THE KIELDER EXPERIMENT.

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IT is now three and a half years since the Navy opened Kielder Camp, and it has been suggested that some account might be given of its activities and of the results obtained there so far.

Kielder Camp is a special unit where " men who possess such a low morale, or such a degree of temperamental instability as to make them unemployable as combatants " are received and, wherever possible, treated. It came into existence to meet the needs of a particular group of men. There were the psychiatric cases —they went to hospital—and the delinquents—they went to detention ; but those who were both culpable and abnormal to some extent were not provided for until Kielder came into operation. These men were not wanted in ships or on foreign service, and neither were they fit subjects for invaliding on mental grounds. If such men were to " get away with it," the morale of others might well become impaired and the last state would be worse than the first.

In 1941 the Admiralty considered the establishment of such a unit, where hard manual work might be substituted for the hazards and hardships of active service afloat. Certain sites, including the Orkneys, were considered and rejected, and eventually a derelict camp was discovered in the heart of the Cheviot Hills ; it had once been a Ministry of Labour training centre for unemployed men, but had been abandoned and gradually fallen into decay. It was renovated and extended, and by January, 1942, was fit for use ; the first " patients " began to arrive in the following month.

SOME PRINCIPLES.

Some general rules regarding treatment and employment of the ratings sent to Kielder were laid down at the outset, but on the whole the officers responsible for running it were left a remarkably free hand to experiment—within the normal framework of Naval organization and discipline. The camp is not, nor ever has been, a sort of hospital ; neither is it a penal establishment. It does bear certain superficial resemblances to the Naval rehabilitation centre for psychiatric cases at Cholmondeley Castle, but Kielder is under executive, not medical, control ; and with Executive command goes the power of punishment. Punishment was considered to be essential as a last resort in dealing with certain cases at Kielder, and the undesirability of medical officers awarding punishments does not need to be stressed ; it is bad enough when one has to report on a malingerer, but one punishment from a medical officer and away would go the whole system of doctor-patient relationships.

However, Kielder Camp is a sort of combined operation between executive and medical authorities, though the responsibility for control and administration lies with the former. Perhaps the dual nature of this experiment can best be illustrated by the method of selection of personnel for the camp. The psychiatrist at one of the four big depots in this country submits certain men for the approval of his Commodore as likely material for Kielder, and those selected are put in a special drafting category known as C(Q) and sent direct to the camp. Possible cases in ships and hospitals are required to go to depot first, in order that the same routine may apply, thus ensuring some uniformity of standard for C(Q) ratings. It will be explained how the types coming to Kielder have altered with the passage of time, and how methods have been altered to cope with them. It has already

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been mentioned that Kielder is not a penal establishment. Certain restrictions are placed on newcomers, especially in the way of leave, supervision tends to be close, and the roll is called more frequently than elsewhere in the Navy; otherwise the camp does not vary in general atmosphere from the average shore establishment in this country. Granted, there is a row of cells in the camp; but so there is in the local police-station, and, like ours, they are usually empty. It is the supervision which prevents the commission of offences—a heartening factor when the previous records of most C(Q)s are remembered. In actual practice it has proved wise to close the eye of authority to certain psychopathic phenomena, which would have received condign punishment in an environment where the psychopathic personality is not appreciated.

The Material.

An astonishing variety of cases has arrived at Kielder during the last three years, presenting problems of every kind, and ranging from the "old lag" of classical type to the immature, frightened youth who has been unable to find his feet in the Navy. Many were men whom nobody wanted—idle, untruthful, insubordinate, vicious; others had once been genuine psychiatric casualties, but had gradually come to trade on their symptoms and, by failure to co-operate or misbehaviour in hospital, had become suitable cases for Kielder Camp. A few were suspected malingerers who had avoided punishment through lack of satisfactory evidence, or cunning, or both.

During this period a gradual change was observed in the material arriving at the camp. In the early days there was a marked preponderance of criminal and aggressive types, but these gradually gave way to the constitutional inferior and the hysteric. Such a change inevitably required an overhaul of the methods in use at the camp, and much of the original system had to be abandoned as time went on. It also had an effect on the results obtained by follow-up of ratings after leaving Kielder, for an aggressive man is of more value to a fighting Service than one who is timid or inadequate; the prognosis for further useful service is comparatively poor in the case of the latter.

The main types to be considered may be classified as follows:

(1) Cases of low morale, due to—
  (*a*) Stress of action, etc.
  (*b*) Constitutional timidity.
  (*c*) No ascertainable cause.

(2) Temperamental instability, due to—
  (*d*) Psychoneurosis.
  (*e*) Incipient psychoses.
  (*f*) Psychopathic personality.

(3) Malingerers.

(1) Straightforward cases of low morale were not seen so frequently as the terms of reference of the camp might suggest, though low morale was usually a contributory factor in the majority of cases seen.

(*a*) A very few men arrived who were genuine cases of "loss of nerve" following enemy action or hardship at sea; none of these cases were wholly genuine, in so far as one or more psychiatrists had suspected the presence of a determination to make capital out of the past in each of them. But it seemed inequitable that such men should be placed on exactly the same level as minor criminals and malingerers, and eventually instructions were issued to prevent further members of this group from arriving at Kielder.

(*b*) A very large number of constitutionally timid men were received. Most of these men refused to confess to fear on first interview, complaining instead of such vague entities as "trouble at home," which appears to be the projection of the rating's fears regarding his own future. Determined questioning on a subsequent occasion will generally elicit the fact that they are afraid of the sea, or of enemy action, or the whole strange new life in which they find themselves. The same previous history of inability to grapple with difficulties is generally forthcoming.

