

SUMMARY

Ruth Matarazzo, PhD. begins the interview with a description of her family and childhood in New London, Connecticut, including boarding school for a pre-college year before entering Pembroke College for women at Brown University in 1944. At Brown, she majored in psychology and stayed on for a year in graduate studies. She met Joseph (Joe) Matarazzo, also in graduate psychology, whom she married in 1949. After her marriage, she began a one-year management training program for women at Radcliffe (the Harvard Business School), while Joe went to Northwestern University for further graduate study in psychology. Her decision to enter the management training was influenced by her interest in personnel work and the notion that there should not be two psychologists in a marriage. When Joe Matarazzo took an internship at Washington University in St. Louis, she was given a tuition scholarship in psychology for graduate study, and became the first woman admitted to the Veterans Administration clinical psychology program. At this time, she and Joe met Dr. George Saslow and Jeanne Phillips, and together they became a working research team which accepted an offer at Harvard Medical School.

Dr. Matarazzo then describes how the team researched aspects of the psychiatric interview while at Harvard for two years. She provides details on how the research was performed. Dr. Saslow was offered a position at University of Oregon Medical School, which eventually led to an offer for the entire team. Dr. Matarazzo describes the limited psychiatric training and services on campus when she arrived, and states that David Baird was instrumental in the creation of a department of psychiatry as well as a department of medical psychology. Her first job was the supervision of psychiatric services for inpatients. Additionally, she assisted in the redesign of the psychiatric ward in University Hospital South.

Dr. Matarazzo relates the history of the split between the Department of Psychiatry and the Department of Medical Psychology, noting that professional differences and budget levels were factors. This leads to a discussion concerning faculty salaries and the major role of research grants in funding staff for the department. Dr. Matarazzo reviews several of the collaborative research projects with other departments within the university, including work with Dr. Ralph Benson in OB-GYN, Dr. David Bristow in cardiology, and Dr. Cecile Sunderland in pediatric cardiology.

Dr. Matarazzo comments on the role of women as students and faculty before, during and after affirmative action initiatives in the 1970s, including increased participation on Medical School committees, changing patterns of behavior, and pay parity. She also comments on her own involvement with local and state psychology associations.

Town-gown relationships are examined, as well as issues surrounding UOMS becoming a university. Dr. Matarazzo remembers Carol Lindeman, Charles Holman and Lewis Bluemle during this period of change. She also discusses the postdoctoral residency program in medical psychology, and lastly discusses her private practice performing psychological evaluations for use in court.

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OHSU Oral History Project

Interview with Ruth Matarazzo
Interviewed by Michael O'Rourke
May 8, 1998
Site: Ruth Matarazzo's office
Begin Tape 1, Side 1

O'ROURKE: This is Michael O'Rourke for the Oregon Health Sciences University oral history project, beginning an interview today with Ruth Matarazzo in her office at OHSU. It's May 8, 1998.

Ruth, I thought I'd just start today by asking you to tell me a little bit about your background. First of all, when and where were you born?

MATARAZZO: Well, I was born in 1926, and I was born in New London, Connecticut.

O'ROURKE: And I think you told me last night that your father was an electrical engineer, is that right?

MATARAZZO: Yes.

O'ROURKE: Can you describe him a little bit as a person? What kind of person was he?

MATARAZZO: Well, he was a typical New Englander, rather shy and unemotional and – but really warm, very warm, underneath. Frugal and hard working. Just a very typical New Englander.

O'ROURKE: And your mother?

MATARAZZO: Well, she also was a typical New Englander, having many of the same characteristics as my father. She did not work, which women didn't in those days. In fact, you were really not hireable, for the most part, if you were married, because it was during the Depression, and if women worked, they were thought to be taking jobs away from men, so that, for example, if you taught at the school, if you were a teacher, you had to give up the job if you were married. She, however, was active in the community and was on the school board and active in the public nursing association and so on.

O'ROURKE: But she herself wasn't a nurse, is that right?

MATARAZZO: No, no, she was not.

O'ROURKE: How did she happen to be involved in nursing, the nursing association?

MATARAZZO: Well, she became friends with a woman who was brought to be the public health nurse in the town, you know, in the 1930s, I suppose. I don't know what year she came. Probably '32, '33, something like that.

O'ROURKE: And what were your mother and father's names?

MATARAZZO: My mother's name was Elizabeth, and her maiden name was Wood, and my father's name was John Gadboys(?).

O'ROURKE: I wonder what some of your earliest memories from New London would be.

MATARAZZO: Well, as I think I told you earlier, I grew up outside New London in a small town called Niantic, and my earliest memories are of exploring the woods and riding bicycles and doing very outdoor sorts of things.

O'ROURKE: So you've always liked the outdoors, then, or you liked the outdoors then, anyway?

MATARAZZO: Well, I did like the outdoors, but there wasn't a lot – there were not a lot of other things to do. In the summer, we – this was right on the coast, so we spent all summer on the beach. Other than that, of course, there were some dancing lessons and Girls Scouts and things like that.

O'ROURKE: And did you have brothers and sisters?

MATARAZZO: I had one sister who was two years older.

O'ROURKE: And I wonder if you could tell me a little bit about what school was like for you?

MATARAZZO: Well, it was a small school, but I think a good one. There were only about – there were about thirty students in each grade, and there were eight grades. I had some very excellent teachers. My seventh and eighth grade teacher, for example, was excellent. She moved from the seventh to the eighth grade at the time that I moved from the seventh and the eighth grade.

O'ROURKE: So you had her for two years, then?

MATARAZZO: Yes, yes. She had majored in English, I think, at Connecticut College for Women, and so she was – she really made sure we knew English, and she made it into a game on learning the parts of speech and so on. She was – well, she was just a very good teacher and – goodness, that was so long ago, I don't know what to say.

O'ROURKE: Did you enjoy school, then?

MATARAZZO: I did enjoy school, yes. I would say there wasn't a lot of intellectual competition, but it was still stimulating and good.

O'ROURKE: And, then, in your final year of what we call high school you went off to a boarding school, Dean Academy, is that right?

MATARAZZO: Yes.

O'ROURKE: Was that the first time you'd left your home?

MATARAZZO: Well, essentially, yes, except for summer camp for a couple of weeks, yes. My mother thought that the local schools perhaps didn't prepare us well enough for college, and also that it was a good idea to be away from home for a year beforehand, perhaps, before making the transition to college. So she thought it would be a more intellectually challenging atmosphere, so she encouraged me to go, so I did.

But it was kind of a mixed bag. It was a good intellectual experience, but this was a holdover from the Victorian era that's hard to imagine now. The boys and the girls were totally separated, and you couldn't – we were given half an hour, I guess three quarters of an hour, off campus every day in the afternoon. Other than that, we had to remain right on campus. And the girls were given one three-quarter-of-an-hour session, and then when the girls came back, the boys had their three quarters of an hour, and so there was no mixing of the two, except in classes and maybe occasionally in the hall, if you didn't make it too obvious. My roommate had a boyfriend, and she used to get up at four- or five o'clock in the morning and go and meet him on the campus for an hour to chat or hold hands, or whatever, and wasn't caught. But she would have been afraid to do that late in the evening because she might have been under more surveillance. We had to be in bed, you know. There was a bed check and all that sort of thing.

O'ROURKE: I assume this was probably a change from what you were used to in school previously.

MATARAZZO: Yes. My mother was very liberal, sure.

O'ROURKE: And while you were in school – I mean, just backtracking a little bit, you mentioned your sister. She was, what, you said a couple of years older than you?

MATARAZZO: Yes.

O'ROURKE: I'm just wondering if the two of you – how close were the two of you? Did you hang out with her, so to speak?

MATARAZZO: No, we didn't hang out together. We were very different personalities, and we weren't close until probably after college, as we – as we matured, we got to appreciate each other much more. But I just don't know why it was. We just moved in totally different directions when we were young and were – you know we had the usual sisterly spats and so on.

O'ROURKE: And what was her name?

MATARAZZO: Dorothy.

O'ROURKE: And did you have other close friends, then, when you were – among your playmates or schoolmates?

MATARAZZO: Yes, yes, I did. There were – there was not a large population in this town. It was probably a town of about three thousand people, so it wasn't – we all knew each other. Everyone in the class, of course, knew everyone else. Of the people who lived in my neighborhood, there were a couple of girls that I was close to, and then there were – there seemed to be more boys in the neighborhood, so we played a lot with the boys when we were very – you know, when we were young, in grammar school, we – boys and girls played together, which is a little bit unusual, I think. And later on in high school, of course, there were – we went to New London to high school, and so there were more girls, and also of an age when you didn't just play with boys in the same way.

O'ROURKE: Well, it must have been particularly a big change, then, to go to Dean Academy.

