REPATRIATED ALLIED PRISONERS OF WAR AND INTERNEES.

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The following was written in the form of an appendix to a report by Major-General T. O. Thompson, C.B.E., after his Tour of Inspection following the Japanese surrender.

(1) The route followed and camps seen were roughly as follows:

To Rangoon, where there were already some 9,000 R.A.P.W.I. flown in from Bangkok, and the camps and hospitals were very congested. Many of the men in hospital were merely there for convenience. To Bangkok, where we saw four camps and a Civil Internment Camp in the town and two Red Cross hospitals staffed by Siamese personnel, also four camps of P. of W. situated 30 to 40 miles from Bangkok. The first, Nakon Pathon, was practically entirely a hospital camp. Bangkok to Singapore where we saw all camps on Singapore Island including Sime Road, the civil internment camp, Changi Gaol, where the bulk of the Australians and Dutch were, Kranji Camp which was merely a hospital camp for Indian troops and all the other camps which had small camp hospitals. Singapore to Sumatra—first to Pakan Baroe, where there were nine different camps spread over a considerable area of rubber plantation jungle, and which included the women's and children's camp at Bankinang quite the worst we have seen although improvements had been made before we actually saw it—then to Palembang in South Sumatra where there were four camps of mixed personnel of all types—back to Singapore to see hospitals, hospital ships and evacuation arrangements—to Java, Batavia, with five camps and several hospitals, and mid-Java, Samarang and Ambarawa. At the latter there were three women's and children's camps which were so overcrowded as to be almost unbelievable that they could have lived under such conditions for two or three years. Then back to Singapore.

(2) The Spirit of R.A.P.W.I.—One outstanding feature has been extra high morale of all R.A.P.W.I. although it was less evident amongst internees than amongst prisoners of war. Out of the many thousands of R.A.P.W.I. that I saw, there were not more than about twenty who conformed to the typical textbook picture of “P.W.itis.”

This I attribute to three features: (1) to the possession of radio-receiving sets in practically every camp, so that the majority in any camp knew what was happening; (2) to the amazing work done by medical personnel in every camp; and (3) to the amazing speed of recovery of all R.A.P.W.I. as soon as food was made available. In some cases food had been available for three or four weeks before the final capitulation, notably in the Bangkok area, and the resulting condition of R.A.P.W.I. was better than those elsewhere who received no extra food until several days after the capitulation. The outstanding feature was the high morale and amazing spirit of R.A.P.W.I.

Here is a story which will illustrate the point:

At Cycle Camp, Batavia, the Japanese authorities insisted at one time on all Ps. of W. parading and bowing to the sun at the commencement of the parade. So the whole parade solemnly bowed to the sun as instructed and boomed out in loud tones “Good morning Mr. Churchill, Good morning Mr. Roosevelt, Good morning Comrade Stalin!” The Japanese could not understand the joke!

(3) At all camps it was quite obvious that the Japanese were guilty of the most beastial cruelty. Many of the individual acts passed all comprehension in sheer beastliness. Savage treatment was meted out without rhyme or reason to all and sundry at times and punishments were savage and severe, completely beyond the ends of any real or fancied crime. Deliberate murder was certainly done and deliberate murder by starvation is clearly indicated by the ration scale promulgated on May 26, 1945, which gave a total day's ration of 150
grams of rice, plus a few meagre extras which were usually never supplied for sick men. The caloric value of such a ration is somewhere around 500 and physically impossible to maintain life.

At the main camp at Palembang, in the middle of the camp in front of the Guard Room, was a small barbed wire enclosure about 10 feet by 8 feet, with a simple lean-to roof, no sanitary arrangements, no shelter and the floor bare mud. Into this, as a punishment, specially selected men were thrown and left there for periods varying from two to three days up to three weeks. On one occasion there were sixteen men in this for five continuous days. They had to take it in turns to sit down, as there was no room for all to sit at once. A number of men went temporarily insane under such treatment. Another cruelty practised by the Japanese was that letters, Red Cross supplies and medicines were withheld, although available in a store just outside the camps. A good part of these were poured into the camps immediately the capitulation was announced.