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Treatment in these cases consists very largely of repeated reassurance and of personal interest in the rating concerned. Fresh air, hard work, physical training, games, long hours of sleep and good food—all these tend to build up the general physique and increase confidence, so raising morale. The following case is a good example of this group:

CASE 1.—Seaman, aged 19. The youngest of four children, he had been over-protected by his parents. He disliked games at school and avoided playing them. Later, he had great difficulty in settling down in a job and tried six in rapid succession. He was conscripted at the age of 18 and trained as a telegraphist; but he made such a poor attempt to learn this highly specialized work that he was soon relegated to the seaman branch. Twice whilst under training he had reported sick at his home without adequate reason. He began to complain of headaches, which he said had been troubling him for years, and was referred to a psychiatrist. He was recommended for Category C(Q), and as soon as he arrived at the camp he complained of a headache and of a vague sense of malaise; he also asked if he could go home and see his parents, as he was very worried about them. His physical development was very poor, but there were no signs of disease. He stated that his father was "weak and thin, and had bad nerves"; his sister was "always ill"; his brother had been discharged from the Army with "bad nerves"; and his mother had "a weak heart and bad nerves." Further, all his mother's relations were "nervous," and one of her brothers was under certificate. He gave the impression of a lad who would have deserted long before but had insufficient courage to face the consequences; actually, he had never committed any offences in the Navy.

In due course he settled down in the camp, forgot about his headaches, and made the illuminating remark that he liked the place, "because he felt safe there from going to sea." He tried various methods to obtain his release from the Service, even volunteering for the coal-mines; but he was rejected as mentally unsuited to that type of work. He found a very good father-substitute in the camp, in the shape of a Marine nearly twice his own age, whom he followed about like a child. Eventually he was considered fit for duty elsewhere, as his general condition had greatly improved and he claimed that he felt quite well. He was drafted to a lonely air-station in the Orkneys, far from any suspicion of enemy action. Some months later a report was received stating that he was working satisfactorily, "humping cases of stores, opening and stacking contents, and cleaning store-rooms." The only trouble that he had caused was by his refusal to do fire-watching, on the grounds that he was afraid of the dark!

Another case, in which the environmental basis of his timidity outweighed the hereditary element, gave a much more satisfactory result:

CASE 2.—Marine, aged 19. This lad was said to have suffered from spinal curvature as a child, and had been treated as a semi-invalid by his parents. He had never been allowed to play games at school, and after leaving at the age of 16 he became a clerk in a rural bank. Two years later he joined the Royal Marines, "to show his father what he could do." He soon found that he was out of his depth, homesick, friendless and miserable; the physical exertion required by his training seemed to be beyond his strength. He could not keep even his kit in good order, for he had never brushed his own boots before enlistment. After several minor punishments he became mildly depressed and, secreting a practice round of ammunition, shot himself through the abdomen with his own rifle. He was taken to a civil hospital, and two operations were required to repair the damage done. On discharge from hospital he was referred to a psychiatrist, who recommended him for C(Q). On arrival at the camp he still appeared slightly depressed; his speech was slow, he looked miserable, and his general physique was wretched. He was put on an individual course of P.T., beginning with exercises to strengthen his abdominal muscles, and his endurance was slowly raised. An experienced N.C.O. of his Corps had several chats with him and showed him how to take care of his kit and person. At the end of his first month it was reported that he was "much happier and had no complaints," and he was already able to work hard without undue fatigue and could carry out quite difficult gymnastic exercises. After a second month it was further reported that he was a thoroughly satisfactory soldier and was asking for a draft to foreign service. Having regard to his previous history he was recommended for clerical duties, but passed fit for duty in any part of the world. He was returned to his depot three months after joining the camp, and it was reported by a trustworthy eye-witness that the R.S.M. of his depot refused to believe that he was the same man!

(*c*) A small group remains, of no specific type, the members of which have in common the same determination to refuse to face any form of arduous service. These men, though they have not undergone any stress, claim that they have "done their bit" (not infrequently in detention, if their records are inspected), or "had enough of it." They give no previous history of timidity—in fact, many of them were unduly aggressive in civil life. They seem to prefer fighting the police to engaging the common enemy, as various reports have testified after a Saturday night "ashore" in the nearest town. *À propos* the police, one such rating jeered

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at a policeman, telling him that he ought to be ashamed of himself for not fighting for his country like he was!—to such lengths will the mechanism of projection carry us.

No treatment has been evolved which affects the attitude of these men to any marked extent. Clap them in a cell or detention and they will laugh in your face, telling you that they would rather be sleeping soundly behind the bars than keeping the middle-watch on a corvette in a gale off Iceland. However arduous their life is made, however much the appeal of duty be made to them, they remain the winners as things are at present; it is fortunate that such cases are rare, Kielder forming a sort of sump into which fully developed specimens eventually drain. A few appear to improve a little after a stay at Kielder, but they rapidly deteriorate as the day for drafting draws near. In practice we are left with no alternative but to send these men to restricted service, so freeing more courageous individuals for duty elsewhere.

(2) (*d*) *Temperamental instability—psychoneurosis.*—Such cases make up a large proportion of the admissions to the camp. Some have made a good recovery from their breakdowns, but in most cases a few symptoms persist. It must be stressed that ordinary straightforward cases of neurosis are not sent to Kielder, but only such as have failed to benefit from long attendance as in- or out-patients at the various Naval hospitals and psychiatric clinics; cases moreover in which some factor such as delinquency or conscious exploitation renders some change of environment desirable. Refusal to part with symptoms, most of which are grossly exaggerated, is very common amongst these men. The great majority are "after their tickets," though most would be satisfied with "permanent shore service" as a sort of consolation prize.

