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DALE GIBB

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INTERVIEW

Q: Today is August 11, and this is the first interview with Dale Gibb. Dale, how are you?

GIBB: I'm fine.

CHILDHOOD AND EDUCATION

Q: Good. So, as I mentioned, let's start at the beginning. If you could talk a little bit about your childhood, where you grew up. Obviously, we're interested in your background and early influences on what became a really fascinating international career. Let's start at the beginning.

GIBB: I was born in Dodge City, Kansas. I don't know where my name Dale came from. It wasn't from Dale Evans. We moved about four or five years later to Lawton, Oklahoma, where my father was manager of a dairy company that had the contract with Fort Sill. So, I think that's where a connection with the military came in.

We lived there until the end of fifth grade when we moved to Kansas City. We lived in Leawood, Kansas, which is Johnson County, the Democratic part of the state. I was particularly interested in social sciences from that period on, and I went to Shawnee Mission, a huge high school. Our class was the first senior class in Shawnee Mission East. I had a couple of teachers who were superb in history and political science, and that's when I came to love those fields. I remember early on saying that my ideal career would be to be in the diplomatic service, about which I knew little at that point.

Q: So, did your dad stay associated with the military?

GIBB: No, no, he wasn't with the military at all. He was with Fairmont Foods, which was a large dairy company, and he became division manager there, so he was traveling. He was assigned there because of transportation to other places. He eventually became vice president. But both parents ended up having a slight prejudice against the military all of their lives. So, I don't know where that came from except it reflects a midwestern resentment of the federal government.

Q: Right. So, it was a more libertarian outlook.

GIBB: Exactly.

Q: And this was definitely pre-Vietnam.

GIBB: That was still way, way in the future.

Q: And we will get to that. But it's often the case that a high school teacher will just turn you on in a way that you don't expect. The other thing that I found talking to people is books, some readings, just all of a sudden sort of ignite an interest that you didn't know was there. And I don't know if you remember anything that particularly struck you.

GIBB: I'm remembering *Pearl Buck's Pavilion of Women*.

And my father at some point gave me Wendell Wilkie's *One World*, which is interesting, I mean, given that he was the one who gave it to me. I tried to give it to my brothers. That hasn't worked. But anyway, no, it was a world history teacher and readings from that period, especially the history of Czechoslovakia, I think, was something that always fascinated me.

Q: Right. Was your family Czech?

GIBB: No, not at all. I was just getting interested in that, its WWII history and India, where I've never been. But anyway, those were the interesting ones at that stage to me.

Q: Right. And certainly, at that time Czechoslovakia was sort of terre inconnue because it was behind the Iron Curtain. And people didn't travel there.

GIBB: Right.

Q: Did you do any traveling as a child?

GIBB: No. I had never seen the ocean until I got to Smith.

Q: Is that right?

GIBB: We went to Minnesota, we went to New Mexico, Texas and Arkansas, and I hadn't been to Washington, so all of it was new.

I had an aunt who was twenty years older than my mother, and she traveled around the world regularly and later my father's sister did too. So, everybody got interested in it. But they were very political, they were very active in the Republican Party. They had a women's reading group in western Kansas, and were very active politically.

Q: That had to include some discussion of foreign policy.

GIBB: Yes. And I remember when Stalin died, picking up the paper that morning and discussing it. I don't remember my views about it particularly. And we watched the conventions. My parents gave a party the night of the election in 1948 and invited their Democratic neighbors— everybody went home very quietly.

Q: (Laughs) That's when neighbors could be from different parties and still be friendly neighbors.

GIBB: Absolutely. Well, that's still true here in Old Town where I'm surrounded.

Q: Are you?

GIBB: Yes.

Q: Well, there has to be more of it. So, what drew you to Smith?

GIBB: Smith and Kansas City had quite a connection; a good friend of mine, who was really the person I admired in high school, went there; I applied and got in. Smith started the junior year abroad and I wanted to go on that. I'd had two years of French, both not very good, in high school. I went in to take the language exam at Smith and the professor said something to me in French, and asked, "Do you know what I said?" And I said, "Yes, you asked me if I wanted a drink." And she said, "No, I asked you if you wanted to speak to me in French." So, I took Russian, which my advisor should have counseled me against, but I did it, and after I finished two years of that I made the dean's list, but not those first two years. (Laughs) But I was glad I hadn't taken French then. It would have been too much with the language lab and everything else. Smith was a big adjustment.

Q: Right. So, Smith had just announced a junior year abroad.

GIBB: They were the first school to do it. And I always admired that.

Q: Right. And taking Russian, if my timing is correct, I recall that after Sputnik went up there was a huge push in schools to learn Russian.

GIBB: Yes. Wasn't that about 1957?

Q: Yes.

GIBB: I don't think that was the reason I took Russian. I wanted to do it; I didn't have any great feelings about it. But it was a good course, it was interesting and I enjoyed it. I wish I had studied more Russian literature.

Q: You had two years of Russian in college?

GIBB: Yeah, uh-huh.

Q: Did you continue it after?

GIBB: No, but I can still read the Cyrillic alphabet, and I've been there three times, so I follow it quite closely. I wish I had studied more Russian literature and history. The Russian soul, I mean, it really makes today even more interesting and sadder. And I have Russian friends. I'm sorry not to have been able to be assigned to the ex-Soviet countries.

Q: We can talk about that later. But I absolutely agree with you. So, when did you reconnect with French? Because I know your French is excellent.

GIBB: (Laughs) In Vietnam I was taking French from my—he wasn't my counterpart because he was secretary general of the ministry of health, and he would come to our apartment every Saturday, and we would exchange English and French lessons. And I had good Vietnamese friends who had superb French.

Q: Right.

GIBB: They're still friends. And that got me into it. And then, I went to Bologna and studied French at SAIS (School of Advanced International Studies). That was really important, but it wasn't until I began working in Tunisia and had private French lessons that it really came together—that made a huge difference.

Q: Right. Well, let's go back to Smith. Were you a history major?

GIBB: Government.

Q: Were you still thinking about diplomatic service?

GIBB: Yes. Right. And I took the Foreign Service exam and then came to Washington for the oral exam, which was my first time in Washington too. And I didn't pass it. They told me I had been on the margins on the economics part, and then in the exam, they wanted to know who—it couldn't have been Secretariat. I don't remember who

the horse was; and then why my father was born in Leavenworth— questions just designed to throw you off.

Q: Well, you would have been a rare bird there because there just weren't that many women being taken into the Foreign Service at that time.

GIBB: I'm just so happy I ended up in USAID instead. I never could have stood the strictures of the Foreign Service in the State Department. AID was a lot more freewheeling.

Q: Yeah. And you had a chance to figure that out. So, you took the State Department exam while you were at Smith, passed the written test, went down to Washington for the oral, while you were still at Smith, or had you graduated?

GIBB: I was still at Smith. I think my professor was sort of shocked that I was going because I wasn't an outstanding student, and he was amazed that I did it. But he remained a friend. He was—he also was one of the first to take a group overseas to Geneva, which he did for many years. He also wrote a book on the history of the *Herald Tribune*, which was well reviewed.

Q: Do you remember his name?

GIBB: Charles Robertson.

Q: At that time, would you say most of your classmates were headed towards a career?

GIBB: Yes. There were some who absolutely were not, but I think most of them were.

Q: Right. Well, at a women's college, there was no resistance to doing that. In fact, I suspect you had professors who were really encouraging you.

GIBB: Right. That wasn't a surprise and it always seemed to me the natural thing to do. My mother, I remember, had wanted me to get a teaching degree so I could teach. I'd never had any interest in that whatsoever.