MATARAZZO: [Laughing] Yes, and be segregated. Yes, it was.

O'ROURKE: And you said – moving back to that subject just briefly, now, you said it was sort of a mixed bag for you. Was that because of the sort of strict social structure there?

MATARAZZO: Yes. Yes, it wasn't a place where you went to have a great social life or fun. It was – the girls there were very nice, and so there was – you know, there was fun in the dorm, you know, meeting in each other's rooms, and so on, but there wasn't a social life, dating and going to movies and all that sort of thing.

O'ROURKE: And Dean Academy was in Boston, was it, did you say?

MATARAZZO: No, it's halfway between Providence and Boston. It's in Franklin, Massachusetts.

O'ROURKE: And would you visit your family on holidays, then, while you were there?

MATARAZZO: Yes. We were allowed one weekend a month to go home, and if we remained on the dean's list, we were given also an additional overnight. So I remained on the dean's list, and so I went home for one overnight and then had one weekend a month, so I went home about every other week.

O'ROURKE: And you maintained your position on the dean's list with academic performance, essentially?

MATARAZZO: Yes. [Laughing] It was very necessary.

O'ROURKE: At this point in time, did – I mean, you went on to Brown, then, the next year, I guess.

MATARAZZO: Yes.

O'ROURKE: What – when you came to Brown, did you have a major or course of study plotted out by that time, any idea of what you wanted to do?

MATARAZZO: Yes. I wanted psychology. And I think there was a very influential teacher at Dean Academy who was a teacher of sociology, but he was as wonderful teacher, and he included sociology and a little bit of psychology, and I was just fascinated with that course. So I think that determined me as much as anything.

Then, at Pembroke, which – one at that time went to Pembroke College in Brown University, so you attended Pembroke College and graduated from Brown. The women were not eligible to be admitted to Brown because of the original charter, and so this was a – I think the first women – you know, Pembroke was started in about the 1890s, and so we attended Pembroke. I said on my first day, when I was interviewed, that I wanted to major in psychology, and this man who was interviewing me said, “Oh, everyone says they want to major in psychology these days. Disgusting” [laughter]. But Brown was noted for its excellent faculty in psychology. It was one of the premier departments in the country, and so they had a wonderful teaching program.

O'ROURKE: And you were at Brown between what years?

MATARAZZO: I was there from 1944, in the fall of 1944, through January of '48. I stayed one summer, that first summer I studied, and that – we were encouraged to do that. It was during the war. Brown was short on students, particularly male students, but the ROTC were required to study through the summer, so the university had to stay open, and in order to help them meet their payroll, they wanted as many students as possible to stay through the summer, so I did that.

O'ROURKE: And it was at Brown that you met Joe?

MATARAZZO: Yes. Right after I graduated, I stayed on in the graduate school for one term. Brown did not have clinical psychology, they were more of a basic science program, a research department, and – but there was an opening for an assistant, teaching assistant, so I got my – I got eighty dollars a month and free tuition. And at that time, you could barely keep body and soul together with eighty dollars a month. So I stayed on in graduate school, and that's where I met Joe. He had just returned from the navy in the fall. He'd been there one term.

O'ROURKE: And so what was Joe like in those days?

MATARAZZO: [Laughing] Well, I, of course, thought he was tall, dark, and handsome. He was a lot of fun, he was very self-assured. I think that impressed me a great deal, his

assurance and his feeling that, you know, the world was his oyster and he could sort of accomplish whatever he wanted. He was a good dancer, and we had psychology in common. We both wanted clinical psychology, however, and knew that we wouldn't stay on at Brown beyond that year. So we just had a lot in common.

O'ROURKE: And, then, you – now, when did you marry Joe, then?

MATARAZZO: A year later, in March of '49.

O'ROURKE: So you had a courtship at Brown during that – well it wouldn't have even been a full year, right, because you...

MATARAZZO: Yeah.

O'ROURKE: And, then, you went off to Radcliffe, is that right?

MATARAZZO: Yes.

O'ROURKE: And Joe went to Northwestern?

MATARAZZO: Right.

O'ROURKE: So you were separated for a period, there?

MATARAZZO: Yes.

O'ROURKE: Had you met his family at this point? Or when did you meet his family?

MATARAZZO: I didn't meet his family until the following fall, at Thanksgiving. Let's see. We had our first date in March, and in June, of course, we separated and he went back to Schenectady. I took a summer job in New London, and so we saw each other periodically and kept in touch. Then he went off to Northwestern, and I think my Radcliffe program started in August, so his parents were in – went back to Italy to visit and to sell some of their remaining property there, and they were back in time for Thanksgiving, so – and Northwestern won a football game, so they were given – I guess there was a big celebration – they won the Rose Bowl or something – and so Joe drove back to Schenectady, and I went up to Schenectady to meet his family.

O'ROURKE: Now, I think you mentioned yesterday, when I was talking to you on the phone, that when you were at Radcliffe you were studying business, is that right?

MATARAZZO: Yes. I was in a management training program, which was started by T. North Whitehead, who had been at the Harvard Business School but left to start this program for women. And, of course, he was the son of Alfred North Whitehead. So he was an interesting, older gentleman. Very British.

O'ROURKE: Was that a detour from psychology, or was that part of your master plan in terms of moving on? I mean, were you planning to use it in the field of psychology?

MATARAZZO: Well, I wasn't sure what to do. I thought perhaps that going into personnel work would be interesting and challenging, and we were advised that two of us should not stay in psychology if we were going to be married. It would surely be the death of any marriage to have two psychologists trying to live with each other, that we would be competitive with each other, that we would be tired of discussing – we wouldn't have anything else to discuss but psychology, and that – you know, several professors really advised us we absolutely should not do this. So that had its influence, too.

O'ROURKE: But the resolve to go off into perhaps a slightly different field didn't last very long, it doesn't sound like.

MATARAZZO: No, it didn't. That was an interesting little detour. Women were not admitted to the Harvard Business School at that time, so this is why there was a one-year program for women. And it was not a particularly challenging program, and the women in the program, at the end of the year were kind of up in arms about the fact that they didn't feel we were really being prepared for the business world, as they thought they were going to be. They also discovered that when you went out to apply for a job, as a woman, if you – the first thing you needed to know was typing, and you could probably get some kind of a job. The second thing you needed to know, to get a better job, was shorthand. And so if you knew typing, and perhaps shorthand, you could get a toehold and then perhaps work your way up, and this program would be of some benefit to you in regard to getting into some kind of a managerial position. But it was – it just was not a rewarding situation for women in industry at that time.

I took my first job at Marshall Field's at Evanston, Illinois, just after we were married, and I was put in the personnel department, and they put up with my poor typing. I didn't get much typing to do. But I noted – I was in charge of hiring the part-time personnel in the Evanston division, and there were groups of – you know, there were numbers of jobs; jobs, you know, one through a hundred and ten, or something, classified in that way, and then they were all classified as either A or B. And if you took job number five, and, you know, the A salary was five dollars an hour and the B salary was two dollars an hour, the difference was male and female. And so the whole – well, I mean, that just, I think, was an example of how the business world was really not going to be rewarding at that time for women, and I really thought I was more interested in psychology, too. I hadn't quite given up that idea. So I began to study while working.

I took a class, during my lunch hour, at Northwestern and decided I really wanted to get back into more academic work. So when we changed to – Joe went to Washington University in St. Louis for his internship during his third year of graduate work, so while we were there, I applied for admission and was admitted there in psychology and got a job as an assistant, which paid a salary, and I got a scholarship that covered my tuition. So that enabled us to barely get by with his internship salary and my assistantship salary, and so we – that's what we did.

O'ROURKE: In terms of your sort of coming face to face with the conditions in the business world at that time for women, how did you feel about it, then, as a woman? Did you feel that there was injustice there, or was it just so much of the fabric of the way society was then that...

MATARAZZO: Well, I think it was very frustrating. And, of course, one couldn't help but feel some anger at times. I think mainly it was frustration.

O'ROURKE: And so you went to St. Louis and got back into academic work in psychology. What was that like?

MATARAZZO: Well, I enjoyed being back in psychology, and – what was it like? Well, it was really challenging and fun, and we – I spent much of my time on the campus at Washington University, but Joe was at the medical school taking an internship, so I was also acquainted with what was going on there, and I was able to take an occasional course or attend a clinic there at the medical school, and that made it more fun. And I was the first woman admitted into the VA training program. I don't know why they – I guess, you know, right after World War II, which is when most clinical programs were opening up, there were so many veterans returning that there were really – that was one reason, I think, that there were few women in psychology or in graduate school, and so I was the first – I was the only woman in my class in graduate school, and I was the first woman admitted to the VA.