All varieties of psychoneurosis have been received, though hysterical reactions are most common and depressions are rare; mixed states are particularly common. Bed-wetters, nocturnal shouters, headaches, strange dyspepsias, hysterical fits, dubious "losses of memory," and many bizarre pains—these have made up the bulk of Kielder's clinical daily bread. One more syndrome is sufficiently common to justify special mention; it leaves the patient perfectly well in cinemas, dance-halls, street-fights, and on the departure platform when going on leave; but it manifests itself in "terrible headaches," dizziness, faintness, "black-outs," and similar disagreeable symptoms whenever there is a hard job of work to be done, when the patient falls in for drill or P.T., or stands on the departure platform at his home town. We have had a lot of success in treating this disorder at Kielder, though our methods are largely empirical. Perhaps the most distressing discovery that a C(Q) can make is that every other man in his hut has identical headaches, dizziness, or what not, and that not only the medical officers, but even executive officers and petty officers, are neither impressed nor interested in these long recitals of ills.

It must not be supposed that the sort of men who reach Kielder are those who have broken down after fierce engagements with the enemy, not even through long months of strain and boredom on patrol or in the Tropics. For example, a recent admission was that of a rating who broke down after a month in his first ship—an old hulk which would never be required for service at sea, and which lay in dry-dock during the whole time that he was in her; the ship was several thousand miles from the nearest hostilities, yet his reaction to finding himself in such surroundings was an hysterical stupor. Others have not even got as far as that, but have produced symptoms within a few days or weeks of being conscripted. Even in these circumstances every opportunity is given for recovery, and it is only when all else has failed, or when symptoms are pleaded to account for some delinquency, that Kielder Camp is considered as a solution.

It would be impossible to give fair examples from this huge mass of material, but the two given below are average samples of our successes and failures:

CASE 3.—Seaman, aged 22. An illegitimate child, he was brought up by his grandparents. He was always somewhat anxious and inadequate, but did reasonably well at school, and then worked as a bricklayer. He volunteered for the Navy at the age of 19, and served for over 18 months on ships engaged in Atlantic convoys. He never saw any action and never underwent any personal stress, but he claimed to suffer from "nerves" and was sent ashore as "gun-shy." He was put on harbour service on psychiatric recommendation, and employed on small craft operating in the Firth of Forth. After a few weeks he reported "vomiting blood" on several

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occasions, but the actual amounts were negligible; he still complained of nervousness, so was referred to another psychiatrist and eventually put in Category C(Q). On arrival at Kielder he appeared to have a mild anxiety-state, associated with a very low morale, and still complained of "dizzy spells" and headaches. Hard work in the open-air and a regular routine devoid of excitement soon began to tell, and six weeks after admission he had lost all his symptoms except for an occasional headache after reading or writing. He stated that he would be glad to get back to sea again. Four months after admission he was drafted to a trawler base, and after a further period of four months a follow-up letter was returned from his medical officer, containing the following remarks: "His commanding officer was surprised, when I visited the ship, at any suggestion that he was of any medical interest. His work has been quite satisfactory, likewise his attitude towards authority. He is trustworthy, has not broken his leave, nor committed any offences. He has never been in the sick-bay. . . . Although his officers have always found him an efficient, clean and tidy rating, they have heard that some of his messmates consider him a little queer, though for what reason is not known. They consider him quite suitable for his present duties, and expressed the wish that all seamen were up to his standard."

On the whole, good progress has been made by most cases in which tension was prominent, the prognosis in hysterical reactions being correspondingly bad.

CASE 4.—Wireman, aged 30. He had always been healthy in civil life, and held a well-paid job as a slater for seven years prior to entry. His family history was unsatisfactory, however, his father and brother being epileptics and his mother's sister having committed suicide while under certificate. He was sent abroad, where he spent most of his time on shore; he never underwent any stress. After 18 months he began to feel anxious and started losing weight, collapsing in a dramatic fashion on five occasions. He was sent to South Africa and thence invalided home. Soon after arrival in this country he had trouble with his wife and failed to return at the end of his leave; he claimed to have lost all interest in the Navy and went to see a civil practitioner, who unwisely expressed the opinion that he ought to be discharged. Eventually he was picked up by the police and returned to his depot, where he was admitted to hospital for investigation. He made some progress, but his attitude was unsatisfactory, and he was sent on to Kielder. On arrival he appeared to have a mild anxiety-state, with both hysterical and depressive features. He was greatly helped by the quiet surroundings of the camp and by occupational therapy, but he remained spiritless and miserable. He did not seem anxious to improve—his attitude was essentially passive. Four months after admission he made no complaints, except for vague pains in the back after exertion; he also professed great fear of gunfire and air-raids. He remained unco-operative, however, and was considered unreliable for anything more than shore service in this country. He was transferred to another establishment for recategorization, but his unsuitability became apparent and he was invalided out of the Service as an hysteric in the following month.

(*e*) *Incipient psychosis.*—A number of psychotic reactions have been observed amongst the ratings sent to Kielder, and their interest lies in the fact that the psychiatric supervision available at the camp permitted diagnosis at a very early stage. They were made up as follows:

Schizophrenia	8
Manic-depressive psychosis:	
(*a*) Mania	1
(*b*) Depression	2
	11

The characteristics of the cases of schizophrenia are set out very briefly in the following table:

	Age.	Rating.	Diagnosis on admission.	Why diagnosis was revised.
1	23	Stoker	Malingering	Schizophrenic drawings in his possession.
2	33	A.B.	Psychopath	Auditory hallucinations.
3	22	A.B.	Hysterical psychopath	Delusions of persecution.
4	23	A.B.	Temperamental instability	Violent and inconsequent conduct.
5	18	Marine	Malingering	Hallucinations.
6	22	Seaman	Hysteria	Auditory hallucinations.
7	23	Stoker	Schizoid personality	Passivity feelings.
8	22	A.B.	Low morale	Ideas of reference.