Q: Right. But that meant your mother encouraged you to think about a career?

GIBB: Oh, yeah, yes. Both parents did and assumed that.

FIRST JOBS

Q: So, okay, you graduated from Smith. Did you go immediately to SAIS?

GIBB: No. The first summer I worked for the National Academy of Sciences in central records, and I had a crazy, incredible woman as my chief who was very, very good there. And the most wonderful thing was getting to know the National Academy of Sciences,

which I remember later on to which we had a connection. Filing wasn't my thing, however, and I—luckily, after the summer '63 I got a job in Battelle as the administrative assistant to an economist who created an input-output model of the U.S. economy. W. Halder Fisher was an older man who was very good in his field.

GIBB: And Battelle was very interesting because, the way I heard it, they invented Xerox, and had the contract with DARPA. These were very interesting people doing fascinating things. They were “ambulance chasers” a little bit too.

Q: Right.

GIBB: But then, the year after that, because two of my friends were going to Europe, I had the guts to talk my parents into partially funding me, and to ask for time off. I went for four months. Battelle hired one person and then another second one as my substitute, and when I came back we all three worked for this economist. It was really a wonderful trip. I remember being in Paris near the end of the trip reading *The Mandarins* in my hotel—Hotel d'Isley on Rue Jacob. I've just ordered *The Mandarins* again two weeks ago and I'm reading it.

Q: Is that right?

GIBB: Yeah. It's fascinating, especially now that I know more about it.

Q: Right. So, where in Europe did you travel?

GIBB: Oh, I wanted to fly in by myself and I flew in—that was a time when KLM would even put a blanket over you and bring you extra chocolate. So, I was there by myself in Amsterdam for four days and then I flew to Paris and met my friends in Paris, and we went to Italy and Greece, and back to Italy, back to France, and then they left, and I went to England and stayed in England for a month.

Q: Wow.

GIBB: And my house mother (from Smith) was so shocked —she was British and she was living there—and she heard I was staying in Simpson Square, and she could not believe it. “How could you do that?” And her son lent me his apartment in Knightsbridge, so I had a very comfortable small apartment in nice surroundings, and enjoyed an English Christmas with these good friends.

Q: Wow, not bad.

GIBB: And that was right before Churchill died, I think.

Q: Was it 1965?

GIBB: Yes.

Q: Clearly you had an adventurous streak from very early on. But back to Battelle, I guess we might call it now a beltway bandit, but they basically had contracts throughout the government, didn't they?

GIBB: Oh, they did, they did. They were and are a very good outfit. I think quite conservative, probably, but I think they still have a good reputation. Columbus, Ohio was their headquarters and that, seemingly, was a somewhat sexist place. But I left and went to work for an international lawyer who had been involved in the Nuremberg trials and was a person who helped the World Bank start its Institute for the Settlement of Investment Disputes. He wanted me to help him with a book about that. He owned the Anchorage, which was this gorgeous building above Dupont Circle. He expected me to stay there all the time, even though I was supposed to be researching this book. Things got a bit iffy and I left happily after a year or so.

And that's when I was looking for another job. I interviewed in various places including in AID with Art Hughes who was head of the Far East Bureau. And I do remember before that, when I took a couple of days off from the lawyer's office saying I was sick, my parents were so upset they drove one of their cars to Washington and insisted I keep the car. At that point my father told me "It's not doing what you like, it's liking what you do."

Then, luckily, I got the job in AID and then after that it was fine. But before that—first jobs can be miserable and mine had become more and more miserable.

Q: Right. A lot of the first jobs you've been describing, although in fascinating places, were administrative. But you learn a lot.

GIBB: You learn a lot. It wasn't as bad as being an administrative assistant in USAID. (Laughs)

Q: That's a low bar.

GIBB: I had a lot more to do at AID. And there weren't so many of us at that time.

Q: So, the fact that you had passed the Foreign Service exam, did that make it easier for you to get into AID? Did you have to take a new exam?

VIETNAM

GIBB: No, no, there was no exam. That's when they were hiring for Vietnam, for the Far East, and I was hired into personnel for the Far East bureau. I was working for a wonderful person, Anne Boyd, but then she changed to overseas personnel and I was in the domestic section, working with people who seemed to resent my education. Personnel staffing can be putting a lot of numbers in boxes. I was not great at that.

Q: Right.

GIBB: The first day in the job, when I was still working for Anne Boyd, I was interviewing full colonels, not even knowing that colonel was a very high rank. Luckily, I was backstopping the Far East health bureau, headed by John Clay. Did you ever know him?

Q: I didn't, no.

GIBB: And Keys McManus. They liked the way I was backstopping their office. So, they tried to hire me and the woman I was working with said, "We've got many better people. You don't want her." Luckily, I was still transferred, and it made all the difference because that became the Vietnam health bureau, which was incredibly active. We were working seven days a week, twelve hours a day a lot of the time. It was fascinating.

Q: That's when you first encountered Keys? That's a friendship that continues today.

GIBB: Yes. She is 97 and living in Mexico.

Q: So, you've encountered sexism and other prejudices, including what might be called anti education, but landed on your feet.

GIBB: Yes. thank heavens I was able to move out of a position where I never could have advanced and was definitely resented.

Q: Right. And you had to have enough self-confidence to know to get out. I think that's one of the really important lessons that a lot of women have learned, you know, how to move on.

GIBB: Yes. If you can. And when you think of how many people can't, I realize the joys of being independent.

Q: Right. Well, knowing that you had your parents backing, that they wanted you to do something that you really wanted to do was helpful

GIBB: Yeah, I think they were probably pretty relieved. I mean, for me to be staying home sick is not what I do.

Q: Right, exactly. Okay, so you moved from domestic personnel to international personnel to what became the Vietnam health bureau. And was that your first foray into health issues?

GIBB: Yes. Well, I was always interested, including when I was at the National Academy of Sciences. That was the issue I would read about on my own and follow the most closely - the Institute of Medicine. And we were madly recruiting people and my

chief, John Clay, was slightly crazy, but very, very dynamic, and he would call Vietnam daily, regarding recruitment especially. There were eight people in the office interviewing nurses, anesthetists, logisticians, and MDs.

Q: I would love to have you talk about the experience of building the Vietnam bureau, the crazy twenty-four seven weeks. Describe the atmosphere and what some of the challenges were.

GIBB: I just don't even remember them as challenges. There were constant shifts in the bureaucracy. The leads were the same, but the head of the office was replaced by an Oklahoma politician who was a physician, and he made life miserable for a while. Trying to recruit anesthesiologists was a challenge, going to personnel fairs, I did a couple of those. We were able to create a program that sponsored people for their MPH's . We sent Sam Taylor, Jerry Bowers and a bunch of other people— all of those people, got training and experience in the Vietnam bureau. On reflection, none were women in that training.

Q: So, you were deep into the recruitment side of things from Washington? And that was the time when there was a huge buildup, right?

GIBB: Right. So that started in '66. And then maybe two years later they suddenly decide no, you can't be hired that way, or under that mechanism, and they got rid of us on very short notice. In Nov. '69, I had a choice of going to Vietnam or losing a job, and that was over Thanksgiving, So I went to Vietnam about the 28 of January 1970. But I had already met people, Vietnamese Ministry of Health officials, who had come to the States the summer before, who became close friends during my assignment there. I was in the health program office, which was very big, and I already had friends in the place, so it was great.

Q: So, what was the health program like in Vietnam? If you're training anesthesiologists, that sounds quite clinical.