O'ROURKE: You met George Saslow and Jean Phillips there, too?

MATARAZZO: Yes. Jean Phillips was a student, also, at Washington University. She was a year behind me. She and I got acquainted, and she – let's see. She began working with George Saslow and Joe on some research, I think, while she was still a student. I'm not sure just – well, she did – yes, she became involved in the interaction chronography(?) in interview research there with them. They had a grant to study the interview, psychiatric interview. And so that's how she became involved with them. And I had already known here on campus.

O'ROURKE: And so she was part of the research team before you were, then, of Saslow and Joe? Or were all – I understand you were part of the research effort, too, by the time you went to Harvard, at least.

MATARAZZO: Yes. At that – let's see. We went to Harvard and continued the research there. I think it was about at the same time that we all became involved in the research. She may have antedated me. I'm not sure.

O'ROURKE: And = well, what can you tell me about – maybe now would be a good time to just have you tell me a little bit about what Jean Phillips was like as a person.

MATARAZZO: Well, she was very bright, very warm and friendly and outgoing, and we became good friends. And we were – [laughing] we were the two women on the project, and Joe and George were the two men on the project, and we – you know, she and I could occasionally sputter together about working with these fellows.

We – let's see. George did most of the interviews – I think he did all the interviews – and Joe did the recording of the interviews – this was initially – and Jean and I worked with the data. And that went on during the two years that we were at the Mass General Hospital, and then we all came out here together as a research team.

O'ROURKE: But not before – well, I guess the move from Washington to Harvard, that was – what prompted that move?

MATARAZZO: Well, I think that was prompted in large part by George.

[End of Tape 1, Side 1]
Tape 1, Side 2

MATARAZZO: George – hmm. George, I'm sure, knew some people there and was offered the job. I don't think he really applied for it. So I think it was primarily George who started the move toward Harvard. And, of course, the name of Harvard is magic everywhere, and we thought that seemed like a very exciting prospect. We could take the research project there and continue with it and do teaching at Harvard, and so we thought that would be a very wonderful thing to do, especially since we had families back East, and we still considered ourselves easterners.

O'ROURKE: But things ultimately didn't work out at Harvard, is that right?

MATARAZZO: No, they didn't. Harvard was very strongly psychoanalytic in orientation. I think we had not realized the extent of the psychoanalytic influence there. We sort of felt restricted, I guess, weighted down by the psychoanalytic orientation there. We – there weren't other people who were interested in exploring, doing research on matters that weren't strictly psychoanalytic. It was the party line, kind of. You might do research on psychoanalysis, analyzing one point, one fine point or another of the theory. But we didn't find it stimulating within that department, although certainly the school is, you know – certainly has many, many exciting researchers in it. We just – it was not a good fit for us.

O'ROURKE: Now, the research project at that time, you mentioned the interviews. What actually was your project?

MATARAZZO: Well, we were studying interview behavior, the interaction between the interviewer and the interviewee and the influence that the interviewer had on the interviewee.

O'ROURKE: In the sort of clinical psychology kind of environment, then? I mean, what was the nature of the interview, I guess is maybe what I'm getting at.

MATARAZZO: Yes, it would be a psychiatric interview in which the interviewer was restricted to five-second utterances, and then the – then, after the interviewee spoke, he would

have to speak again within one second and, again, make a five-second utterance. That was one part of the interview. Then, in another part he just would let the silences go on for fifteen seconds. Fifteen seconds doesn't sound like a long time, but for a silence, it's enormous. Then, another section of the interview where every time the interviewee spoke, the interviewer would interrupt for – maybe for five seconds – I guess it was for five seconds – and see if the interviewee would stop speaking or speak over the interviewer or just what would happen. And then back to the – I think the last part of the interview went back to the five-second utterances.

O'ROURKE: So sort of exploring the interactions and dynamics of an interview, then?

MATARAZZO: Yes. That was one thing that we did. Then, we also studied the other characteristics about the interviewee; people who were not – those who were upset by the fifteen seconds of silence versus those who managed it pretty well, you know, with a fair amount of skill, and those who talked over the interviewer versus those who yielded to an interruption, and so on. It was interesting work. This went on for quite a while. I mean, we did many different studies associated with it.

O'ROURKE: And when you went to Harvard, George was able to sort of bring along the whole team, and, then, that turned out to be a pattern that recurred at least when you came out here to Portland, but before you did, there were some other offers, I guess, in the wings, too.

MATARAZZO: Yes.

O'ROURKE: An offer in Nebraska, and Joe had an offer somewhere, too, as I recall.

MATARAZZO: Well, we – I think it just became known that we were movable, that we were all kind of looking for something else, and Joe...

O'ROURKE: Within the field of psychology, you mean?

MATARAZZO: Yes. Oh, yes. So Joe was offered a position at Nebraska, and George was contacted by Oregon Medical School, and we – Joe and I went to Nebraska. They offered both of us positions. We were not favorably impressed with Nebraska, and perhaps – it might have had something to do with the time of year. I think it was in December or something like that. It was bleak and cold and flat. We liked the department all right, but it wasn't an exciting place to go intellectually, either, at that time. We didn't feel that it was for us, although we could have gone as a research group again. They would be willing for us to come as a research group for the four of us.

At the same time, George had an offer here. He came out to Oregon to talk with Dean Baird, to be interviewed, and he was very impressed with the possibility of opening a whole new department of psychiatry, just having carte blanche to do what we thought should be done. You know, it just doesn't happen anymore. Everyplace is already developed. There isn't the open situation there was here. And he was so pleased with the reception here and all the possibilities that he just said, "Oh, you've just –" we were thinking that we might seriously think about going to Nebraska, and George said, "No, before you do, promise me one thing. You've got to go to

Oregon. You've got to just look at it," because they were willing for us also all to come together. And so we came here to look at Oregon, and we were just really sold by the people and the university and the situation.

O'ROURKE: And you had mentioned earlier that an advantage of Harvard, for at least yourself, was that it was back East again, close to...

MATARAZZO: Right.

O'ROURKE: ...you know, where you grew up. So was the move out to Oregon difficult in that context?

MATARAZZO: Well, a little bit, but we did feel that Oregon was just so friendly, and a little bit like New England. Everyone here was so welcoming, you just – it was the kind of friendliness that you don't find in the Northeast. So we just felt at home, really, right away.

O'ROURKE: Now, I understand that when you first came to Portland – at least Joe reports this in the paper – that you were met at the airport by Dr. Holman and...

MATARAZZO: By Hod Lewis.

O'ROURKE: Yeah, that's right. So, really, you were – and Dean Baird, of course, then, turned out to be very – he also made the two of you very good offers, too, I guess.

MATARAZZO: Yes, he did, yes. He and Charlie Holman was – Dean Baird was sick during the time that we were here for that first visit, so we didn't meet him at that time. We met and talked with Charlie Holman, as I recall, but Charlie Holman was in telephone contact with Dean Baird the whole time, and he was very warm and nice. We just couldn't have felt more welcomed or valued.

O'ROURKE: I hadn't actually asked you yet about George, except just to talk about him as the history has developed here, but what kind of person was George Saslow in those days?

MATARAZZO: Hmm. Well, of course, I think the most outstanding thing about George is his intellect. He is a very stimulating person to be around. He comes up with more ideas than you possibly could have time to do research on. He can be gruff and – you know, but he was very rewarding to work with him. He was a marvelous mentor.

O'ROURKE: And, obviously, the four of you were a fairly close-knit team in those days, as evidenced by the various moves and the fact that George really didn't want the team to break up and convinced you to come out here.

MATARAZZO: Yes.

O'ROURKE: Were you close at all socially as well?

MATARAZZO: Yes.

O'ROURKE: So you would do things off work together as well?

MATARAZZO: Yes, to some extent. You know, not frequently, but we were – we occasionally went to their house for dinner, they occasionally came to our house for dinner, but it wasn't an intimate friendship, but it was a very pleasant social relationship, yes.

O'ROURKE: And what about Dean Baird? You did meet him, then, I guess, on your subsequent trip out. Can you tell me a little bit about him and about his ideas that – vis-à-vis the psychiatry and psychology departments?

MATARAZZO: Well, I think he wanted to start a full-time department of psychiatry, and he was very amenable to the idea also of developing a department of psychology. At the time we came, of course, there was no department of psychiatry, really. There was someone – Henry Dixon, from downtown, came and spent some time here, I guess. However, no inpatient psychiatry. There was a ward that was built that had never been used in South Hospital. And there was one psychiatrist on the faculty, and that was Charlie Bradley, who was a child psychiatrist. He was from Providence, Rhode Island, interestingly enough, and my family knew his family. And he had one psychologist working for him, Marvin Greenbaum, working with him. Marvin worked at – I think he was active at CCD, Crippled Children's Division, it was, before it became CDRC, and also with Doernbecher.