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It might be of interest to record the reasons why these men were placed under observation in the sick-bay during their stay in the camp:

(1) Filthy habits and undue familiarity with superior officers.
(2) Phases of violent conduct and complaints that he was "being picked on."
(3) Wrote a familiar letter couched in insulting terms to an illustrious personage.
(4) Disobedience to orders and insulting a superior officer.
(5) Disobedience to orders and giving his pay away to other men in camp.
(6) Adopting catatonic "attitudes" when under treatment for catarrhal jaundice.
(7) Repeated complaints that he was being tempted by the Devil.
(8) Dreaminess and inconsequent conduct at routine interviews.

All of the above cases were removed to hospital for treatment as soon as the diagnosis was complete.

(*f*) *Psychopathic personality.*—Whole books might be written about our experiences with psychopaths at Kielder, of their extraordinary histories and strange behaviour, but it is not proposed to go into this type in detail here. Two main varieties of psychopath were seen, corresponding to the aggressive and inadequate types of the text-books. The inadequate psychopath, as seen at Kielder, was usually a lad from a superior home, with a good educational background and pleasant manners. These individuals had begun to go wrong as soon as the pressure of school discipline was removed, and had gradually degenerated by easy stages into loafers, rascals, perhaps even tramps. Several had tried many different occupations prior to joining the Navy, but had repeatedly failed to make good through loss of interest after the first few weeks at each. A few were anything but pleasant people, and made themselves conspicuous in the camp through untruthfulness and general irritability. One or two had been chosen as candidates for commissions, but their utter unreliability had quickly come to the fore in the arduous training required, and they had fallen back on delinquency to compensate for their sense of failure. Such individuals were often found poring over abstruse books, generally on philosophy or modern art; it was hard to tell whether the choice of literature was dictated by a desire for superiority or a retreat from hard reality into a more rarified atmosphere. A schizoid trend of personality was not uncommon, and a great deal of time was wasted on phantasies of grandeur which might have been put to much better use in the life of the camp. An example of this type is given below:

Case 5.—Sick-berth attendant, aged 22. This rating came from a good home, and reached the fifth form at a public school. His family history was normal enough, with the sole exception of his brother, whom he described as "rather like himself," and who had been expelled from a number of schools after a short stay at each. The patient had had six jobs in quick succession after leaving school, including that of junior press reporter, clerical work with four different firms, and on a fruit-stall in a market; in between these jobs he wandered about the country doing casual work on farms. As he put it, he always "felt the urge to go after three months."

Conscripted in 1942, he first trained as a telegraphist, but did not like the work and claimed that it gave him bad headaches. On failing to pass the test at the end of the course he was transferred to the seaman branch and drafted to a gunnery course; he refused to go, as he claimed to have conscientious scruples about killing others, and was returned to his depot. He now requested his release from the Navy on the same grounds, but he was considered to be set on avoiding service and was given a draft to a ship; before she sailed he was given a short leave, when he promptly deserted. He wandered about the country for some weeks looking for work, and eventually became an attendant at a fun-fair in a seaside resort. He was arrested by the police after he had been absent for over four months. Back in his depot he told a psychiatrist about his various feelings, and was told "that he had an abnormal mind—but they had been saying that for a long time at home." He was sentenced to 42 days' detention and greatly enjoyed the solitude of his cell. On his release he again raised the question of conscience and was transferred to the sick berth branch. He had had a slight stammer ever since the age of 8, and while undergoing his hospital training he began to agitate for treatment to relieve it. He was sent back to see the psychiatrist, who recommended him for Kielder Camp.

On admission he appeared to be a very intelligent and agreeable young man, who admitted to over-indulgence in phantasy, which was so real as to constitute (his own words) "a second existence"; these phantasies were generally concerned with fame and success. He worked very well in the camp and was employed in the sick-bay for some weeks; he also did well at P.T. and volunteered for some particularly arduous route-marches. He was also encouraged to study, and went up for, and passed, his examination in nursing subjects. In a series of interviews some attempt was made to reconstruct his personality as far as possible; he certainly

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seemed to benefit, becoming cleaner in person, more sociable, and more amenable to discipline; he seemed to be very keen on his work. As he evidently chafed at routine work, he was recommended for duty in an area of active operations, ashore or afloat. But after he left the camp he was kept in hospital for some weeks, awaiting a draft; he was unable to settle to the humdrum existence and eventually deserted once more. It is significant that he never deserted from Kielder, although he had many opportunities to do so.