GIBB: Well, we were hiring them. So, we even had a family planning project which was headed by Dr. Dorothy Glenn. We had a large civilian casualties program. We also had programs in public health, nursing education, and we had a very important effort, Volunteer Physicians for Vietnam, VPVNs, and we had a medical education program through the AMA (American Medical Association). So, I had fascinating contacts with the AMA, both managing the contracts in Washington, and then out there.

William (Bill) Moncrief was the deputy and then the health chief in Vietnam at that time. There were 300 people in the Mondial Hotel, our office, but we had 3,000 people in the health division throughout the country. There were health teams from other countries, such as Korea as well. The VPVNS worked in hospitals, both advising and providing care.

Q: Right. And how many Americans?

GIBB: Yes, a lot. I do not remember the number. Don McDonald was the mission director at that stage.

Q: Right.

GIBB: It was a wonderful group. Vietnam was fascinating. We did have some things happen that were not quite safe, but we were generally quite secure. Housing could be an issue. Our house, shared with 3 other women, was taken over by the Housing Chief, but I ended up in an apartment that had housed the plastic surgery group, the Barsky Project, a very political but technically sound effort, engaged in training and treatment.

Q: Right. So, could you travel around the country?

GIBB: I didn't travel that much. I traveled to the Delta, but my job was really more in the health program office.

Q: Right. So, the program involved not only delivering services, but also sending Vietnamese to the U.S. for training?

GIBB: We did. We had a wonderful participant training program, and many of the people that we were involved with stayed on until the fall of the government, some longer. When I went back to Vietnam years later, when I was with APHA (American Public Health Association), there were people with whom I had been involved, still doing things, for example, the surgical suites that we had built were still there. The man who took over the medical school under the Communist government was really anti-US, so he tried to get rid of many of the developments our people had begun, but some of the relationships with departments in the United States were still going on. I think that maybe more of what we did during the US period in Vietnam lasted longer than in Afghanistan.

Q: That's interesting. Hospital partnerships, you know, also lasted for a long time in Russia, even after everything else went south.

GIBB: Right. The AMA backstopped relationships in medical school disciplines with US medical schools and lasted quite a while.

Q: So, it's a fascinating thing for me because you saw AID when it was larger than it ever was in the seventies and eighties. Did it feel the Vietnam program was its own agency?

GIBB: It did. And working in Vietnam was not necessarily a ticket to getting another job in AID.

Q: Hmm. Because it was so politicized at that point with the war?

GIBB: Politicized, no. No. More just the AID experience. I mean, you know, the Latin America bureau considered itself the best. Everything was much more orthodox, and the Vietnam bureau was not orthodox.

Q: Ah, got it.

GIBB: You didn't really learn AID programming there.

Q: Right. Because it was so unique?

GIBB: Yes, and fast moving. But it was good.

Q: You were a Foreign Service officer, so presumably you signed up to go anywhere you were sent, right?

GIBB: No. No, at that stage. I was not a Foreign Service officer in Vietnam and when I left, I was on leave without pay when I went to Tulane. I went to Tulane and got an MPH and then, I had to try to get back into AID.

Q: So, you left AID for graduate school?

GIBB: Yes. I was paying my own way, or I had a partial scholarship, but I didn't have any support from AID. I thought that would mean something to AID, but the personnel officer told me, "If we had wanted you to do that, we would have sent you."

Q: Eww.

GIBB: So, having that degree didn't make any difference. But anyway, it worked out because I got the MPH, then was hired by APHA and became head of their international contract division by the time I left there three years later. And I got to travel—we had won the DEIDS project, Development and Evaluation of Integrated Delivery Systems which was supposed to work in four countries— Thailand, Nigeria, Ecuador, and one other one. They never chose the last one. DEIDS did work in Thailand, with the University of Hawaii under the leadership of Manny Vogouropolus. It was later evaluated— often— and was quite successful in the project area.

Q: (Laughs) Right. I need to take you back to Vietnam because I'm now a little bit confused. How long were you there?

GIBB: I was in Vietnam for three and a half years, January of 1969 to July of 1972.

Q: Okay. So, you saw the war getting hotter and hotter.

GIBB: Yes. I went back in 1975 at Christmas when I was with APHA, and we were working with the Thailand project, which was very interesting and effective. I stopped in Vietnam on the way out and got to meet some of my counterparts and friends. And I

spent New Year's Eve in Hong Kong with my Smith housemother and her son's family. unexpectedly.

And then, in April, the whole thing fell apart. But during that Christmas visit to Vietnam, friends and officials had been asking why we were opposed to what Nixon was doing, because they really felt Nixon was all they had to hold on to.

Q: So, people were feeling abandoned?

GIBB: Yes, yes. They saw it coming. And my close Vietnamese friends who lived just down the street, one a very successful MD and the other one eventually a UNFPA (United Nations Population Fund) rep in three countries. The one who was an MD awakened the morning of Vietnam's fall to see that everything was covered in red, you know. It just reminds you of what the Afghans are going through.

So, it was quite emotional. I was very involved with Vietnam at that stage, and knew people involved in evacuations.

Q: Did you get involved at all in helping some of the evacuees? Just from your personal friendships.

GIBB: Not really. My dentist was the CIA dentist, and she and her husband, who was the deputy secretary general of the ministry of health, were good friends. They got out early. The son and daughter are dentists. In fact, the son is my dentist now. But their politics were interesting. They were somewhat suspicious of some other evacuees, and some who stayed.

Q: These were divisions within the Vietnamese community?

GIBB: That has become more understandable in recent years.

Q: So, just one last question on the health program there. Do you think anything that we did there or supported made a difference?

GIBB: Yes, I do. I think we set up good training programs for nurses and public health people. We developed surgical suites. We built a couple of hospitals with the plastic surgery program, and developed a lasting quality medical education program.

Q: A good testimony for training, something that is sustainable even if it's hard to quantify the impact.

GIBB: I think the participant training program as well. Many of those trained people ended up here, and made a huge difference here too. And the ones who stayed too. I think that was worth it.

Q: So, when you left Vietnam you left AID, is that correct?

GIBB: Well, I wasn't a direct hire at that stage. I don't remember what I was. So, I left, and it was only after APHA that I managed to get recruited again. I was supposed to go to Afghanistan and John Alden had recruited me, and I was looking forward to it. I ended up not doing it for personal reasons. And then, a month later, I thought, I cannot keep doing this job at APHA. I saw these people leaving the building each night and I thought I could be doing this in fifty years. So, I went back, and I got hired to go to El Salvador. Both Afghanistan and El Salvador had revolutions the same year, but in Afghanistan they killed the American Ambassador and threatened people, so the staff was evacuated. In El Salvador, we just stayed and watched it, so I was there at the time the archbishop was killed.

Q: So After Vietnam you did an MPH at Tulane. After Tulane you went to APHA and—

GIBB: In the international division with Malcolm Merrell. I was managing the DEIDS contract. Bud Schutt was the person in AID and then Lee Howard.

Q: Oh, gosh, yes. These are very familiar names.

GIBB: Yes. It is good to think of them.

Q: And who from AID recruited you? I mean, you wanted to get out of APHA, I get that, but there must have been someone on the inside of AID trying to bring you in.

GIBB: Well, I had contacts, and Jerry Pagano was one person I think I ended up working with. That was what I remember mainly, but I was known from Vietnam and from my DEIDS work, especially by Bud Shutt and Dr. Howard.

EL SALVADOR

Q: Right. So, at this point you did join AID, and you did become a Foreign Service officer. Did you do the IDI (International Development Program) program?

GIBB: No.

Q: So, you were more or less immediately sent to El Salvador?