Let's see. What was your question, now?

O'ROURKE: I was asking you originally about Dean Baird, but I was also – I sort of led you astray, there, by asking, really, two questions. But you were saying that Dean Baird, then, was supportive of the idea of expanding, or actually creating, a department of psychiatry and medical psychology.

MATARAZZO: Yes. He was a wonderful dean. He – and Charlie Holman. I must say they worked very closely together, the two of them, I think, and Charlie Holman was really in charge of some of the building and changes that were going on in Hospital South. And, of course, when we arrived, it was – it had been planned by Henry Dixon and perhaps some others. I think Henry Dixon was a main influence, and he had believed in relaxation therapy for psychiatric patients. So the ward was set up as a – like a hospital ward, with hospital beds. And the door, of course, was locked. There were big tubs, several very large hydrotherapy tubs, and marble slabs, and all kinds of water everywhere for colonic irrigations and all kinds of bizarre things that we had never thought of. I mean, they seemed bizarre to us at the time. But I'm sure that the theory – you know, that some people had found it was helpful in some way.

Anyway, we had to tear out all of those – all of that expensive marble, and so on, to build what we thought would be a good psychiatric service. And my first job was as – in charge of the inpatient – the psychology part of the inpatient services, including psychiatry and the other wards, but mainly my time was spent on psychiatry.

Maybe you already know the story, and perhaps Joe told you about it. We took out all the hospital beds and put in bunks that made it more homelike. They could be made into...

O'ROURKE: Right, he did describe that a little bit. But this is where you were actually working quite a bit, was in that ward, then, is that right?

MATARAZZO: Yes, I was. And the – as it became a therapeutic community, Jean Phillips and I were both very much involved in that.

O'ROURKE: And so back in those early days, then, did you spend – what percentage of your time did you spend in the ward, itself, or the clinic, itself?

MATARAZZO: Well...

O'ROURKE: Were you there most of the time?

MATARAZZO: Most of time, yes. I did some consultations to medical wards as there was any request for it, medicine or pediatrics or whatever, as there was a need for some kind of psychological evaluation, but the other wards weren't yet accustomed to the idea of – or the availability of this kind of service, and it wasn't used a lot until it grew. But at the start it was – I was primarily involved in the psychiatric service.

O'ROURKE: And this was the first school in the country to actually – I mean, it came a few years, I guess, after you and Joe and you arrived, but that actually had a separate department of medical psychology?

MATARAZZO: Yes, it was the first one in the country.

O'ROURKE: And how did that come about, do you think? Was that result of Joe and your interest in this, combined with Dean Baird's support? Or how was the decision made to set up a separate school – or department, rather, of medical psychology?

MATARAZZO: Well, I'm sure that Joe could give you more specific information than I could, since he did the negotiating with Dean Baird, but I think it's well known that we had some conflicts between psychology and psychiatry and that it was probably not tenable for us to remain within that department.

O'ROURKE: Although George Saslow was the head of the department of psychiatry.

MATARAZZO: Yes.

O'ROURKE: And at the point of your first arriving, you still had a fairly close working relationship with George, is that right?

MATARAZZO: Yes, we did.

O'ROURKE: And can you – well, later on, then – we're sort of jumping the gun, here, a little bit, maybe, but later on, of course, there was some conflict specifically between the departments of psychiatry and psychology here, and I guess part of that arose out of – well, there were many issues, I guess. I talked to Joe about most of them, I think, but I remember that one of the disputes had to do over referrals of patients to the medical psychology clinic; that referrals used to be direct to medical psychology, but psychiatry wanted to sort of field these referrals and then pass them on to medical psychology. And that was, I guess, the subject of, you know, one of the points of dispute between the two departments.

But I wonder if you could tell me what the difference would be in those days between the psychiatric clinic and the psychology clinic. What were the differences in approaches?

MATARAZZO: Well, I don't know that the approaches would have been so different. Psychology – of course, some of the roles of psychology and psychiatry overlap, in regard to psychotherapy, for instance, and I think we had a very similar orientation for psychotherapy, for treatment of patients generally. Psychology has the additional role of evaluating with certain psychological tests, doing evaluations of various kinds. Psychiatry doesn't do that, but they do – you know, they give medications and do electroshock therapy or other medical-type therapies.

So there wouldn't have been a difference in orientation, probably, so much as – I think I could say that we got along very well as a small group, when there were just the four of us or so, not much larger. As we became larger and there were more psychiatrists in the department who had – who came in with ideas of their own as to the role – the relationship between psychiatry and psychology, that this is probably where the trouble began. And George, as a psychiatrist, sided with the psychiatrists, and to the detriment of the psychologists. And so I think that's – you know, it got to be just down professional lines, and...

O'ROURKE: And, of course, there were George's people, too, that worked under him, right? The new psychiatrists coming in, plus – I mean, the same thing on the psychology side.

MATARAZZO: Yes, that's true. And, of course, to make the situation even more complicated, George had a larger budget, and so he paid some of the psychologists' salaries, and so they were under considerable pressure to side with him, and – you know it just got to be a – it was a very wasteful situation of probably a year or two when there was just so much conflict that it was hard to work.

O'ROURKE: And it must have taken a real toll on your relationship George Saslow, too.

MATARAZZO: Oh, yes.

O'ROURKE: And other people, too, I guess. Jean Phillips left during this period, is that...

MATARAZZO: Yes, she did. She was one whose salary was paid by psychiatry.

O'ROURKE: And so she was kind of in the middle, there?

MATARAZZO: Yes.

O'ROURKE: I know that the psychology department during this dispute got a lot of support from Dean Baird. Do you know where he – I mean, what sorts of – where did he position himself relative to this competition between the two departments? Did he take any stands on issues and did he – I know he used his power as dean a couple of times to sort of rescue psychology, but did he try to resolve the dispute at all?

MATARAZZO: No, not to my knowledge. I think it would have been impossible. I think – he was a very wise man who knew a lot about interpersonal behavior, about group conflict. He could have been in the mental health field himself. I think he was very wise. When a situation came up and someone was crying for help, he would help, but he did not, to my knowledge, intrude himself into the situation or attempt to decide who was right and who was wrong. It was just – it would have been impossible to control. I think he knew that. He was wise enough to know that.

O'ROURKE: And so I actually wanted to ask you a little bit more about Dean Baird. So you saw him as a wise man?

MATARAZZO: Yes.

O'ROURKE: What else can you tell me about his personality?

MATARAZZO: Well, he had a very relaxed appearance. I think his portrait just typifies him, his portrait in Baird Hall, where he's kind of leaning back. That was kind of a typical stance for him. He would listen, he would give you some words of wisdom. A very nice person. I don't know what to say beyond that. I didn't have an administrative position, so I didn't work with him, you know, closely.

O'ROURKE: Well, speaking of working relationships, did you ever at any time feel that any of the advice you'd gotten back at Brown about working so closely with your husband – did any of that ever ring true?

MATARAZZO: Oh, I think, certainly, you know, one would have to have differences of opinion from time to time, and we did. I don't think it was ever a major problem. We'd see things differently, and we'd tell each other about it and wouldn't necessarily convince each other. But I think it's like any partnership. It wasn't a big problem.

O'ROURKE: And it probably had its upside as well, and...

MATARAZZO: Oh, yes.

O'ROURKE: ...you could obviously communicate probably pretty well compared to maybe people who didn't have the advantage of such a close connection.

MATARAZZO: Yes, yes.

O'ROURKE: When you – actually, we talked a little bit off tape – this might be kind of just an interesting little footnote – about the – your negotiations in terms of salary when you first came here. Can you tell me what your salary was when you first came to OHSU?

MATARAZZO: Yes. I'm quite certain it was eight thousand.

O'ROURKE: And you mentioned that there had been some negotiation on your part to get it to eight thousand, is that right?

MATARAZZO: Well, there's some question in my mind. I think there was some suggestion it might be seven thousand, but it was set at eight thousand. I think there was no problem about it.

O'ROURKE: And you and Joe and George and Jean, all of you, had funding from – was it the National Institute of Mental Health?

MATARAZZO: Um-hmm.

O'ROURKE: Or was it just NIH?

MATARAZZO: I think it was NIMH.

O'ROURKE: And you brought that with you from Harvard?

MATARAZZO: Yes.

O'ROURKE: And, in fact, I think, then, for years afterwards a significant part of the staff was supported by research grants.

MATARAZZO: Right.

O'ROURKE: Can you tell me, were you involved at all in any of the grantsmanship, so to speak...