Another example of the inadequate type of psychopath gives some vague indication of the extraordinary aptitude which some individuals have of causing the maximum amount of irritation and annoyance to their fellow men:

CASE 6.—Stoker, aged 20. His father, who eventually died young after prolonged overindulgence in alcohol, was said to have a vile temper; he kept a junk-shop in winter-time, but spent the summer months peddling and dealing in second-hand articles, taking his family with him in an old car. His mother died within a short time of her husband. The patient never learned much at school, being "on the road" with his father a great deal of the time; he did not like games, and avoided fights with other boys; he was afraid of the dark and of mice. After trying a number of different jobs he finally became a lorry-driver; but his working days were interrupted by two convictions, once for stealing lead from bomb-damaged premises and once for stealing bicycles. On the second occasion he was given three years' Borstal treatment, the charges including a savage assault on the policeman who arrested him; he had to be handcuffed. He was released on licence after serving less than a year and was immediately conscripted into the Navy; he served in various small craft, but never saw any action. At the time of the Normandy landings he was serving in a cable-ship; about two years after he joined the Navy the ship put into harbour and he was given short leave. He went to a neighbouring town to see an aunt, and on the way back to his ship told a soldier who was in the same compartment that he felt ill; he was put out at the next station and an ambulance obtained from the nearest Naval establishment. He was seen by a medical officer the same night, but nothing was discovered to account for his condition; he was discharged to his depot the next day. Meanwhile his ship had sailed and he was left in barracks without any kit. He wandered about the barracks, doing no work, and perpetually pestered his Divisional Officer with silly requests and complaints; he was sent to see the psychiatrist, who sent him into hospital for observation. He remained in hospital for a month, complaining of headaches and difficulty in remembering things; he was dirty and unco-operative, and failed to help in keeping the ward clean. Eventually it was decided that he was a "non-trier" and he was drafted to Kielder Camp.

On arrival he appeared to be playing the part of a man who wished to be mistaken for a lunatic, pretending that he could not remember when he joined the Navy, claiming to be a gipsy, and generally "acting wet." He had a khaki blouse instead of a jumper and he did not wear a cap. He put in a request to be allowed to live in a tent, as he was not used to a hut! He vomited ostentatiously every time he fell-in for Divisions, but was later caught at a tap a few moments beforehand, drinking enormous quantities of water to make himself sick. On another occasion he vomited water coloured with a little chocolate, claiming that he was vomiting blood. At first he was very unwilling to give any information about himself, but later admitted his criminal activities, and said that he was looking forward to a life of crime as soon as he got his discharge. The whole time that he was in the camp he repeatedly reported sick, but was never able to substantiate any of his complaints; he was kept at duty. He also haunted the Divisional Office, complaining about his treatment (medical and otherwise), requesting X-rays of his abdomen, demanding leave, asking to have the use of a volume of King's Regulations, and so on. On one occasion he arrived late for the rum issue, and when his request for a special "tot" was refused, burst into the C.O.'s office demanding justice. On another occasion he made an impassioned speech to a visiting Admiral, asking for his "rights" and threatening desertion, murder and suicide, one after the other. Sometimes he appeared dirty and insubordinate, at others he was very smart and punctilious; but at all times he was idle and argumentative.

Nothing could be discovered on mental examination to account for his eccentric behaviour, and his intelligence was average. He claimed to be unable to read and write, but wrote quite sensibly to his sisters. He was recommended for discharge from the Service as an undesirable character; it is possible that time will show that he was in fact a case of simple schizophrenic deterioration, but he was not lacking in emotional response during his time at Kielder, and he got a certain sly amusement from worrying his superiors.

The anti-social psychopath was more often aggressive than inadequate in type, and proved a very hard problem for the camp to solve. The majority of these men came from big towns, especially London, Glasgow, and Liverpool; they were often of mixed blood, in which the Clydeside Irish were particularly memorable. A few were very intelligent, but the majority were "dull normal," and appeared to take very little interest in anything except beer, betting, and women. They usually came from bad homes, where drunken parents fought their own children and each other, where one or more relations were either in prison or a mental hospital, and where they had long been accustomed to the sound of police-whistles.

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They nearly always gave the same history of truancy from school, of wandering from job to job a little later, and of repeated desertions since conscription. Punishment made no impression on them; they lived for to-day, and if that turned out to be bad, there was always to-morrow. Such members of this group as came to Kielder were very hard nuts indeed. A good example of this group is as follows:

CASE 7.—Marine, aged 23. Came from a healthy family in a large northern city. He admitted that he was always in trouble at school, usually for fighting with other boys. He became a bricklayer's labourer, but was unable to stick at one place for many days at a time and wandered about to different building sites all over the county. He married at the age of 19, but soon lost interest in his wife; he never went out with her, but came home fighting-drunk nearly every night. For some months he travelled round with a boxing-booth and was knocked out on several occasions. He was conscripted some two years before he came to Kielder, and never served outside the British Isles during the whole period. Before long he began to make a nuisance of himself—three times charged with leaving his work, twice remained absent over leave, and once struck a military policeman. Whenever he had any money he got drunk, and when on leave did not trouble about his wife, but went out with other women. He was described by one of his officers as "not amenable to discipline owing to his own peculiar constitution, which makes him unable to conform to regulations. He acts on impulse, lacks self-control, and is altogether undependable and unreliable." He also had some reputation for bullying the other men in his hut. It was remarkable that he had managed to keep out of the hands of the civil police.

On arrival at Kielder he was cheerful and argumentative, and inclined to be familiar in manner. He talked a great deal of nonsense about being "weak" and physically unfit for the Service. It was clear that he was a most dangerous man, and he was soon reported to exercise a bad effect on his messmates, many of whom were afraid of him. He was always loafing at work, and when cautioned would launch into a lengthy argument, which led nowhere; he was extremely cunning, and whilst "sailing near the wind" for some weeks, was careful to avoid committing himself. One night, however, he induced three other men to break camp with him, with the intention of deserting. The alarm was soon given and they were pursued;- the delinquents suddenly came face to face with a group of instructors in a lonely railway cutting, bowed to superior force, and were brought back to camp without striking a single blow for liberty. In spite of the fact that he had already undergone two sentences in cells and four in detention, the "patient" was sentenced to 90 days in the latter, to serve as a warning to others. He was also recommended for instant drafting to a fighting front, as soon as the sentence had expired, in the hope that his aggressive tendencies might at last serve some useful end.