GIBB: I was the head of the health program there. And Donor Lyon had left but there was an acting director—I can't remember his last name. Peter Askin was the deputy.

Q: So, what was the program like there? Was it public health focused or was it more of a medical program?

GIBB: No, it was public health. And we were active throughout the country, but it became harder and harder to work. That's when the Salvadoreans were building walls around their houses for security. It was a difficult time. But it was a public health and

family planning program. John Paul James followed Bob Haladay as the Family Planning officer.

Q: So, El Salvador was a major public health program, but because of the civil war it was harder and harder to get out and actually to implement the activities.

GIBB: Yes. And we had to move our offices three times, I think. We ended up in a hotel up on a hill. We called it the Sitting Duck Lodge. But it was wild. And we changed directors several times. It was crazy.

Q: Right. Did it feel different from being in the war in Vietnam?

GIBB: It didn't feel similar at all. And partly, I mean, for example, the vice minister of health escaped with his family to the States early on. These were friends, you know. You'd been working with people, but people were worried and getting out. And that was not something that happened in Vietnam. I had to learn Spanish really fast to do that job.

Q: I was going to ask you about Spanish training.

GIBB: Oh, yes. I lucked out in getting private Spanish lessons too, and I passed the exam within three months of being there.

Q: Bravo.

GIBB: So, it was good. I'm glad I had the experience. I was driving by myself from El Salvador to Guatemala on Friday nights in the beginning. Needless to say, by the end, I was not doing that.

Q: Yeah.

GIBB: And then, I was at that point starting graduate work at Johns Hopkins, and I had decided not to go back to El Salvador, just as I was recruited to go to Tunisia.

Q: With AID?

GIBB: Yes, I was promoted for the job. I had had a major problem managing John Paul James, who really, really focused on the population only issue.

Q: Right. So, you were the head of the health program.

GIBB: I was the head of the whole thing.

Q: For the whole thing – population and public health, but you had an ideologue working for you.

GIBB: He managed to get the head of the Family Planning Association fired because

he said he wasn't being adamant enough. (Laughs). Anyway, it was a crazy time in many ways. But I had excellent counterparts in health, nutrition and family planning.

Q: Right. What was the El Salvador government position on family planning? Were they ambivalent?

GIBB: They were good, they were good, but there were always some who wanted to drag their feet. But no, they were advocates.

Q: So, you mentioned that you were doing a program at SAIS while you were in El Salvador?

GIBB: No, I'd finished at SAIS. I thought I might want to do a doctorate in public health. So, I was trying, and I took the oral prelims, but I hadn't come up with a very good thesis topic. I felt that breastfeeding beyond two months was not necessarily what women in El Salvador should be forced to do because either working or going to school was more important. (Laughs) It wasn't the argument, necessarily, but the way I was trying to prove it. Anyway, it didn't work, and I was glad I hadn't passed it. I had no interest in doing that, really.

Q: Right. So, you had taken the course work?

GIBB: I had finished everything but one course, I think. That was not a problem. I realized that I didn't want to teach, and I didn't want to do research, the major reasons for doing a DrPH .

Q: But did you do this on your own or did AID help?

GIBB: I did it totally on my own. And I was driving back and forth to Baltimore twice a week. Can you imagine? You couldn't possibly do that now.

Q: No. Well, I can imagine because I also did that. So, did you leave AID to do that or take a leave of absence?

GIBB: I was on home leave, and I had a couple more months.

Q: Got it. Before going to Tunisia.

GIBB: And I guess I'd been taking courses when I was at APHA too, so I'd started it before that, with Tim Baker and Bill Reinke as advisors. Nancy Pielemeier and some other USAID people and I were in some fascinating courses together, including one on factor analysis which a friend said was akin in usefulness to that of the divine right of kings!

Q: Okay. So, you're an ABD (All But Dissertation). Did you request Tunisia or was that what was available?

TUNISIA

GIBB: No, the person who was the health officer in Tunisia at that point had narcolepsy, and so they were easing him out. And I was recruited. Bill Gelabert was the head of the program. And it was such a different atmosphere. And I had the French to do it. I really grew to love it

Q: Yeah?

GIBB: Living in the beginning was tough. I was in a large empty house. It rained a lot and was quite cold.

But then, I ended up getting the smallest house in the embassy, but it was on the water. I mean, not for swimming, just for enjoying views and walking. It was all a very interesting program. But in the first weeks, tough. I remember going downtown one Saturday to have a coffee in some place called La France, and sitting outside quite alone.

The other clientele and staff everybody had gone inside. I never got waited on because I was a woman alone. It was definitely more restricted than I expected.

Q: Right. Were women covered at all? Did they wear head scarves? Because Tunisia was considered the most progressive of the Arab countries.

GIBB: It was getting that way, but there were people in safaris, a white sheet-like garment, even in the rain. It was impractical, these poor women trying to manage everything. There was such a dichotomy between the one group and the others. But I had a very good counterpart. It was an interesting time

Q: Were you the head of the health office?

GIBB: Yes, health and family planning, and I think nutrition and Food for Peace. Warren and Gretchen Berggren, an MD couple, were there as part of a contract team we had in rural central Tunisia. It was a wild contract to administer.

Q: What years were those?

GIBB: 1981 to 1983 or 1984. Bourguiba was out, or may have been there in the very beginning, and Ben Ali came in.

Q: Right.

GIBB: Tunisia—that was one place in contrast to Morocco, my next post—where one had to kind of worry because the police were somewhat hostile toward Americans.

Q: Right. And you could travel around the country?

GIBB: Yes.

Q: With security or on your own?

GIBB: On my own. No problem at all. You just didn't want to have a traffic accident. Yes, I drove. I don't remember using Tunisian drivers or anything.

Q: Wow. So, the program was both health and family planning? I know the family planning program in Tunisia was considered more advanced than almost any other one in the Middle East.

GIBB: It was good, mm-hm, right. My counterpart was French-educated and good, but he was criticized for being very cautious. Slow to adopt things and kind of skeptical about Washington-pushed initiatives. And in some ways, he was right. But I remember pulling my car over one time when I was going to the ministry, thinking, can I take this any longer? What can I do? Because his ministry wanted him to move faster and he just—he just wouldn't do it. I got there that day and he said, "Look," and he had an invitation to join WHO (World Health Organization). I later saw him at WHO, and he visited the States and Morocco. He was knowledgeable but really an academician.

Q: Right. So, how large was your office? Did you have other Americans working for you?

GIBB: Two Americans and two Tunisian professionals.

Q: So, was it a good assignment for you?

GIBB: Yes, it was. Jim Phippard took over the office. Jerry Wein was there. We had an extensive evaluation of our integrated health and population program. It took place at the time we were just getting office and personal computers.

Q: Oh, right. It started with the Wangs or something?

GIBB: Yes, yes, the Wang computers, yeah. Right.

Q: The whole technological evolution of AID is a fascinating side topic.

GIBB: Yeah, the different cycles, the different kinds.

Q: Right. I can't even remember when cables went by the wayside, but it was in the 1980s, I think.

GIBB: Well, it was I think later, because when I got to Morocco you still had to have permission to call Washington. I really do wonder how anybody gets anything done. Of course, the whole remote thing too.

Q: You were in Tunisia until '84. And then?

MOROCCO

GIBB: Then Jerry Bowers called from Morocco. He was leaving, and he recruited me. I flew over and met Bob Chase and the team there and got the job, and then drove myself over. And that was really interesting. I didn't go through Algeria, but I went around, and was driving through Monticello when I heard on the radio that Geraldine Ferraro was being nominated. It was an interesting drive, an interesting change in programs.