[End of Tape 1, Side 2]
Tape 2, Side 1

O'ROURKE: This is Michael O'Rourke, continuing the interview with Dr. Ruth Matarazzo on May 8, 1998.

I had started to ask you, before the tape ran out, about the grants that you worked on and whether you – how involved you were in the fundraising end of things vis-à-vis grants and either preparing proposals or reporting on outcomes. How much were you involved in that process?

MATARAZZO: Well, we were intimately involved in all of the research, you know, and in conducting it and analyzing it and reporting it, and, of course, that material would be part of the research proposal. We were listed on the research proposals. I don't recall exactly, you know, writing up the proposals and how they – and the interim reports. You know, we were intimately involved in the whole thing, and I guess I can't remember exactly how this was divided up.

O'ROURKE: But it was obviously a real boon, I think, to the school and to your team, also, for that matter, to be able to have this funding available, because I guess the department here couldn't be anywhere near as large as it became without that source of support.

MATARAZZO: Yes. Very necessary for getting the department off the ground, yes.

O'ROURKE: And in those days there wasn't that much money coming to the school from the state, I guess. Was there any research money in those days that came from state funds, or was it all from grants?

MATARAZZO: I think it – you know, overwhelmingly it was the federal government that gave grants. There were – Dean Baird, I think, was very skillful in getting the state gradually to take over funding of faculty positions. Very little money came from clinical work, as I don't think the faculty brought in a great deal of money for the clinical work that was done. The clinical work was seen as a way of training residents, and the fees were minimal.

O'ROURKE: During those early years, who – we've talked already, of course, about some of the people that you worked with, but I'm just wondering if there are people that stand out in your mind as people that you did quite a bit of work with in those days. Who were, I guess, the people on campus that you interacted with the most, besides, obviously, Joe and George and...

MATARAZZO: You mean here?

O'ROURKE: Yeah.

MATARAZZO: Well, we – we'd see Ralph Benson in obstetrics and gynecology. He was interested in women who had chronic pain and many gynecological complaints for which there didn't seem to be adequate physiological cause.

O'ROURKE: And so you would help him, then, to treat these patients from a psychological point of view, then?

MATARAZZO: Yes, and some research on those patients.

I did one study with David Bristow on heart – he was involved in – of course, he became head of cardiology. He was involved with mitral stenosis and replacing heart valves back when – I think it was early in – it was at an early time when mitral valves were being replaced, when someone who had rheumatic heart disease could actually – the rheumatic heart could actually be treated. There could be surgery, and the person could live a normal life or be saved from premature death. So I did a study with him. I did another one with Cecile Sunderland, who was in pediatric cardiology. It was a study of infants who were born with heart disease and it was corrected at birth, and then a follow-up on these infants as to when they were – when they were in school, were they normal in intellect and behavior.

O'ROURKE: Now, we're – Ralph Benson and David Bristow and Cecile Sunderland, were they all on the faculty up here, too?

MATARAZZO: Yes.

O'ROURKE: The study you mentioned on the heart surgery, the mitral valve surgery, made the papers.

MATARAZZO: Yes.

O'ROURKE: I was reading one of the clippings. You had found that there were – there was – I forget the exact result of that. I guess you found that people experienced more stress as a result of heart surgery than other types of surgery? Psychological stress. Is that right?

MATARAZZO: No. Actually, I think the – David Bristow and some others in the department found that some of their mitral valve replacement patients behaved very strangely and seemed anxious, depressed, sometimes had hallucinations or delusions after the surgery, and they thought that these patients perhaps were – well, maybe it was the severity of the surgery and the length of hospitalization, maybe it was that they were psychiatrically ill beforehand or particularly psychiatrically prone to develop such a thing and we – as I poured through all the possibilities, it finally turned out that the patients who had been ill the longest, who had had mitral disease for a long period of time, had the greatest physiological malfunction, were the ones who had this reaction, and that it probably was just a matter of the severity and length of the disease rather than any psychological factors.

And later on, as people were – people came to surgery earlier – after the surgery became available, you weren't, you know, an invalid for twenty years before you finally got the surgery, so when you first began to have problems, they did the surgery fairly promptly. And those – many, many fewer people had these reactions that they had noted earlier.

O'ROURKE: So it was just the toll of the long suffering with the disease, then?

MATARAZZO: Right.

O'ROURKE: Your work with these three, and also your clinical work, did the – as it turned out, did the school, then, meet your expectations in terms of – as a professional opportunity?

MATARAZZO: Yes, it did. It certainly did. I think – and more so as time went by, in terms of – well, in some ways more as time went by.

I must say I enjoyed those early years. The small size of the university, knowing everybody on the faculty, or virtually everybody – we all had lunch together in the little lunch room in the Hospital South; it was the physicians' lunchroom – and doing research, getting cross-fertilization of ideas, was quite wonderful. And I guess I was so pleased with all the opportunities and the fulfillment that I never questioned whether there were, you know, any inequalities, and so on. I mean, everybody knew there were, but you let it go.

But, then, in the 1970s is when affirmative action became more of a thing, and at this point – well, for our department, for example, I was put in charge of studying what happens to men and women on the faculty and at the students – I mean, applicants and the number accepted and so on, and we – that brought into focus things that everybody knew, that women faculty were, you know, grossly underpaid relative to men at the same rank and number of years, and so on, and also that there were very few women medical students. But it wasn't because the school wasn't accepting them, it was because women weren't applying to medical school.

There was probably certainly some prejudice against women students, and that, I think, was in part because there were so few of them that they were kind of an anomaly and they just weren't part of the group, you know. And in graduate school in our basic science department, the research aspect of our department, were – the students who were working for a Ph.D. were, again, relatively few applicants. We had no women faculty over there. We had a couple of women faculty, several, on the clinical side, but none over there, and the women students, there weren't too many applying. Their – interestingly, I was looking this over the other day. Their graduate record exam scores and their grade point averages were higher than those of the men, but they dropped out very – a third of them dropped out before graduating, which seemed to be due to cultural factors. They dropped out because they wanted to be with their husband or they were going to have a baby or something like that, and these would not be – well, having a baby wouldn't be a reason for a woman now to drop out and never get her degree, or to go off with her husband and never come back or make any effort to finish up. So that was a cultural factor.

I also noticed the – what salaries were back then. I think this was 1972, and the faculty salaries at the professor level were something between 20- and \$25,000, which tells you something about a change in the cost of living.

O'ROURKE: Compared to the eight thousand that you were hired on in 1957.

MATARAZZO: Well, in '57, yes. In '72, they'd gone up that much, but now, of course, that would be a poverty wage, practically.

O'ROURKE: And so you were the one that – you conducted this study, then, the amassing of statistics relative to the position of women up here on the Hill?

MATARAZZO: Well, within our department. And, then, when Dean Stone came, it was – that was probably in the early seventies, also. At that time the AAMC had said that every medical school needed to have a woman liaison officer to the AAMC to sort of – well, as a source for a bit of communication between AAMC and the university in regard to the status of women and encouraging women and keeping them on track and helping them through what was at that time a fairly difficult situation because there were so few women in the medical school classes, just as later it was difficult for blacks. You know, they don't want to go where there's only one or only two, because they have no group to be part of to help ease the stresses of the schooling.

So he appointed me the AAMC liaison officer, and so we started a committee of women faculty. There were not very many of us, but we met. For a while we met every week and had kind of a consciousness-raising session, and then we didn't need that after a while, and we began meeting more infrequently, and then we began meeting with students and – women students and giving potluck dinners and having speakers and tutoring them on how to interview for residencies and this sort of thing.

O'ROURKE: So it sounds like the issue of the position of women here at the school emerged, then, in the early seventies or late seventies.

MATARAZZO: Yes, right.

O'ROURKE: And what sort of action was taken by the school, I guess, to address some of these problems?

MATARAZZO: Oh. Dean Stone was very supportive. He gave us a budget so that, you know, I was sent to the AAMC meeting every year, and he gave us a budget to have occasional workshops and speakers. He was very interested in the program.

And we gradually got men to listen to us. Whenever you want somebody to change something, there's a certain amount of reluctance. And in our consciousness-raising groups, we came to the realization that women were not on any of the important medical school committees. We never – you know, we kind of accepted that before and not really thought about it a lot. So we approached the chair of the committee on committees, and he wasn't too happy to be approached, and he didn't welcome us by any means, but, after that, he did begin to see to it that there were women here and there, and now I think there's total integration. There's certainly no problem about it. I think just bringing people's attention to it in a relatively nonthreatening way – I think everybody feels threatened when there's a necessity for a change or a request for a change.

O'ROURKE: Did this change ever give rise to any more militant action, say, on the part of anybody up here on behalf of women, or were you able to pretty much effect the change just by...