(3) *Malingerers.*—Most of the men admitted to Kielder showed some tendency to exaggerate and prolong their symptoms, but it was hard to determine the number in which there was a deliberate and clear-cut intention to malinger. Some had been suspected of malingering elsewhere, but had received the benefit of the doubt; others, notably certain hysterical individuals, proved to be malingerers only after prolonged and close observation. For example, one man wetted his bed night after night for many months and had avoided much disagreeable service on account of it; he had not suffered from this symptom before joining the Navy. He had foiled all the earlier attempts to "bowl him out," but early one morning the night-attendant in the sick-bay, pretending to be asleep, noticed the patient wake, take a quick look round the ward, and turn over on his face; he was then heard to pass water into the bed. A moment later the patient made a great show of rousing and immediately reported that he had wetted his bed again.

Another man had several attacks of cyanosis and pyrexia, accompanied by a considerable degree of tachycardia. He had several times gone sick at his home, and received a label of "cardiac failure." His stomach was washed out by tube on the third occasion that he became cyanosed in the camp, and he subsequently reserved his cyanosis until he got home on leave; he then reported sick again, but an escort which arrived for him without previous warning found him perfectly well. On being brought back to the camp, he admitted that he had been eating Anti-Gas Ointment No. 2 to induce the cyanosis. A very similar case was reported by Gough and Ashton (*Brit. Med. Journ.*, 1944, vol. ii, p. 834).

Even more common are the familiar pseudo-hysterical phenomena, such as bogus "suicidal attempts," remarkably convenient "black-outs," impulses, losses of memory, and so forth. These complaints are ignored as far as possible, and no avoidance of responsibility for offences committed under such circumstances can be accepted. It is highly probable that a great deal more malingering goes on in the camp than has hitherto been suspected, as new arrivals frequently complain that all the other men in their hut appear to be malingerers!

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Previous Records.

Before passing to the consideration of methods in use at Kielder, it might be of interest to give some information as to the previous records of some unselected groups of consecutive admissions to the camp.

One hundred men admitted during the latter part of 1944 and early months of 1945 gave a history of Naval service during this war ranging from 5½ years down to 4 months, with an average of 31 months; 7 had been serving in the Navy when war broke out. Their service at sea (or on active service ashore in the case of certain Marines) varied from none at all right up to 57 months; of the 71 who had been at sea or on active service, the average of such operational service was approximately 15·7 months. As regards offences since joining the Navy, another series of one hundred admissions in 1944 gave the following results:

Forty-three had committed serious offences, 19 had been in detention, 6 in cells, and 14 in both cells and detention. The record number of detention sentences for any one man was 10, and of cells and detention, 5 of each. Three men had received minor punishments and one had had his sentence of detention suspended. The total number of sentences of detention between these 43 men was 76, and of cell-punishments 32. The longest sentence of detention was for 7 months.

The offences are set out below:

Absence without leave*	120†
,, ,, and striking a superior officer	4
,, ,, and skulking from place of duty	1
,, ,, and smuggling	1
,, ,, and absence from place of duty	5
Missing ship on sailing	2
Deserting post as a sentry	1
Breaking out of ship	2
Leaving a draft	3
Refusing an order	1
Insubordination	1
Drunkenness	1
Negligent performance of duty	1
Taking a service car without permission	1
Total	144

* Includes desertion. † The longest was for 15 months.

Of yet another hundred admissions during 1944, the following information was obtained regarding civil convictions:

Offence.	Number of men convicted.	Number of convictions.
Robbery with violence	1	1
Assaulting the police	1	1
Simple assault	3	5
Causing malicious damage	1	1
Housebreaking	2	2
Shopbreaking	1	1
Car-stealing	3	6
Simple larceny	5	10
Receiving stolen goods	3	3
	20	30

N.B.—Only serious offences are recorded. 16 men out of the 100 had been convicted, but 4 had committed two different kinds of offence.

These figures may convey some idea of the material which has passed through Kielder Camp since it opened in 1942. But it is as well to emphasize that the figures are probably much lower on paper than they are in actual fact, as they have been compiled from the statements of the men concerned and not from official documents; experience has shown that most men will whittle down or deny their previous civil criminal records after they have joined the Service.

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Treatment.

An attempt has been made to salvage as many as possible of the ratings sent to Kielder, not only for the Service but for Society; the methods used can best be considered as (1) general and (2) special.

(1) *General treatment.*—Kielder Camp has been variously described by its inmates as "a concentration camp," a "rest camp," a "medical detention camp," and a hospital; it will be observed that these descriptions cancel out. Some men look upon it as a haven of refuge, and others pretend that it is worse than a detention establishment. In actual fact there is no mystery about it, as the following description may serve to show.

The camp itself is situated in a valley, hemmed in on three sides by desolate hills, and with the North Tyne itself forming part of its boundaries. The isolation is extreme, and serves the double purpose of discouraging deserters, and avoiding the visits of camp-followers and general "hangers-on." The district is remarkably healthy, and physical illness is very rare in the camp, even in the coldest winter. No barbed wire surrounds the huts and any C(Q) who cares to walk out finds nothing tangible barring his way; needless to say, very few have made the attempt, as it involves a thirty-mile walk.