Q: I'll bet. Can you say more about that? I mean, start with the drive. That is amazing.

GIBB: It was a much bigger program, and it was interesting politically. Morocco was certainly slower to adopt family planning, but I think the government was much more involved in health than they were in population at that stage.

Q: So, it was also an integrated health/family planning program?

GIBB: Yes. Carl Abdurrahman and Paul Ehmer were there as new staff; and Ursula Nadolny and Eileen Oldwine were leaving in the next year or so. And then Bob Chase left after a couple of years, and Chuck Johnson took over. That was very interesting because Chuck was totally about family planning.

Q: Right.

GIBB: And he first changed the name of the office to put family planning first. But the head of the entire effort in the Ministry was a key figure in the Moroccan government, and had strong feelings about the importance of integrated health and family programs. So, I mean, this battle has been just continuous.

Q: I know, I know. It has been going for a long, long time. Did you change the emphasis in the program either because of the funding that was available or the leadership of the mission?

GIBB: The leadership of the mission. Funding, no, because more funding kept coming through for health things. We were doing some really interesting things, and then Chuck would have real problems with that. I don't remember the specifics. I mean, he had little interest in nutrition. One forgets much of the office back and forth but I do remember that it was not a lot of fun. Carl was great. I mean, he was very enthusiastic about family planning, but he believed in a unified program too. All of us did.

Q: Yeah, right. We had an offline discussion about this struggle between whether you have parallel health and population programs or whether you integrate them because in fact the delivery systems are integrated.

GIBB: I mean, in all these countries we had people in the rural area who delivered health and family planning services to people. In Morocco the name of the service delivery cadre was *Visite a domicile de motivation systematique*, VDMS. They delivered health AND family planning services. You would not want somebody going up and dealing with just one service.

Q: Right, exactly.

GIBB: In terms of time, in terms of money, in terms of supplies it didn't make any sense.

Q: Right. And the fact that the money from Congress came in different envelopes probably actually made it more difficult for implementing integrated programs on the ground.

GIBB: Except in El Salvador at one point, I don't remember having anybody in the government trying to push the family planning program separately.

Q: Right, right. I think this is where the U.S. put its own construct on programs – labeling them health or nutrition or family planning. How long were you in Morocco?

GIBB: Five years.

Q: Wow. So, that was a good two tours. And did you recruit a lot of people during that time? Was there a lot of turnover in U.S. staff?

GIBB: No, I don't think so. No, I think Paul and Carl and I were mostly there the whole time. And we had very good local staff too.

Q: Right. Please talk a little bit about the local staff. You probably had physicians and fairly highly trained staff, no?

GIBB: I don't remember having a physician in any of those three countries. No, uh-uh, because they could get better jobs, they did well outside. I don't think we had them on the staff in either Tunisia or Morocco, and we certainly didn't in El Salvador.

Q: What kind of technical background did the local staff have, or were they mainly administrative officers?

GIBB: Mainly administrative. We had a very good Belgian woman in participant training programming, but no, it was mostly administration.

Q: Out of curiosity, can you say something about the relations with the State Department or with the embassy in the three places that we've talked about? Was it cordial? Was it fragile? Was there any contact?

GIBB: Oh, right. In El Salvador we had very good relations but it was a difficult time, and the Embassy was being very cautious about USAID people having any publicity or public relations. I'm trying to even think where the embassy was, which is very strange.

In Tunisia, it was very good, and that was such a small post in a way that it really worked well. Well also, the ambassador's wife was from Wellesley, my year, and we were very close friends. In fact, he went on to be the ambassador to Saudi Arabia and I visited there, and she came back and visited Morocco too. And in Morocco, too, it was very good. I don't remember any interference. In Tunisia it was probably best. After Ambassador Cutler left, the next person who came in was less involved and there were other interesting things that were going on in Tunisia at that point. Morocco, it was very good. There were no conflicts with the Embassy. It was really good in both Tunisia and Morocco.

Q: Right. And these were career ambassadors, not political? So, presumably they had some experience working with AID—

GIBB: Career initially but it became political and was political in Morocco and became a political appointment in Tunisia. But it wasn't bad. It's just, you know, you had other things to worry about. In fact, both Ambassadors after Ambassador Cutler left were political appointments and then in Morocco, it was quite political with Joseph Verner Reed. I would have to think about who else, but I don't remember trouble.

Q: Okay. The other question was about other donors. Maybe in El Salvador the U.S. was the biggest donor; but probably not in Morocco or Tunisia. Do you remember dealing with other donors?

GIBB: I don't remember a problem. I certainly remember the United Nations people. Yes, Japan, we had interesting times with them. But I'm not remembering a lot of the other donors. We were the biggest game in town in both—in all three places.

Q: Okay, all right. In the health sector anyway.

GIBB: In the health sector, yes.

Q: Right. Okay. WHO and UNICEF were undoubtedly there, but—

GIBB: Well, they were big and very active.

Q: Right. And the relations were pretty good?

GIBB: Yeah. I always enjoyed the work with other donors even more.

Q: Right. So, you were in Morocco for five years and what would you say are the major

accomplishments of the program?

GIBB: Coverage of the country with integrated health and family planning services increased from 35% of the country to 70% during that time. We had started an AIDS effort too.

Q: Okay, all right. It was a time when the programs were big, relations were cordial, and I'm certain that the U.S. made a difference in the area.

GIBB: Yeah. Right. *We definitely had a successful integrated health and family planning program. The Title II program was successful but then it was cut.*

Q: So, when did you leave Morocco?

GIBB: In September of 1989.

Q: Eighty-nine. So, basically, you were there through the Reagan years, and it was when George H.W. Bush was just beginning his term?

GIBB: Right. He visited Tunisia when I was there.

Q: As vice president?

GIBB: As vice president with Mrs. Bush.

Q: Oh, okay. And did you see them?

GIBB: Yes, I was a hostess at one of the houses and yes, that was interesting. But I didn't have any direct contact.

Q: No? Wasn't Mrs. Bush a Smithy?

GIBB: Yeah, for a short time. Wasn't Nancy too?

Q: Oh, I didn't know that. Okay.

GIBB: Yeah, I'd forgotten that too.

Q: So, you had actually had White House visits during those times, and I'm sure congressional visits as well?

GIBB: Yes. always but generally they were not problematic. I'd really have to think back. I mean, everything went well. I do remember doing it. And you sort of, you know, you knew what to do and you did it. Title II was a subject of some visits.

GIBB: I think in Tunisia a major thing was we were reducing the program. We had to

stop supplying major supplements to salaries or something like that, and the ambassador went to the minister to do this. And I was with him, and this is the ambassador I knew. As we began, I realized either my pen was out of ink or something, so I couldn't write. But I actually remembered the whole interview word for word. It was so bizarre. It just shows what you can do if you have to.

GIBB: And then, I think in Morocco we had to do the same thing with a similar program reduction. At one point we had to say (laughs) after we had doubled the Title II program, we suddenly had to say we were ending the Title II program. Chuck Johnson was there at that time.

It was hard especially because the counterparts were very good and close to many of us. I don't remember the ins and outs of it. But I do remember cutting—after increasing the Title II program and suddenly removing it. This occurred with one of our best counterparts who had very good English and was very involved with the Americans. So it made it harder.

Q: Because yes, you do develop collegial relations.

GIBB: Our government is often hard to explain.

GLOBAL BUREAU OFFICE OF HEALTH

Q: Right. So, you left in September '89, and where did you go?

GIBB: I came back to the States. And needed to find a job. I had applied for Senior Foreign Service, and I didn't make it. And that was okay. Janet Ballantyne had been the deputy, by the way, in Morocco.