(4) The outstanding feature of all the camps was the amazing work done by "Medical" everywhere. All types shared this, British, Australian, Dutch, Indian, and it was such that it makes one feel proud to belong to a profession which achieved such a result. The results were wonderful; the value of this work on morale throughout the camps was quite obvious. The effect on the individual medical personnel was also a great help because they were carrying out their own work throughout the period. I give below some examples of what "Medical" have produced in the way of improvisation and overcoming lack of supplies, drugs, dressings, instruments, accommodation and even shelter while suffering perpetually from interference and brutal treatment by Japanese gaolers and medical men.

(5) Losses have been heavy and I doubt if we ever will know exactly the numbers which have been lost by disease or deliberate murder or battle casualties. At one camp on the Burma-Siam Railway the losses from disease alone were stated by one medical officer to be 82 per cent over a period of about four months. Details from Ambon and Sumatra indicate that the losses from disease, usually malaria and dysentery combined, were very heavy indeed. The losses of Sisters, Q.A. and Australian, were in the first place due to deliberate murder on the beach where they were found, and later to cruelty and starvation.

(6) In all camps, owing to the policy adopted by the Japanese, there was a complete, or practically complete, withholding of all normal medical supplies, equipment and facilities. In some cases they did give a certain amount of anaesthetic materials and preventive inoculations for cholera, typhoid and dysentery. There was constant interference with the work of our M.O.s, both by Japanese Guards and Japanese medical personnel. A quota of work would be set, stating that a certain number of prisoners would be available on any given day, and if this quota was not reached the Guards, backed by their medical men, would rout out the sick and unfit without regard to protest by our own M.O.s. If the M.O.s protested too much they were beaten sometimes so badly that fractures resulted, and in several cases senior M.O.s were cast into solitary confinement for three to six weeks.

(7) There were compensations, namely, that Ps. of W. became expert thieves and stole food at the slightest chance. There was always the pleasure of baiting Japanese provided it was not carried so far that brutal reprisal was meted out as a punishment. The Japanese could never understand how or why our fellows were able to sing and whistle and talk and laugh, even under the most adverse conditions and right through brutal punishment. The "Medical" were, of course, in themselves a great compensation to our own people, and hundreds of examples could be given from individual medical officers. One outstanding case was that of Dr. Lyon in the women's and children's camps in Sumatra. She, with the most primitive tools, performed major operations with complete success. The Q.A.s, the Australian Sisters and the I.M.N.S. at Padang were outstanding examples of medical work, magnificently done bringing comfort to the prisoners.

(8) The maintenance of radio sets was an outstanding feature of all camps and in many camps a very short and very secret news sheet was circulated by this means. There were
numerous narrow escapes of discovery and actual discovery of any radio set meant a pro-
longed and savage death as a punishment. Places of hiding were as follows:—

Hidden behind a bathroom sink, the taps and the whole of which was made to
swing out when access to the set was required. A broomhead which was actually in use
for sweeping the barrack floor contained a radio set. A concertina which was in constant
use and was actually carried on several occasions by Japanese Guards contained a radio set.
Numerous water bottles, some made so that water could actually be poured in or out, con-
tained radio sets and were just left lying about for all and sundry to see. A biscuit tin,
apparently stuffed with old clothes, had a radio set in it and on one occasion an irate Japanese
officer who had rushed in to carry out a search, picked it up and slung it across the room.
Fortunately an ex-rugger player who was standing there caught it neatly and prevented it
from crashing against the wall. A man with a limp using a large bamboo stick had a radio
in the stick. A man with an amputation and an artificial leg had a radio in the leg. Finally,
there is the story of how a radio set was transported from one camp to another.