Leave is restricted, and until a rating has behaved himself for one month he gets no "shore leave" whatsoever; of course, he may leave the camp many times during that period, but only to work or go for a route-march. After he has had four Saturday afternoons ashore without untoward incident, the C(Q) becomes entitled to a week-end leave at his home; subsequently he gets another week-end each month that he remains—and behaves himself—in the camp. A few men who have done especially well are granted seven days' leave before drafting to a ship, or to shore service abroad. The daily time-table is as follows:

6.45 a.m.	Hands turn out.
7.15	Fall-in for 20 minutes' P.T.
8.0	Breakfast.
8.10 (onwards)	Sick-list.
8.45	Divisions and Prayers.
9.0	Work commences.
10.45	Stand-easy for 10 minutes.
12.0	"Secure" (i.e. pack-up work).
12.10 p.m.	Dinner.
1.20	Fall-in; work recommences.
2.45	Stand easy for 10 minutes.
4.0	"Secure."
4.10	Tea.
5.0	Fall in for Evening Quarters.
(onwards)	P.T. or instruction.
6.0	"Secure."
7.0	Supper.
10.0	Pipe-down.

Apart from those employed away from the camp, the C(Q) usually does the routine work of the camp in the morning, the afternoon being set aside for school, games, O.T., drill, or a route-march. After tea the rating may attend a P.T. class or a discussion group in the schoolroom. Those on outside parties are away from the camp until teatime.

When the camp was opened it was hoped that the surrounding State Forest would provide an inexhaustible supply of hard outdoor work for the C(Q)'s, but it has gradually become less and less important as the available work in the vicinity of the camp has been completed. It is unfortunate, as timber-felling was a most healthful and popular form of employment for the ratings, besides being of direct value to the community. Other useful work has included land-drainage, assisting in the building of a dam for a reservoir, and (in summer) a great deal of farm-work; some farm-parties have been employed as far as ten miles from the camp. Some

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of our worst men have worked well at these various occupations, and the poorer specimens have been built up from the physical aspect. Of indoor labour, sawing up logs has proved a good stand-by for wet weather; but there are many other minor tasks which have to be done by the C(Q)s, from servicing lorries to peeling potatoes.

Physical training is intended to tone up the flabby and weak, and to make all the C(Q)s more alert. It is thorough and exacting, and a great deal can be learned about a man by watching how he tackles the more difficult individual feats. Compulsory football is another important item in the regime—it was necessary to make it compulsory, as otherwise certain enthusiasts monopolized the football field, and those who needed it most were left out.

(2) *Special treatment.*—The most important element in the system of rehabilitation at Kielder has undoubtedly been personal influence; there is probably more personal attention there than anywhere else in the Navy, partly due to the small number of C(Q)s—about one hundred has been the usual strength of the C(Q) division—and the comparatively large number of officers who are concerned with them. Each rating has not one but several interviews with the commanding officer, schoolmaster, chaplain and medical officer—as well as with the psychiatrist, who does not ordinarily see any of the sick-list, but is concerned with the progress of the C(Q) in a more specialized way. The various officers have tried to influence the ratings from their own particular aspects, and are ready to pool their knowledge for the benefit of the others; in this way a common policy can be reached. The commanding officer discusses the Navy and its problems with each new arrival, and assesses him from the executive aspect; later, when he has got a clear impression of the individual, he arranges his draft after discussion with the psychiatrist. The schoolmaster has a difficult task, as he is required to teach classes drawn from many different walks of life, of different ages (anything from 17 to 45, with an average of about 24) and of very different outlooks. Intelligence, too, is very variable; for although it was decided that defectives should not be sent to Kielder a number of dull men have been received, and it is difficult to place them in the same class as those who have had a secondary education, for example. However, every man has his I.Q. tested when he joins the camp, and it has become usual to excuse the more backward individuals from school altogether; incidentally, it is practically impossible to rehabilitate a backward man up to the standard required for further useful service—there is so little to which one can appeal, and so few grounds on which personal contact can be made. Those men who are not excused school in this way are required to attend for 10 half days during their first month in the camp, the ground covered dealing chiefly with current affairs, elements of citizenship, and (a useful aid to those "unable to concentrate") a modicum of mathematics. After he has finished school, every C(Q) attends a discussion-group on certain evenings of the week in the schoolroom until he is nearly due to leave the camp; Housing, Education, Unemployment, and similar topics are discussed, and in hot debate the anti-social individual begins to feel the weight of public opinion, and possibly learns for the first time that no man has a right unless another has a duty. School has done an immense amount of good at Kielder, and very few have failed to enjoy it.

Annexed to the schoolroom is the Occupational Therapy room, under the charge of a skilled instructor. It might seem illogical that delinquents and malingerers should enjoy such amenities, but time has proved that it fulfils a useful purpose in providing both outlet and interest for certain men who would otherwise have "stuck" or deteriorated. It began as an evening employment for idle fingers, but has gradually grown into a regular form of treatment for the anxious and unhappy, especially for those confined to the sick-bay. Woodwork, plastic-work, painting and drawing have all had their vogue, but the first-named has proved the most satisfactory here.

The Medical Department is peculiarly placed, in so far that it provides both the ordinary service required for the minor ailments of the camp and the amenities of a small mental hospital. Men have frequently stayed in the ward for observation, and others have lodged there for weeks at a time, issuing forth to labour and instruction with the rest of the camp.

Every man is thoroughly examined from the physical aspect as soon as he joins the camp and he is weighed regularly once a week. Psychiatry is mainly con-

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cerned with diagnosis and supervision, together with an eventual assessment for further service; but each man has a number of interviews, as may be considered necessary, in which an attempt is made to unravel his difficulties and to make suggestions for his future guidance. Close co-operation is necessary between the psychiatrist and the other officers in the camp, and he is responsible for advising the Commanding Officer on the treatment and disposal of the C(Q)s.