MATARAZZO: I think we were able to – we found the men very ready to listen. You know, I think of one woman in one of the clinical specialties was – she was one of three or four people in charge of a clinic every – about every week or a couple of times a week, and so, you know, there were three or four faculty members there, and the other three or so were all men. And so at noon, the three men would say – or, you know, the most senior of the men would say, “Well, we’re all going to lunch now, so you’ll just finish up, right?” So every week they’d go off to lunch and leave her kind of holding the bag, and also excluding her from what she was part of. She told this to the group, and we – she didn’t know if that’s the way things had to be or ought to be or should she say something. And we said, well, gee, you really ought to say something. So she did, and, “Oh, my gosh, you didn’t like this all along?” “No.” “Oh. Well, we didn’t know that.” And so they stopped doing it.

O’ROURKE: So it was a matter of just sort of identifying these patterns of behavior and then they would change, I guess.

MATARAZZO: Yeah, I think so.

O’ROURKE: Although there was, you say, reluctance, at least on the part of the head of the committee of committees, but he must have thought about it, too.

MATARAZZO: Well, I guess he did, yes. He probably discussed it with his colleagues and got over his momentary reaction. But one – [laughing] one problem, one of the women who does surgery, or did surgery at that time, was – she was struck with the fact that every time she went to the surgery unit, there was a dressing room for doctors and a dressing room for nurses, and a woman doctor would therefore become a nurse, as far as changing, going to the changing room. And she got them to change it to men and women for changing rooms. She said, “You know, Title something or other and all that, I think you better change it.” And, you know, they were – they didn’t think that was very nice. I think there was a little ruffling of feathers there, but they did change it.

O’ROURKE: And how about salaries? Did they change?

MATARAZZO: Well, we found in our department that there was a \$4,500 average difference between males and females at the same level. I don’t know what it was for the university. We made this report to the department, and – well what was to do? There wasn’t – if they brought all the women up to the level of the men, that would mean that – you know, it couldn’t be done in one year because there wasn’t enough money. But if they used all the raises for the next four or five years and gave them all to the women, that would probably bring them up to just about the level of the men, but, then, the men would get no cost-of-living increases during that four- or five year period. So I think it was fairly slow. It didn’t just happen overnight. But I think gradually it happened.

And, then later, probably in the late seventies or early eighties, it became necessary, I think through affirmative action on the federal level, equal opportunity and all that, that it was considered important for each woman to be sort of paired with a man who was at her level, and

so that the two salaries were the same. Anyone who was at the same rank and the same number of years and had the same – you know, similar responsibilities and similar productivity was paired with a man, so that that way they would be sure that there was no falling back for the woman.

O'ROURKE: And so you think today that the salaries are about on par, then?

MATARAZZO: As far as I know, I think they are, yes.

O'ROURKE: Well, that's a step ahead of the rest of society, I think, then.

MATARAZZO: Oh, yes. Yes, it is.

O'ROURKE: Was this problem – I mean, did you have any awareness of this problem in terms of the broader state education system at that time? Were other schools coming to grips with this as well?

MATARAZZO: Well, I don't think they came to grips with it as quickly as the medical school did. Well, not all of them. I don't know, there was the case of, wasn't it, Pink versus the state of Oregon? A suit, a woman who was at Eastern Oregon State College, I think, Anna Pink. I think she finally got some additional wage from it. Other women who were part of that suit – it was a class-action suit – were not awarded – given an award of any kind.

I think the medical school was really exemplary in its handling of the situation. I'm sure not everyplace was quite as good, and I don't know entirely why. I think the administration has been, you know, very sensitive, and I don't know whether the fact that we have a lot of federal grants may have something to do with it, because the federal government pressured it and threatened grants, I think, if you didn't have things on an even level.

O'ROURKE: In terms of your own – well, first of all, when you and Joe first came here, did you live nearby?

MATARAZZO: Yes. We bought a house on Terwilliger for \$27,500.

O'ROURKE: Do you still live in that house?

MATARAZZO: No, we don't.

O'ROURKE: Well, that sounds pretty cheap for a house on Terwilliger these days.

MATARAZZO: Yes, yes. Some people just recently sold it, I'm sure for several hundred thousand. It had five bedrooms. It was an older home, but it was nice, and it was certainly spacious.

O'ROURKE: And how did you adapt to the greater community of Portland? Did you find Portland to be a good place to live?

MATARAZZO: We did. It was a very small psychology community at the time, and so we got to know – it was easy to get to know other psychologists. I think they welcomed a new psychologist or two in the community, and it was a great deal of fun. There was a Portland Psychological Association, and we were both active in it, and we gave workshops from time to time, and it was – it was stimulating and friendly. And, then, the Oregon Psychological Association also.

O'ROURKE: Did you have private patients at all during this period?

MATARAZZO: You know, at that time, when we first arrived, psychologists weren't licensed in the state of Oregon, and in many other states, too, so there were no psychologists in private practice, entirely in private practice, as far as I know, although we did see occasional private patients, yes. As part of our contract we were allowed to see some private patients, and we did that. They were relatively few.

O'ROURKE: And of course, I guess, over the years there have been – there's been some dispute over specifically this point, the town-gown kinds of struggles. I think there might have even been one sort of raging at the time you arrived in 1957.

MATARAZZO: Yes.

O'ROURKE: Can you tell me a little bit about that?

MATARAZZO: I don't know the details of it. I just know we were told that there was a town and gown problem, and I think that the town was upset that the medical school was adding clinical faculty and that – and the school was expanding. I'm sure that would have pained downtown considerably.

O'ROURKE: And that continued to, I guess, be a point of debate, maybe up to the present time, I don't know.

MATARAZZO: I think now there's competition among all the hospitals and various groups, practice groups. I don't know that there's any more competition between the medical school and the town than there is among all the hospitals.

O'ROURKE: And I guess the basic – back in those days, anyway, the basic idea was that the people up here on the Hill had some real advantages as a result of the resources that they had?

MATARAZZO: Yes.

O'ROURKE: I wonder also about the Multnomah County Hospital vis-à-vis the medical school hospital. Did you work in both at that time?

MATARAZZO: I think very, very occasionally we had a referral from the Multnomah County Hospital. It was relatively rare. Our action was primarily in Hospital South and in the outpatient clinic.

O'ROURKE: But did that change, then, when Multnomah County Hospital became part of the medical school hospital?

MATARAZZO: Yes, yes.

[End of Tape 2, Side 1]
Tape 2, Side 2

O'ROURKE: When that change occurred, was there – I assume in the beginning, at least, there was still a distinct difference between the two hospitals, is that right?

MATARAZZO: Yes.

O'ROURKE: How would you describe the difference?

MATARAZZO: Well, the facility, of course, was – Hospital South was new and was planned differently, with small rooms. There were mostly two patients to a room, or an occasional private room. I think there were a couple of four-bed wards, maybe, but County Hospital had ward with an enormous number of beds lined up. I hesitate to think how many there were on one ward, but it – you know, it was typical of – throughout the country, this is the way county hospitals were, and it was quite dismal.

O'ROURKE: And was it even possible to work in that environment, did you think? I mean, you obviously didn't have the same facilities as across the street.

MATARAZZO: You mean as a psychologist was it possible?

O'ROURKE: Right, as a psychologist.

MATARAZZO: Well, it was more difficult, certainly. You could occasionally find a little private room where you could do an interview or some testing, or, more likely, they would bring the patient over in a wheelchair to one's office in Hospital South or to the clinic office.

O'ROURKE: When it was first put on the table that Multnomah County wanted to divest itself of the hospital, do you remember what the reaction was up here?

MATARAZZO: I think it was positive. I don't remember that our department had any particularly strong reaction to it. I don't think it would have affected us as much as it affected medical people. I think the thought was that we could upgrade it and do more things with that space.

O'ROURKE: And, of course, I guess the first ten or fifteen years after you got here was a period of fantastic growth up here.

MATARAZZO: Yes.

O'ROURKE: Just three years after you arrived, I believe the school of nursing became a school, as opposed to just a department of nursing.

MATARAZZO: Yes.

O'ROURKE: And the dental school had moved up here just, maybe, previous to your arrival. Do you have any thoughts now about that period of growth and how the different schools fared in that? Say nursing versus dental school versus medical school? How were the – how did each school progress, I guess, is the question. And was there competition between the schools?

MATARAZZO: Oh, yes, I think so. I think the nursing school has been, certainly, a big success story. When they were part of the medical school, they were – they were not really, I'm sure, given the same status and budget and such that the medical school got. I suppose that the medical school was the strongest and largest institution, and so it was kind of in control of the other two schools, and I suppose one always – you understand your own problems the best, and, you know, you don't hear other people's problems quite as well. So I'm sure that they were just not given as much consideration. They needed to control their own fate, shall we say it that way, they really did. And I think since the nursing school has had its own dean that it has changed its image and its ideas about what nursing should be and do. I think it's been a wonderful success story.