The camp was being broken up and portions distributed to new camps, so the difficulty
was to transport this radio set. It was solved by sewing the set up in the kit of the Camp
Commandant, who was a complete fiend, and taking it to the camp by this means. When
the capitulation took place this Commandant told the prisoners they were free, so the two
who were running the radio set paraded before him and asked for a new battery. "What do
you want a new battery for?" he asked. "Oh, ours is nearly run dry," replied the two;
"And here is the set we have been working." The Camp Commandant was not pleased!

(9) Medical and Surgical Improvisations.—These were ingenious and varied in the extreme
and were also very efficient for the purpose for which they were devised. They varied, of
course, in the several camps with the resources available and the personnel concerned, but
it has been interesting to note how ideas and production often followed exactly similar lines
in widely separated camps from Java, Sumatra, Singapore, Siam and F.I.C., camps at
which there had been no direct contact with any other and certainly no contact by letter.

(i) Transfusion service—a complete set-up with hundreds of donors carried to such an
extent that it became a question in each case whether donors could stand the loss of blood.
Much of this was done with sets improvised from stethoscope tubing and hashed-up old needles,
etc. This was done in many of the camps, but the most outstanding achievement was a
transfusion service with implements made from bamboo—a bamboo connecting the needle
to a bamboo delivery tube, a receptacle and funnel made from the two halves of a serum
flask, bamboo whisk for defibrinating the blood, bamboo connecting tubing and needle to
the recipient. Hundreds of transfusions were done.

(ii) Needles made from bicycle spokes, sharpened, curved and tempered.

(iii) Suction pumps made from two sections of bamboo with metal handle and bucket
made from Sam Browne belt.

(iv) Artificial limbs beautifully made, with full range of movement, from old bits of
timber, odd scraps of metal and leather from belts, etc. These were seen in several widely
separated camps—a radio set was hidden in one.

(v) A microscope magnifying to 250 diameters made from bamboo with sliding action
like a telescope—another up to 400 diameters made from two Dutch aluminium mess tins,
with screws and ratchets from odd bits of brass, with a condenser and with the most beautiful
diaphragm made of old razor blades.

(vi) A dentist's drill, which did much good work, made from a cheap Japanese grindstone
with its small handle, a length of Bowden cable from an old motor bicycle attached to the
spindle, a slide valve made from a car tappet and guide and then the right-angled hand-
piece and drill. This contraption was fastened to the arm of the dental chair (home made)
and, while an attendant madly turned the handle, the dental surgeon did his drilling. Many
hundreds of stoppings were done.

(vii) A soap factory using dregs of oil cake from squeezed copra (coconut). The difficulty
was the alkali as there were no apparent stocks, so large quantities of urine were collected
in the camp and caustic alkali manufactured from this. The soap was of an excellent quality.

(viii) In one camp an X-ray plant was available, but only for fluoroscopy. Only two kilos of barium salt were available, so barium meals were used for many months by collecting the evacuated barium meal stool and recovering the barium for re-use time after time.

(ix) Dental powders and creams were made.

(x) Spectacle glasses were ground on a specially devised turntable to exact prescriptions, even cylinders for astigmatics, but this grinding was all limited to plano-convex type. This same factory made one good telescope.

(xi) Spectacle frames were made at several camps, accurately beaten out of aluminium in one camp. At Sime Road, Singapore, was a most ingenious workshop. Here they were made from old toothbrush handles—the results with chosen colours were not only absolutely accurate in fit but beautiful and practically indistinguishable from the factory-made article.

The toothbrush handle had the existing hole cut away. Then the straight piece was placed in a specially devised and home-made self-centring chuck and vice which could be operated inside a specially made steam chamber with a window to watch operations.

A sliding knife, centred by the chuck, then grooved and finally split the handle, leaving a predetermined portion uncut at one end. Softened by steam the two halves were then pulled apart, the connecting portion taking a natural curve which eventually formed the bridge; a pair to this was then formed with the bridge curve in the reverse way. The two parts, upper and lower, were then moulded into the shape to take the lenses by insertion of the wooden bongies of expanding size. The exact inter-pupillary distance was measured off on a vernier scale on the chuck, the whole being done under steam to soften the parts. Finally the two halves were fastened together with the lenses into position.