Q: Okay. So, basically you had been out of Washington for three different country assignments, and it was time for you to come back?

GIBB: Yes.

Q: But they had not identified a position for you?

GIBB: No, no, I had applied for the Senior Foreign Service. But one was either up or out. So, I knew that. And I actually had applied to the World Food Program and was offered a job as number two in Bangladesh, but decided I really wanted to come back, and I was really glad I did.

Q: So, at that point you had to formally retire from the Foreign Service?

GIBB: Yes.

Q: Okay. And talk about how you ended up in the Office of Health

GIBB: I don't remember who recruited me or how it happened. And you don't remember either?

Q: I don't. I don't know whether Anne Tinker had recruited you for her health services division, but in any case, you had retired, so you came back in some sort of a contract position.

GIBB: I think I was initially under the GH TECH contract or something similar.

Q: All right. So, this was, in a sense, this was your first Washington assignment since the Vietnam era, correct? So, Washington was obviously a very different place from the early seventies. Did you have any qualms about continuing with AID in a non-direct-hire status?

GIBB: No, no, I wanted to. I thought it was the most interesting game in town. I looked at a contractor position, but my salary was too high for them. That was probably the Futures Group, and I was very glad I didn't do that.

Q: Today is August 15, and we are returning to our interview with Dale Gibb. This is the third session with Dale. And, in the last sessions we talked about your growing up and your education, and the experience in Vietnam, which was very different from probably most international AID experiences because it was—you didn't say loosey goosey, but it was much more informal, I gather, than other parts of the agency at the time. But then, you went on to a career in El Salvador and Tunisia and Morocco. And before we move forward, I'm just going to ask you if there are other things you want to say about any of that leading up to 1989, when you returned to the U.S. for good.

GIBB: No, but in many ways, I don't think that the Vietnam program was really that different from the rest. It was more structured because there was such a hierarchic centered bureaucracy on top of it. But it was run remarkably like other places, if not better in many ways. In Vietnam there were 300 people in the Mondial Hotel, which was the health office and maybe a couple of others, and we had 3,000 people in the field. With that many people, you had to have a lot of discipline and it was pretty straightforward. The rest of the agency may not have regarded it that way, but it was. And the office, which was interesting, the Mondial Hotel, was so much like the hotel office that we had in Tunisia, an inheritance from the French.

Q: I have to ask. Two of your first assignments were in situations where a civil war was going on. How do you think that affected what you did?

GIBB: Well, I used to laugh that I was born in Dodge City, then lived near Fort Sill, and then I got to Vietnam, and afterwards in Tunisia we also had security problems. Oh, and El Salvador. I think to some degree every place I worked was not as hidebound as maybe

the rest of the agency was. Maybe we really didn't have exactly the same rules, the processes were the same, but the rules were a little bit different. Expediting programs was a priority.

Q: Mm-hm.

GIBB: I think if one had been born in the Latin America bureau you would have a different idea of AID, and I think that the AID story that has been written—I can't remember his name now—really leaves out the Vietnam experience, the security assistance programs, and similar aspects. So, there is a difference.

Q: Right. You're talking about John Norris's book.

GIBB: Yes

Q: So, in 1989 you retired from the Foreign Service, and you moved back to Washington. And as I recall, you looked at a couple of other jobs and then you decided to join AID's health office. You had dealt with people in the health office all your career, was it like going home or was it strange being back in Washington in the health office?

GIBB: It was a little bit strange, especially after Morocco, which was a middle-size mission, but suddenly there were all these people. Yes, as I wrote later, I really think a major aspect of working in AID is trying to figure out creative staffing, so I think that's what I was involved in from the very beginning when I came back.

Q: Right. Well, we'll get to these various creative staffing mechanisms, but I mean, you came back at a very interesting time because the child survival push was really in high gear and Congress was appropriating increasing amounts of funds, and it was also a time that we were discovering the global challenge of HIV-AIDS.

GIBB: Okay. We had already discovered that when I was in Morocco and we were working on that. And I do remember now that in Morocco we suddenly got all that child survival money with a mission director who still was focused on family planning and quite resentful. So, anyway, I got back and yes, it was the child survival program, right, and AIDS

CHILD SURVIVAL FELLOWS AND TAACS

Q: And that's what AID was focused on, although there were many other health activities. And it's what Congress and the appropriators were focused on. So, if we think about creative staffing mechanisms, I think the Office of Health had used RASAs and PASAs (Participating Agency Service Agreements) and IPAs (Intergovernmental Personnel Act) – those were sort of traditional mechanisms for bringing technical staff on from elsewhere. But then there was the child survival fellows program, which was with, I think, the University of Michigan.

GIBB: No, Hopkins. I think it was Hopkins.

Q: So, that was the first new mechanism and it would have been around the time that you joined the office.

GIBB: Right. And Pam Johnson was managing that, I think, at that stage.

Q: Yes, I guess that's right. And did you get involved in recruiting for that or in managing the grant?

GIBB: Managing the grant. With Paul Seaton. And I guess, yeah, Paul was doing it at that stage. Stella Goings came on later.

Q: Can you talk a little bit about the relationship with Hopkins? Was it cordial?

GIBB: Yes, we had a marvelous relationship with Hopkins throughout. And they did an excellent job. It was a really interesting program, but I don't really remember the details at this time.

Q: All right. Well, as I recall, there was probably some time limit on how long a person could be a fellow.

GIBB: But then we added senior fellows to the grant and that had a slightly different time period. But yes, it was a matter of managing the details of that. And it was a growing program.

Q: Right. Any idea how many, at its maximum how many fellows there were?

GIBB: (Laughs) No, I'm sorry.

Q: I'm remembering now that there were also the AAAS fellows (American Association for the Advancement of Science) fellows and the child survival fellows and senior child survival fellows, I think they more or less worked interchangeably. I can't remember, but maybe you remember if there were any distinctions in what they could or couldn't do.

GIBB: I remember we had problems with that, but I'm not remembering what the problems were. Not really. I mean, it is amazing how many of the fellows did go ahead and take on other responsibilities with AID. It was a very successful program. We had very few administrative problems with it, as I remember.

Q: Hmm. And of course, what was appealing, it was a time when the overall program was growing rapidly, so AID needed more technical staff, and their salary and travel were paid with program funds, which was an essential feature.

GIBB: Right. And there were limits on the amount we could pay, so we did have issues in dealing with that. But generally, it got managed pretty well, pretty easily, I think.

Q: Do you remember any congressional interest?—

GIBB: (Laughs) You would remember them more than I would because you would have had to argue with them.

Q: Well, I'm getting to the point that, you know, we'll talk about TAACS (Technical Advisors in AIDS and Child Survival Programs) because I can't exactly remember when congressional reporting appeared that allowed us to use program funds to set up the technical advisors for child survival program, but this allowed us to send staff overseas. I'm not sure the fellows ever were able to go overseas. Do you remember?

GIBB: Oh, yes, missions could have fellows. And they did, absolutely.

Q: And was there a difficult process for negotiating with missions who wanted a fellow or if a fellow didn't work out?

GIBB: Not really. What sticks in my mind are particular people who maybe were problematic at some point, but then continued and did quite well. I'm trying to remember. There's one that I have been in communication with lately who's now worked out very well, but had some issues in two or three missions. And of course, how long people could be a fellow was a problem.

Q: Right. Do you remember what the limitation was?

GIBB: It was two and four years, I think.

Q: Ah. And then, they had to find another job.

GIBB: Yes.