The dental school has not grown, of course, like the nursing school, because dentistry is just not a growing occupation, and so they've been cutting back on their students. I don't know, I think they – I have the impression they're having a bit of a struggle, but I don't really know. O'ROURKE: And you mentioned the nursing school having their own dean. This would have been Carol Lindeman?

MATARAZZO: Yes, I think – I think she was the first dean, wasn't she? No.

O'ROURKE: Well, there was a woman named Jean Boyle before her.

MATARAZZO: Yes, right.

O'ROURKE: Maybe she was the first.

MATARAZZO: Yes, she probably was.

O'ROURKE: And did you know both of these people?

MATARAZZO: Yes.

O'ROURKE: And what can you tell me about Jean Boyle, maybe, to begin with?

MATARAZZO: Well, I think she was – you know, she grew out of an era when nursing was not what we see it as being today. She was a traditional person and did a good job, was a good administrator, I think. But when Carol Lindeman came, she, of course, brought a whole new era in. She had a doctorate, and she wanted to have graduate programs for nurses, she wanted to upgrade the science and have nurses as teachers, not depend on medical school faculty to teach any of the classes. They had pride in being nurses, and they asserted that pride.

O'ROURKE: And would say Carol Lindeman was fairly effective as leader of the nursing school?

MATARAZZO: I think she was. She was effective in getting grants, and I think the budget of the nursing school must have increased enormously; and, then, in getting funds for the new building, and so on. I think she was a – she is a very talented woman who did a very good job.

O'ROURKE: Did you have much interaction with the nursing school?

MATARAZZO: I did early on. When we first came, I taught psychology to the nurses. Child psychology or psychology generally. I think maybe it was child psychology that I taught to the nurses. So I had a class every year, or something, or every term. But after that, when the nursing faculty expanded and they had their more of their own faculty, I had less to do with them, and they are much more of a separate institution now.

O'ROURKE: Then, of course, in 1968, I guess, Dr. Holman succeeded Dean Baird here at the medical school, and we've already talked a little bit about him. Baird retired, I guess.

MATARAZZO: Yes, he retired. I think he was in quite ill health. He didn't live much longer, did he?

O'ROURKE: I'm not certain about that, how much longer he lived after...

MATARAZZO: I think he was quite ill when he retired.

O'ROURKE: Now, you had mentioned before that Charles Holman had always worked very closely with Dean Baird, so I assume that was a fairly smooth transition?

MATARAZZO: Yes, I think it was.

O'ROURKE: How would you describe Holman as a dean, say compared to Dean Baird?

MATARAZZO: Well, he was a totally different personality. He was a very lovable person, but he was kind of shy and didn't have Dean Baird's ease of persuasion and dealing with

people, I think. I think that Holman probably didn't find it as easy to be in that position as Dean Baird might have, but he did a very nice job. A very fair-minded and capable person.

O'ROURKE: Then, I guess about six years or so after Charles Holman took over as dean, the whole relationship here on the Hill to the state higher education system changed, in that this became a separate school rather than an adjunct of the University of Oregon. Do you – and had its own president, the first president being Bluemle. What do you remember about that transition then? How did it change things up here? Or did it change things up here?

MATARAZZO: Yes, it did. I guess one of the – one of my most striking memories of Bluemle is that he – in his initial address he talked about bringing the Oregon Medical School up into the twentieth century. He felt – he didn't know how we had ever survived with such a minimum number of administrators, and administration was really not a big item at that time. I mean, administration was small, and everybody liked it that way. But anyway, so he was a little bit insulting and probably didn't make himself any friends by that approach. But I think he was a capable man, and of course, the administration expanded under him.

He did not stay very long, did he?

O'ROURKE: No. He was only here for a couple of years, I think, or maybe three years. Yeah, that's right, three years.

And so the administration expanded, and that was not necessarily a good thing, is that what – or relative to what people felt at the time, anyway?

MATARAZZO: Oh, I think there were pluses and minuses to it, probably.

O'ROURKE: And what were the pluses and minuses?

MATARAZZO: Oh, I don't remember enough detail about it to probably have anything – any worthwhile comments.

O'ROURKE: But there was a feeling that more administration wasn't necessarily a good thing, though?

MATARAZZO: Oh, yes. I think the fear of a rising bureaucracy, maybe, because we had been used to things just being settled on a man-to-man or person-to-person basis with the dean or with the hospital administrator or whatever.

O'ROURKE: And, then, Dean Stone was appointed, in 1975, dean of the medical school. What was he like?

MATARAZZO: Well, he was a very capable and a very, very personable man. That was a long time ago. I don't know what I would say about him. He was very supportive to all of our programs and whatever we wanted to do. He was very easy to work with.

O'ROURKE: And what – how would you compare him, say, to Holman or to Dean Baird in terms of his style?

MATARAZZO: Hmm. Well, He was perhaps a little more urbane, but I think he was – he was very easy to deal with, he was very pleasant. He was just a change from the way it had been, that's all. A slight change.

O'ROURKE: And, then, when Bluemle did leave after not a terribly long time, Richard Jones took over as acting president, and I imagine he was a colleague before that time.

MATARAZZO: Um-hmm.

O'ROURKE: What can you tell me about him?

MATARAZZO: Well, he's, again, a very capable fellow, and he, of course, was – he was indigenous to the school, and so he – you know, I think people were happy, and there were certainly no difficulties. It was a smooth transition.

O'ROURKE: And, then, finally, in terms of this laundry list of people, here, Len Laster became president in 1978 and enjoyed a somewhat longer tenure than either Jones or Bluemle. What can you tell me about Len Laster?

MATARAZZO: Well, you know, I – not having been in administration myself, and kind of purposely staying away from any administration because I didn't want ever to have it felt that I was intruding into administration because of my husband, I purposely just stayed away from all of that. I did not involve myself.

I think Len Laster was always very helpful and good to me. I know that he was – that apparently he was not a diplomat and that he perhaps made something – made it difficult here for himself. I think there was some faculty discontent. But I was not part of it, and I really shouldn't – you know, it wasn't – it wasn't my situation to talk about.

O'ROURKE: But Joe, of course, was somewhat involved in the administration.

MATARAZZO: Yes.

O'ROURKE: How did the department of psychology, medical psychology, fare during these years? Is there – I mean, say between the time you arrived and into the Laster area. Were there any specific turning points? I mean, there was, of course, the struggle between psychiatry and psychology that was pretty hot and heavy for a couple of years, and we've talked a little bit about that, but are there any other things that come to mind in how things changed for the school of psychology over that twenty-some-year period?

MATARAZZO: Over that period of time.

O'ROURKE: Or more recently, too.

MATARAZZO: I think one of the – the psychology department, of course, was not only clinical, but very soon became – had a program offering a Ph.D. in basic psychology and experimental psychology, and with a physiological emphasis, too, and that has grown a great deal. And I suppose the arrival of Judson Brown early on, from Iowa, was a big help to that, and he attracted some very good people to the program. One of them now, Chris Cunningham, is the chairman of the department, and that is – that department has grown and is now integrated with other basic science departments in training students. They're just doing very well, and it's nice to see that kind of a department within a medical school.

O'ROURKE: And how has your own work changed over the years? Are you still doing more or less the same thing as when you arrived here, or how has it developed?

MATARAZZO: No, I'm not doing the same – well, doing some of the same things. Of course, we started an internship program in psychology within a year after we arrived, and that has evolved into a residency program, postdoctoral, because it is difficult in the present environment to work with interns who don't yet have their doctorate, who would be comparable to third- or fourth-year doctoral students. In order to bill for services, which we must do these days now that, you know, every department has to be self-supporting and every clinic has to be self-supporting, we really need to have people who have finished their doctorate, so, therefore, we have postdoctoral residents. We have a smaller program than we did. At one time we had, like, six interns and several postdocs, but there has been a cutback in funding.

O'ROURKE: Is this funding still coming from the federal level, then?

MATARAZZO: No, the funding – the federal government was funding it for a while, and then the hospitals and clinics took over the funding, and the residents really are required to sort of earn their keep. They have to see enough patients to pay their own salary.

But anyway, so the federal – we haven't been getting federal money for many, many years. I can't remember how many years, but probably twenty. But we are still training residents. Of course, we're training them in different sorts of things now. Instead of – well, when we first opened, the students, interns, of course, did some evaluation of – psychological evaluation of patients, testing and so on. They were also an integral part of the psychiatric service, the ward, Ward 5A, in Hospital South, and were involved in doing group therapy and being involved in the whole therapeutic community, which is what it was called at that time. It was kind of an experiment in social and psychological psychology and psychiatry. So they spent much of their day in that program.

