on the Ellis Island boat every morning?

**Delaine**: Enthusiastic. It’s hard to separate myself as a 66 year old from the 20 year old mentally. I liked the work I was doing very much.

**Janet**: This was really your initiation into the work world.

**Delaine**: No, I had one affiliation prior to that at the hospital for special surgery and that was orthopedics. I had gone to college, NYU in 1946 and after two years you could start your affiliation. What I did was compress five years of work that included affiliation into four. I went straight through. Immediately after fining in 1950 then I got my first paying job as an occupational therapist. I think the enormous of $40 a week.

**Janet**: How did your first job compare with what you did here?

**Delaine**: There were similarities because I worked in a big city hospital, Sea view in Staten Island. Again, it was a big hospital with many buildings and people from all over the place. While I was there at Sea view, they discovered the medication to halt the TB and all of a sudden they started closing down buildings.

As far as comparing it, I don’t know. It’s very similar. It’s working with different people. I tend to view each individual for themselves, at least my director in my first job was a little more open and kind with me than the one that I had on Ellis Island. Not just she was ever unkind to me, I just suddenly got hit at the end with being told that my work was not quite up to snap.

**Janet**: It must have been something of a man’s world here in Europe.

**Delaine**: Yes. All over it was a man’s world really. I remember too it was my first experience in that when a doctor walked into the room, you stood up. You always stood up and rushed to get them a cup of coffee if they wanted it. That was very different. Yes, it was all men and I don’t even know if there were women in the merchant marine. They may very well have been. I have no idea. I only saw male patients.

There were male and female occupational therapists, not in Ellis Island when I was working here but in other places. There were more and more. I think it’s still predominantly a woman’s occupation, not that it’s supposed to be but it is.

**Janet**: Do you know why you went into it?

**Delaine**: Yes. As a child, I always wanted to be a nurse. I had gone and had my tonsils out when I was 11. Strangely enough, I thought it was the neatest thing to work in a hospital. I kept reading books. I loved to read. One day my mother brought home a fictional book. I think it was [Sue Burton 00:27:48] Occupational Therapist.

I started reading it and I thought, “This sounds like the sort of thing I would really like to do,” because it was working with patients and doing things that were therapeutic for them. It seemed to be a little bit more my kind of thing. Incidentally, I’m not an occupational therapist now. I am still working but I have an entirely different professional. I became an accountant.

**Janet**: Wow.

**Delaine**: My late husband was an accountant and he became increasingly ill, and I started working more and more with him until I quit my job as an occupational therapist and worked full time with him. After he died, I suddenly said, “I’m not going to throw away this practice.” I know this doesn’t relate to Ellis Island.

**Janet**: That’s fine.

**Delaine**: Anyway, I went back to school. Now I’m a licensed public accountant on a CPA but I’m licensed in the State of New Jersey and I have an accounting practice. I still miss the medical world too. I loved it. I loved going to the consultations and seeing patients getting better or patients with strokes who are renewed by all our activities. I really liked it very, very much.

**Janet**: Is there anything else you could say in closing about this period of time when you were here for you?

**Delaine**: For me, this sounds sort of foolish but I remember it as a very sunny time. I remember it was sunshine and blue skies. I suppose I was very much in love with a man that I married eventually, but I liked doing it. I was finally getting out and doing the kind of work I wanted to do here. This was such an ideal place. I think to be able to look out and see the Statue of Liberty on one side and the New York skyline in the other side is heaven. I happened to love New York very, very much. That was great.

**Janet**: That’s a perfect place to end. Thank you. I’m speaking with Del Heliotis who came and worked at Ellis Island in July and August of 1949 in the Marine Hospital. This is Janet Levine for the National Park Service here at the studio at Ellis Island on August 12th, 1995. Signing off.