Q: So, then comes the technical advisors in the child survival program, which unlike the fellows program, was actually authorized in a congressional report. How did that change what you had to do?

GIBB: Finding an institution to help us manage it. That was an issue, but then CEDPA I think appeared. That was the first one. Oh, but then we had TAACS through HHS (Health and Human Services) too.

Q: Oh, really? So, HHS managed part of the TAACS program?

GIBB: Yes. Linda Vogel and Terry Gay managed it through a PASA with the Department of International Health.

Q: In the international health program of HHS?

GIBB: We had the TAACS that were through the PASA, and then we had the contracted TAACS. A major point of TAACS, unlike Fellows, is that they had direct-hire authority. They could manage and supervise people, unlike Fellows.

Q: Right. But was it the same type of technical advisors through both CDC and CEDPA programs? Or did the former only involve staff from CDC (Centers for Disease Control and Prevention)?

GIBB: Most were from CDC but I believe we had some from other parts of HHS. They were TAACS, but they were under the PASA. That's how it was.

Q: Can you talk a little bit about how CEDPA was chosen or how the program worked? I know it got very large.

GIBB: Right. I think it was chosen because we couldn't find anybody else, and we had the connections. And Peggy Curlin, the head of CEDPA, was willing to do it, able to do it. We had also looked at the Institute of Medicine that Polly Harrison headed at that time. But John Alden, who was to manage the program, backed out for reasons I have forgotten.

Q: Right. So, was it a competitive award or were you just sort of stuck trying to find an organization that had the capacity to do this?

GIBB: We were stuck doing that, and we did it very jointly.

Q: Right. So, do you remember, was it an issue that CEDPA was chosen?

GIBB: I don't think it was at that stage at all. I don't think anybody gave us any problems about that. And CEDPA was easy to work with. And I think Adrienne Allison was the deputy to Peggy at that stage.

Q: Mm-hm. So, what was it that we asked CEDPA to do?

GIBB: They did the hiring, the setting of the salary and the backstopping of these people when they were in the field.

And let's go back. What we've forgotten is the American Red Cross. The Red Cross was the first group that came on to manage TAACS, and they had the first TAACS contract, I think, other than the PASA ones. That contract was quite difficult to manage. The man who was the head of it had some real resentment about something with AID, and he had issues in negotiating the salaries and backstopping people in support needed for field work especially. Murray Trostle and Mary Ellen Stanton were two of the Red Cross TAACS advisors. It was a small contract, but it took much more management time than later when we got CEDPA, which worked rather

smoothly.

Q: Right. And it may be partly that CEDPA was very familiar with AID procedures and—

GIBB: And the American Red Cross had absolutely no clue at all. And was quite hide-bound without much desire to try to fit USAID's needs. I can't remember what it was that they wanted so much that they didn't get, but anyway, it was a challenge.

Q: Right. So, CEDPA, as I recall, wasn't just recruiting, setting salaries and backstopping, but wasn't there also a training component, sort of an orientation to AID?

GIBB: Yes. And then, they ended up doing the training for much more than TAACS—for the whole Office of Health—and they set up a very good basic AID orientation, which included technical training too. It later became the way, I think, that we oriented anybody joining the health office.

Q: Not just TAACS.

GIBB: Right.

Q: So, at some point you were asked to add HIV expertise to the TAACS program, so it started out as child survival focused and then, because the AID program was growing so quickly and it also needed different technical staff. Do you remember how that happened or whether there were any issues in doing that. Did you need to consult with the Hill?

GIBB: Yes. I wasn't involved in the Hill negotiations. Technical Advisors in Child Survival became AIDS and Child Survival rather early.

Q: Okay. So, you were fielding technical advisors to missions around the world in both those areas. And how did it work? Missions just asked—did they have to put up the money for the salaries?

GIBB: The Missions did. We didn't have money for salaries.

Q: Okay. So, it was like a buy-in contract, I guess. And I'm sure that the advisors were, on the whole, superb, but there had to have been times when it just didn't work out with a mission.

GIBB: I'm sure that there were problems, but I think it worked remarkably well. I don't remember specific issues about people, or we were able to get people out without a lot of hassle when there was a problem. Managing anything like that is different, but it wasn't like managing a contract where you have a scope of work that they're supposed to get something done. It was providing a person, and the missions then were in charge of monitoring the work. We didn't have to do that.

Q: Right. So, you were just managing CEDPA's ability to staff up and manage people. And were there evaluations of CEDPA?

GIBB: Yes. And they did well. I remember we did find the costs were high, given overhead, but it was certainly not like trying to work with the Red Cross, which did a horrible job backstopping its people also.

Q: I think I remember at some point there was pressure to expand the program even further to include education because basic education was becoming a new large program.

GIBB: And we did that, we did that with education advisors. We didn't do that much with them, but we were the mechanism by which they could be recruited.

Q: Right. And again, do you remember whether there was any procedure for getting congressional approval or higher agency approval to expand the program?

GIBB: No, I don't. I remember the problem came when we had to rebid the contract, but I think we did it once successfully and then we were going to do it again on the basis of evaluations, and everything was in the final stages. But at an international meeting in South Africa, someone from CEDPA said something wrong, and Administrator Natsios ended the contract just as it was about ready to be awarded.

Q: Okay, so this was in the 2000s.

GIBB: Yes. I was remembering that the other day, but I can't remember when it was that somebody said something that made CEDPA anathema to him, so it ended.

Q: So, the program had been basically going strong.

GIBB: Yes, but that would have been the third renewal, which was probably a lot for the agency to swallow anyway, so it was easy for him to stop it.

Q: Was there then the pressure to rebid it or find another contractor?

GIBB: Yeah, yes. I have no idea what happened after that. TAACS continued, I believe.

Q: Ah. Did you stay with the Office of Health?

GIBB: Yes. I had other tasks to do, in evaluations and assessments, and was working on other aspects of the program by then.

Q: So, if the TAACS program started roughly in the late 1980s and concluded early in the 2000s, that basically was a program that ran for about ten to twelve years.

GIBB: Yes. I think it really started in the early nineties and ran into the 2000's.

Q: Right. Okay. But were there evaluations of the TAACS program from time to time?

GIBB: Yes. Right. And the TAACS program was still going with CEDPA for a few more years after, I think, Peggy Curlin died in about 2005, something like that. They never really managed it as well after that. They weren't as committed to it or to AID.

Q: Okay. So, under Natsios the main contract to manage the TAACS went elsewhere?

GIBB: Yes, and I'm not going to remember where.

Q: Okay. All right. And you have no idea whether something like that continues?

GIBB: Oh, I don't think it does. No, it changed into an AID-wide contract that staffs missions with people, using program funds.

Q: But basically, the fellows and TAACS programs opened the door to new ways to acquire the technical staff when needed.

GIBB: Yes. I think now it's almost like the senior fellows program. I know Carol Abdelrahman is managing something called the C3 program.

Q: All right. Well so, after the TAACS program, you stayed on at the health office for a while?

GIBB: Right. I was involved in doing things in Uganda, in Nigeria and Tanzania, more involved in university education.

Q: Uh-huh. Health education?

GIBB: No, education in general, creating programs that helped universities address disasters, especially in the health area. And then, I took over representation to UNICEF and to WHO, and so I got much more involved with both of those programs. It was probably one of the most interesting things I got to do. We were backstopping the agency's representation in UNICEF and WHO. And then, I ended up being the representative from AID to both of those executive boards in the early 2000s.

Q: So, there were probably politically appointed representatives but they needed backstopping.

GIBB: That's right. And now they've changed. They took away the WHO backstopping role and gave it to PPC (Bureau for Policy, Planning and Learning). The health office is still backstopping UNICEF, I believe.