Now they spend their day with referrals from both inpatient and outpatient sources, from the medical community generally. Probably – oh, maybe 25 percent of our referrals are from psychiatry, but no more than that. The others come from many medical clinics. And we do different kinds of things. When we do therapy now, it's short-term therapy with one of the – primarily with one of the empirically validated therapy programs. We do a lot of neuropsychological evaluations, and those were kind of primitive in our early days. There have

been many new neuropsychological tests developed and much more known about cognitive deficits as a result of various kinds of cerebral function.

O'ROURKE: So this is essentially the biological – or, I mean, on the biological side of...

MATARAZZO: I suppose we've gotten much more involved with biology, yes. Also, we've gotten to be more involved with the courts. I'm sure this happens to medicine, too, that – in the old days we never thought of being called into court to testify on a given issue, and now that may happen to the students, it certainly happens to staff, for head injuries, for child custody, for any number of things.

O'ROURKE: You, yourself, have been called into court as an expert witness?

MATARAZZO: Yes. My private practice consists almost entirely of doing evaluations for lawyers.

O'ROURKE: And do you like that?

MATARAZZO: Yes, I find it challenging.

O'ROURKE: Do you do the evaluations for the lawyers, themselves, or testify in court, or both?

MATARAZZO: Both.

O'ROURKE: And would you say, in terms of these changes that you've mentioned, not just the litigation part, but all of these changes in terms of therapy becoming more short term and getting more involved in the legal system and in biology and so forth and so on, are they plus or minus, would you say? What are the pluses and minuses, compared to the way things used to be?

MATARAZZO: Well, I think the way things used to be, we didn't have to worry about cost effectiveness as much. I mean, now, with managed care, we really have to be efficient, put things together as best we can, and then it's over. When we had the therapeutic community, we really could work with quite ill patients for a long period of time and could work on changing their behavior gradually. I'm not sure it probably was not cost effective, as I look back upon it. It was a wonderful opportunity to learn, and I think a significant number of patients really benefitted from it. We'd keep them on the ward for months, sometimes, and they would be involved in some kind of therapy all day long, and on Saturday mornings we even had more therapy, more group therapy. It was a great opportunity to get to understand more about psychiatric patients that you might not – you wouldn't get to know just on an outpatient basis.

I think now society's problems are different, and it's necessary to – necessary to be cost effective, and necessary to get people out, on their feet and doing something productive as quickly as one can. There isn't the freedom to just be philosophical. Not that we were entirely that, but I think we're much more outcome – you know, efficient outcome oriented.

And the need to appear in court I think is an outgrowth of a change in society, where so many people are suing. This is just a very litigious society, and many people are suing, often with good cause, and they should be compensated. There are, it seems to me, perhaps greater numbers of people who are suing because just for materialistic reasons, and we see a great number of those. And I think it's very important for society that professional people become involved in this sort of thing. It's a problem for society to which we don't yet have a good solution, and I think doing more research...

[End of Tape 2, Side 2]

Tape 3, Side 1

O'ROURKE: ...say that this is a continuation with Dr. Ruth Matarazzo on May 8, we decided it was, 1998.

Okay, go ahead.

MATARAZZO: For example, the breast implant litigation that has been costing millions nationwide is something in which I collected a number of cases and did some research on, and others have also become involved, and, as you know, recently that litigation was kind of thrown out by a federal judge in our area, Judge Jones, who is related to our own Richard Jones. But there are – I just think professionals have to get involved in this kind of thing, in doing research and in helping to straighten out the – some of the claims that are just absurd and are so costly to society.

O'ROURKE: And you think that professionals being involved in this legal arena, then, will bring about an outcome that will be desirable?

MATARAZZO: Well, my observation is that people at the medical school are – many of them are involved in court work, and they are very right, they are very well acquainted with research in the area, they do careful, objective exams. They're not hired guns, in part – I mean, they have a position in society and in the intellectual community, and they don't have to earn a living that way, which is, of course, what the other – the lawyers on the other side will try to imply. I think medical school faculty serve a very important function in that regard.

O'ROURKE: But maybe, just being the devil's advocate, here, for a minute, the – it always seems that it's possible for an attorney to find an expert who will weigh in in a way that's beneficial to their case, so is – and maybe all of these expert witnesses are as you just described them, people, you know, who are not necessarily making their living in court. But, still, it's possible for the lawyer to, in effect, have a hired gun in that they can find someone, usually, to argue on their side. I mean, don't you often confront expert witnesses on the other side giving a contrary opinion to your own?

MATARAZZO: Indeed, I do.

O'ROURKE: But in a way it almost seems like this isn't – well, there's a bias in terms of the opinions people bring to court.

MATARAZZO: Yes. I think my only defense on that issue is that often these people are in full-time private practice and do not have the time, or perhaps the interest in remaining current on research. Their arguments are often ones that, I think, if – I think the people I'm aware of from the medical school – and I sometimes read their testimony, and so on – I am almost always impressed with how sensible, how straightforward, how unemotional, how scientific they are in their testimony, and I think that, to me, they are persuasive. Now, I don't know that they are to a jury always, but I think, still, they do a public service.

O'ROURKE: And on that final point about the jury, do you think that maybe more often than not the careful, scientific testimony is what the juries will go with? Or what's your opinion there?

MATARAZZO: I think usually juries are pretty reasonable people. Yes, I think – I'm convinced that usually juries make reasonable decisions and do hear scientific testimony and give weight to it. I'm sure there are exceptions to that, and we can all think of some, but – but we can only do our best.

O'ROURKE: Well, that's sort of a side issue, here, but it sounds like it's occupying more and more of people's time relative to, at least, earlier eras.

Well, I'm actually running out of questions, here. I'm wondering if there's anything you can think of that we haven't talked about that might be worth discussing briefly, in terms of the school or its history or your own medical psychology department's history, your own history.

MATARAZZO: No, I think we've covered a lot.

O'ROURKE: Okay. Well, I want to thank you very much for the interview, and it'll be a valuable addition to the oral history collection, so thanks a lot.

MATARAZZO: Well, thank you. [Tape stopped.]

O'ROURKE: Well, I think it would be worthwhile to pick up that story you just told me off tape.

You said when you first arrived here that you were pregnant?

MATARAZZO: Yes.

O'ROURKE: Was this your first child?

MATARAZZO: Yes, our first child.

O'ROURKE: And that that caused you some apprehension?

MATARAZZO: Well, yes. We came – when we came in February to look at the medical school, I knew I was pregnant, and I went to great effort to conceal it, because I was afraid I wouldn't be offered the job if it were known, because they would say, Oh, well, she's just going to stay home with her baby.

O'ROURKE: And that was essentially the way things were then.

MATARAZZO: Yes, very much so.

O'ROURKE: But you also mentioned that this was your case – well, first of all, so you didn't tell them you were pregnant.

MATARAZZO: No, I didn't. I suppose maybe that wasn't nice, but I knew they would probably not hire me if they knew I was pregnant.

O'ROURKE: And so how did you manage your pregnancy, then, on the job, and when did you let people know?

MATARAZZO: Well, when we came back, I think, a month or so later to find a house after we had accepted the job, and I was still able to conceal it, but we then got here in June, and the baby was due and the end of July, so it was quite apparent. [Laughing] And I'm sure they were shocked when they saw me. But I worked up until the day the baby came. I went from here right to the hospital.

And no one seemed to – I mean, no one said anything about it, until afterward one of the nurses told me that she was pregnant, and she had discussed it with the director of nursing that the nurses were required to stop work by shortly – you know, by their third month or shortly thereafter, as soon as it began to show, that they could not work on the wards or clinics, and that she – and she had told the director of nursing that she was not going to quit after her third month, she did not have to, that Ruth Matarazzo worked until the very end, and she didn't see why she – she or nurses – should have to quit. It was not fair. And so the nursing rule apparently was changed on that basis, that they could work until their sixth month. And I'm not quite sure why they had to quit in their sixth month, except perhaps they worried about – I think they expressed concern that if the nurses had to lift patients, or whatever, it could be bad for their pregnancy.

O'ROURKE: So you sort of blazed a trail, maybe unwittingly...

MATARAZZO: [Laughing] Right.

O'ROURKE: ...here at the medical school, then. And the director of nursing at that time, I guess, would have been...

MATARAZZO: Shirley Thompson was the director of nursing, she was the director of nursing service.

O'ROURKE: Would she be the one that changed the rule, then, do you know?

MATARAZZO: I think she would have been, yes.

O'ROURKE: Well, again, thank you for telling that story for the tape.

MATARAZZO: Okay.

[End of interview]

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