The maker of this was a botanist.

(xii) In several camps spirit and 98 per cent alcohol were obtained by distillation from rice or other sources. Special cocktails were also devised. Emetine was extracted from some old stocks of ipecac.; vitamin products manufactured as green sludge, etc., from grass, tapioca leaves, etc.

One chemist has secured a disinfectant or bacteriostat which may rival the best-known ones, possibly even penicillin.

(xiii) A whole series of colostomy operations was done as a treatment, and proved to be a cure, of chronic amebic dysentery which was steadily killing the individuals. Then a receptacle was devised for each from a Dutch aluminium water bottle with the neck sealed off and a lateral opening made to fit over the colostomy wound. The receptacle was then fastened into position permanently by a special set of braces and belt made from old chin straps from steel helmets; the rubber straps gave excellent security. Men returned to full heavy work and the dysentery cleared up.

(xiv) Rehabilitation implements, sewing machines, treadles, crutches, ladders, extension apparatus were all made and used.

(10) Many other things were made wherever possible. Band instruments were a special feature and complete orchestras with music remembered or even specially orchestrated were made in several camps and used for periodic concerts—when the Japanese were not too B-minded. Fishing tackle was made and used with success; some extremely curious forms of hook, line and reel were used. Flags: A noticeable feature were the flags which were produced. Quite a number of men had Union Jacks hidden away somewhere or a flag of some sort.

(11) The chief diseases and symptoms are fully described in several excellent reports. The most obvious conditions were: Starvation—of which I have already mentioned the cause, namely, a ration scale which cannot support life. Tropical ulcers—few men, and women for that matter, have escaped without marks. Beriberi—with the swollen lower limbs and the central scotoma and general inability to read.
(12) This view of thousands of prisoners and internees, which I have had the luck to have seen, brings out one or two points worth mentioning.

(a) That the races of the Commonwealth of Nations in spite of adversity still have the "guts" and fortitude which spread them over the world. There must have been thousands of acts of pure heroism which will never be known. Many Indian troops showed the same characters, often through bitter brutality and tortures.

(b) That at every camp two, three or perhaps a dozen automatically came to the top irrespective of rank or seniority, took charge, initiated service or improvements and in fact became the leaders.

(c) All Japanese were not cruel, particularly those with real western contacts and education. Quite a number are recorded as having helped to the limits of their resources.

(d) Discipline had a most marked effect on morale and on well being, in spite of starvation, and on ability to pull through. The lack of this was noticeable in the Civil Internees camps.

(e) To disciplined men the daily shave and wash were great assets; to the women the possession of a treasured lipstick and cake of soap.

(13) The rate of recovery was remarkable. As soon as food became available an average of 12 to 14 lb. in the first week was the gain in weight. There was little evidence that those who had been on a prolonged rice diet could not readily change over to normal diet. One Dutchman we saw had put on 35 lb. in twenty days. The average loss of weight I think must have been about 2 or 3 stones.

(14) Finally, I would like to emphasize that Mastiff and R.A.P.W.I. Control, the organizations which have been dealing with this whole scheme, have done a grand job. It was a rush job owing to the sudden Japanese capitulation and it was spread over vast distances—Ceylon to Singapore is a 5 or 6 days' sea journey; Sumatra itself is 1,400 miles long.

An organization which could at a couple of weeks' notice arrange to contact, collect, clothe, house and transport on the way home 100,000 Allied Prisoners of War and Internees within one month, and was able to continue to do so at 1,000 to 2,000 per day for the remaining 100,000 over these distances, has little to fear from criticism. "Medical" and Red Cross have had a full share in this and can be proud of it.

[The Commandant of the Royal Army Medical College would be glad to receive specimens of Improvisations for inclusion in the College Museum.—Ed.]