

PSYCHOLOGICAL ASPECTS OF THE PROBLEM OF ANTI-MALARIAL
PRECAUTIONS.¹

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PSYCHIATRISTS are interested in many aspects of malaria. Our most obvious concern is with the gross psychiatric disturbances which may occur in association with the disease. These are various, and none of them is specific to malaria. There are toxic confusional syndromes which occur during the acute stages, schizophrenic psychoses precipitated by malaria which show themselves when the patients return to duty, depressive states with irritability occurring after repeated attacks, and so on.

Psychiatrists are also interested in the highly controversial question of whether certain states of mind predispose men to catch malaria. And finally we are much concerned with certain psychological aspects of the problem of personal anti-malarial precautions.

As soon as the authorities have decided what system of precautions is most efficient, economical and practical, the question arises of how best to ensure that these precautions are taken by all the men all the time. There are four methods of approach at our disposal, viz. :—

DISCIPLINE HABIT EXAMPLE PERSUASION

All four methods are essential ; they are interdependent. Let us briefly examine each in turn :—

Discipline.—Since all of us are human and liable to get slack or careless at times (especially when we are tired, frightened, worried, or “ browned off ”), it is essential to make full use of discipline. By this we mean drawing-up a rigid system of definite instructions, expressing them in clear and simple terms, publishing them verbally and in orders, constant supervision of their observance, and punishment of those who do not observe them.

The soldier is, of course, accustomed to disciplinary methods, and by his training “ conditioned ” to accept them without rancour. It is primarily by such methods that he is given all his military training, offensive and defensive ; and we want personal anti-malarial precautions to be associated in his mind with his general training.

But discipline, in the narrow sense, is not enough. Supervision can never be complete and under forward area conditions is often interfered with considerably. We must, therefore, make full use of habit and example.

Habit.—This factor needs no explanation, but it *does* need emphasis. It is of special importance when men are tired or “ browned off ” ; the more fixed the habit is, the less mental effort is required.

The principles of habituation are well known. We can all understand, for instance, that it is easier to teach men to take mepacrine every day than it is to get them to take it regularly four times a week or six times a week. It is helpful if the mepacrine taking can be done at the same time every day, and done, if possible, in association with some other important daily military duty.

Example.—From the findings of recent investigations, it seems that this factor, too, needs emphasis. It is of primary importance that all officers and N.C.O.s shall themselves take their mepacrine regularly—and be *known* to do so. It is desirable that at least one officer should attend the mepacrine parade in person and publicly take his own mepacrine there.

Irresponsible criticism of mepacrine taking, even in the “ privacy ” of the officers’ Mess, should be dealt with firmly by the Commanding Officer and M.O. Officers should be made to realize that persistence in criticism of this sort is really a kind of “ fifth column ” activity !

Persuasion.—Last—but not least—we must by various forms of persuasion reinforce

¹ Notes of a talk given on February 13, 1944, at the A.F.H.Q. Malaria School.

the effects of discipline, habit and example. The methods employable are various; they include lectures, pamphlets, posters, placards, newspaper articles, etc.

Anti-malarial precautions are various and rather a nuisance. The soldier will be helped to remember them if he is given some idea of their rationale. A few words about the history of the discovery of the causation of malaria, and one or two examples of its military importance in the past, may serve to kindle real interest in the subject.

When discussing mosquitoes and their habits and habitats the lecturer should of course be brief and very simple, avoiding all technical jargon. It is better to give the essentials and "get them across" by repetition rather than to attempt a detailed description and leave in the minds of the listeners only a vague impression.

In lectures, pamphlets and posters it is important that we should not be negative only, telling the soldier what he should *not* do. We must try to be as *positive* as possible, clearly instructing him in what he should do and giving him some idea of the reasons why.

In what we say to him, we must never lie or exaggerate, however good our intentions may be. We must not over-emphasize the danger of death from malaria. "Take Mepacrine or Die" is an over-statement, as the soldier will soon discover, and when he *does* discover, he will lose faith in all our advice. In any case the fear argument is a double-edged weapon.

Similarly, we must never say or imply that the regular taking of mepacrine *always* prevents malaria; here again we shall soon be found out. Nor should we deny the occurrence in the past of minor toxic symptoms due to mepacrine taking. It is more honest (and more effective) to admit them and to explain them as probably due to the insufficiently gradual exhibition of the drug.

A few minutes for questions and discussion at the end of a malaria lecture are often well-invested. They afford an opportunity of dealing frankly and patiently both with reasonable criticisms about toxic symptoms, etc., and with irrational doubts, such as the fear that mepacrine diminishes sexual potency. This last belief, though it may seem patently absurd, is by no means uncommon; it should be met with a calm denial—not with ridicule.

The efficacy of posters and placards in anti-malarial propaganda has probably been over-estimated. In so far as we *do* use them, we must adopt an organized plan of campaign. It is no good covering barrack rooms and the countryside with a bewildering assortment of heterogeneous notices of varying standards and types of humour. We must take a leaf out of the book of the professional organizers of advertising campaigns.

What do they do when they wish to encourage the public to drink more beer or eat more chocolate? They observe two fundamental principles:

(a) *Symbolization*.—For the main thing they want to "put across," they adopt a constant symbol. This, whether it be a glass of beer or a mosquito, should in all posters be drawn in the same way, so as to be easily recognizable. Our mosquitoes, or what you will, must not in different posters be drawn from different angles and to different scales.

(b) *Appeal to the Emotions*.—Having fixed his "symbol" in the mind of the public, the advertising expert does not waste much effort in rational arguments about the exact nutritional value of his product or its cost. He either contents himself with the reiterated statement that it is "Good for You," or, more frequently, he appeals directly to our simple emotions such as our desire to be strong, to attract the opposite sex, to be rich, etc.

In dealing with soldiers, we too must appeal to simple emotions and with equal directness. The emotions on which we may legitimately and effectively play include the soldier's pride in his efficiency as a soldier, his loyalty to his mates and to his unit, his desire to win the war, his wish to win it soon and get home all the quicker, his desire to return home at least as fit as he was when he left it, etc. Ridicule and contempt may be directed against a symbolic "Private Cuthbert Careless" who is slack in his anti-malarial precautions; conversely, the regular mepacrine taker should always be depicted as a smart and healthy soldier.

There are two general points to remember. Every poster should aim at "putting across" one point of view only—it is a mistake for a poster to contain too many words or ideas. And an ounce of implication is worth a pound of statement; to say "Mepacrine is as important as Ammunition" is much less effective than to say "Praise the Lord—and pass the Mepacrine!"