Q: Do you remember what kinds of issues came up in these UN forums, if any? I mean, there were no infant formula crises, were there?

GIBB: Oh, yes, nutrition, specifically infant feeding, is probably one of the biggest things that we had to deal with. There was feuding with the other donors across the board. It is interesting that the issues that meant so much when you were engaged in them kind of go by the wayside. But what was our major problem that we had when Bill Steiger was around?

Q: Yeah, well, I don't know, but I think there was probably an issue whether HHS or AID had primacy in speaking on behalf of the US on health development issues, but I don't know that.

GIBB: There was that, but it was more political than that too. And there was a time when Steiger had to approve every consultant who went out and that sort of thing.

Q: Well, you were in the health office when the whole budget function moved to the State Department. I mean, there were some major cataclysms for USAID when that happened in the early 2000s. How did it feel from the office point of view, and especially an office that did a lot of programming and had a lot of visibility?

GIBB: I remember it was a major issue. Again, it wasn't something I was directly involved in, so I didn't have to worry about that that much. And the budget function has come back to AID to some degree, I think.

Q: So, your direct involvement was with WHO and UNICEF mainly. And you got called in to do either program design or evaluation on some education issues, even though you were in the health office?

GIBB: Right. Well, it was a program in Global Health to help countries, through their universities, create an emergency response capacity, a program that Dennis Carroll had developed. I'm not remembering the name of the people in Uganda, but helping them create departments to address public health emergencies. I think we had this kind of university-level training in two or three missions.

Q: Great. Were people brought to the U.S. for training?

GIBB: Not so much. Helping the universities create their own programs. Our people are going out and helping them structure this. And it was focused on public health emergencies—to develop a prediction and response to pandemics. It was what we should have been doing to address epidemics and viruses and that sort of thing.

Q: Right. But so, you worked with Dennis Carroll on some of those zoonotic disease issues? It's becoming increasingly important.

GIBB: Well, right. And then, under the last administration they suddenly ended the effort which had had presidential attention. And then, we start all over.

Q: Right. It's frustrating.

GIBB: Very, very.

RETIREMENT AND FINAL THOUGHTS

Q: So, when did you leave AID?

GIBB: March 16 of 2016. But USAID had moved over to Crystal City by then and not only were the offices separated by floors, but there also were some logistical security constraints. It just seemed less and less interesting. And I had a personal services contract and would have had to redo it at that point. I probably could have continued but thought that was enough, in part because we were separated from development programs. My major interest has always been more in development overall than just in health.

Q: Right.

GIBB: And separated by floors, we had less overall involvement in the whole scope of the office. I was very involved in backstopping the Haiti program, where certainly you can see how much we achieved. It's sort of like Afghanistan, right?

Q: Pretty discouraging.

GIBB: Yes, it is. So, that was kind of depressing, and at one point we ended up having a health officer in Haiti who didn't want to talk to Washington and didn't want any involvement of our backstop committee. We had a very strong backstop committee, so that made it kind of hard. She felt there were enough people involved in Haiti already and that the health office didn't need to be involved.

Q: And they had all of the support they needed?

GIBB: Not really. But it must be awful now to be assigned there—

Q: Totally lawless. It's frightening. So, 2016, it was getting less and less fun, and you decided rather than renegotiate a new contract, it was time to say good-bye. Was that a hard decision for you?

GIBB: No. And I still enjoyed my job and I have enjoyed retirement. It was very convenient for me to work at that stage because Crystal City is very close to Alexandria.

Q: As I do the quick math, you were twenty-five years working in and around the health office in Washington.

GIBB: That's right. And twenty-five years overseas.

Q: Right.

GIBB: So, it was fifty years connected with AID.

Q: Right. A really impressive commitment for you.

GIBB: It was. Yes. So, I'm really pleased about it. I'm a little bit active in the USAID Alumni Association. And very grateful for it. I think that the book review section is just incredible, what they've done. And people, all of you, have worked so hard on it. It's fantastic.

Q: Not I, but the bibliography, I agree with you. It's what people are doing post-USAID that is amazing. And you know, honestly, these oral histories, you may dismiss them, but I know John Norris really relied on them for his book.

GIBB: Uh-huh, that's good. No, his book is okay, but it just leaves out a whole aspect of AID - the security assistance history And it's disappointing in that. But I'm not sure what he could have done.

Q: So, can I ask you to reflect on twenty-five years in the field, twenty-five years in Washington? Any lessons that you think people should draw ?

GIBB: You know, AID seemed such a small part of what's happening now and yet, it really isn't. It doesn't make the headlines and maybe that's good. I think, from what I've heard, I think AID's processes still have a way to go to be straightened out. It gets very complicated. But I'm glad, thank goodness it's going on.

Q: And in a sense, under the leadership right now, it seems to be getting more attention.

GIBB: Right.

Q: And to have Atul Gawande as the head of the health program, that certainly is a change!

GIBB: Right. That's headlines.

Q: That's headlines, yes. But do you think having served in the field for twenty-five years made you more effective when you got to Washington, or do you think you could have done the Washington work without field experience?

GIBB: The fact that I'm not remembering some of the problems is kind of interesting. But no, I don't think I could have done it without having been in the field. Generally, it was interesting. I had interesting directors, not thinking of Vietnam as much, but El Salvador, that was Adelmo Ruiz. We never figured out what his first language was or if he could write in any of them. And when Noriega disappeared, he took off looking for

him, which was very—

Q: A cowboy, huh?

GIBB: Yeah, he really was. And I can't remember the man who took his place, but Jim Phippard and—Bill Gelabart and then Jim Phippard in Tunisia. And then, Bob Chase and Chuck Johnson in Morocco.

Q: Right. Do you have thoughts on what makes for a really effective mission director? No names necessary.

GIBB: Ones that really do put their faith in their office directors and let them run the program without too many biases. I mean, it's great if you have direction, if it is without biases.

Q: Right. And the second guessing?

GIBB: And second guessing. But an appreciation of how the private sector works is very important. And yet, also an appreciation of the government and its focus. Yeah, it's interesting to think about El Salvador and what's happened there and the way, you know, they've had to go through so much.

Q: They have, they have, and it's not out of the woods yet, I don't think.

GIBB: No. I think their family planning program is probably pretty successful. But maybe for other reasons than what AID did.

Q: Right. Just recalling our first conversation, I think one of the points that you made was how counterproductive the bureaucratic rivalry between health and family planning was, especially when they are natural allies in integrated programming. Are there other general observations like that from your incredible career?

GIBB: No, I really enjoyed getting involved and I'm not remembering the details, but in the effort to work with universities in Africa and get them more involved in pandemic control and that sort of thing, building up that part of the universities. That was institutional development at its best.

The other thing is that Chuck Johnson was the one who really focused on field work, and he wanted one to be in the field as much as possible and writing detailed reports about it all. And it was hard to do then, and it's harder and harder for people to do now.

Now it would be a little bit easier maybe because Washington could still be in touch, but you know, I think that was very important, it just wasn't as realistic as it might have been.

Q: Well, this has been an incredible career story. If you have thoughts you want to add, please do. Over the course of your career you have seen a health program that was just

not very big and not very focused to grow to be the largest program in the agency. And honestly, you played a role.

GIBB: Oh, no. I enjoyed it. I really liked it. I remember when I was getting my MPH, my mother was horrified because to her, public health was focusing on venereal diseases.

Q: Oh, right, and sanitation, things like that.

GIBB: And when you think of how important it is now.

Q: It always was important! Well, Dale, thank you.

End of interview