Methods have gradually altered in process of time, the emphasis changing from hard work and restrictions to rehabilitation by pressure. The aggressive rating has required an outlet to his impulses, and this has been provided by P.T., games, and open-air work; and the timid and half-hearted have been encouraged to exert themselves, both physically and mentally, in an effort to improve their morale. But behind the daily work and exercise there has been the constant round of Naval routine, with hoisting Colours, Divisions, Church, Rounds, and even the rum-issue —all playing their part in keeping the rating in touch with the Service to which it is hoped that he will eventually return, and negativing the " hospital " atmosphere; and the presence of " sanctions " already referred to has given the camp a big advantage over a purely medical establishment.

Results.

After a rating has been three months in the camp, his suitability for draft comes up for discussion; if he is an exceptional man, he may get away in a shorter period, and if he is not really dependable he may be retained for as much as six months, or even longer. Between $3\frac{1}{2}$ and 4 months appears to be the average stay. Four months after each rating leaves the camp a follow-up letter is sent to the medical officer of his ship or establishment, requesting a reply to certain questions. Only about half these forms have been returned completed, but this is not surprising in a huge Service engaged in a global war, when ships and men move about with bewildering rapidity. With this in mind, however, it will be seen that the results obtained are on the whole satisfactory, especially when it is remembered that it is only the cast-offs of other establishments which arrive at Kielder.

Drafting is a very important function of the camp. " Occupational diagnosis," the process by which the psychiatrist can control his patient during the whole of his daily work, has enabled a definite decision to be reached in many problem-cases; certain men have been recommended for discharge as incorrigible or useless, and yet others have merited medical disposal. After observing a C(Q) rating for a number of weeks, it is usually possible to give some suggestions for his future employment in the Service; some men require restricted duties, such as service in depot-ships, boom-defence vessels, small craft operating in coastal waters, or shore bases at home or abroad; but over one-third are considered fit for general service, which means any form of duty anywhere. A rating sent back to any form of useful service releases another for duty afloat—an important consideration in recent years.

Many points are taken into account when a man's draft is under discussion. For example, a psychopath who has reacted badly to the precision and discipline of a battleship, may do very well in the Bohemian atmosphere of a trawler. Those who are afraid of the immense spaces and big seas of mid-ocean may perform a useful function in a boom-vessel at a harbour mouth—work that has to be done by somebody. A branch change may also seem advisable: a poor seaman may make a good writer, or a bad steward may blossom forth as a capable cook. Within the confines of the camp we have been able to experiment by trying men at different jobs, if the situation appeared to warrant it.

Some individuals who came to the camp with an impaired morale have been lent for a period to certain trawlers and other small craft at the nearest base; only those who have completed two months at the camp are recommended for such a trial of reliability. The safeguard lies in the fact that the rating knows that he has only to admit that he cannot " take it," and he will be returned to Kielder forthwith. Only two or three men tested in this way have failed to make good, and many have asked to go back to the same ship in which they were tried out. When the time comes for drafting, the rating is generally glad enough to go, and only very rarely has a " shanghai " on board a ship about to sail been required.

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The results of the follow-up already referred to are as follows:

Total number joining the camp in three years 842
Total number of C(Q) ratings admitted in this period who have since been drafted 680

Duty to which drafted.	Number.	Good report.	Bad report.
General service	271	62	34
Depot ships	44	15	10
Patrol service	44	30	14
Boom defence	65	12	2
Shore service abroad	74	12	7
Home shore service	182	101	38
	680	232	105
Discharged, " services no longer required " (i.e. incorrigible)			22
Discharged, " unsuitable " (i.e. unlikely to make an efficient sailor)			22
Invalided out of the Service—on physical grounds			7
,, ,, ,, —on neuro-psychiatric grounds			60
Miscellaneous disposals (deserters, civil prisons, etc.)			37
Retained in the camp			14

The diagnoses of the neuropsychiatric cases which required invaliding are as follows:

Hysteria	12
Anxiety state	5
Depression	2
Schizophrenia	6
Psychopathic personality	10
Constitutional inferiority	9
Temperamental instability	3
Nocturnal enuresis	2
Nervous dyspepsia	2
Convulsive tic	1
Mental backwardness	8
	60

A number of psychotic patients have been retained in hospital for treatment.

Conclusions.

It will be seen that reports were obtained on some 50 per cent. of the ratings drafted from Kielder; there is no reason to believe that medical officers have been more ready to notify successes than failures, however. Thus 27·5 per cent. have been giving good and useful service four months or more after leaving the camp, and 12·4 per cent. have committed serious disciplinary offences, or required further psychiatric disposal or treatment, or have proved general failures. No hard-and-fast conclusions can be drawn from the above figures, except that two-thirds of the cases reported on seem to have made good—at any rate up to the time that the reports were written.

Some of the reports are extremely disappointing, as in one case where a rating, who had done very well in the camp, joined a ship and smashed a great number of light-bulbs with a hammer directly she left port; others deserted a few hours after leaving the camp. On the other hand, excellent reports were obtained from a still larger number—one man had been commended by his Admiral for bravery, another had been made a petty-officer, and so on; and some had been lost at sea in the defence of their country.

Besides the actual results obtained in this manner, the camp has performed other useful functions. Over one hundred men who were unsuitable for Naval service, either by reason of mental or physical unfitness or on account of delinquent tendencies, have been extruded from the Service machine. It is possible that some of these men might have caused a great deal of trouble in an environment where their shortcomings were not immediately understood. It cannot be contended

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that the training in the camp has any real value from the purely Naval standpoint, but there is a wider aspect to the instruction given which has not been lost sight of by the authorities concerned. Apart from the training purely designed to make unfit men fit, or relatively unfit men fitter, a great deal of thought has gone into the problem of making them better citizens. Apparently the individual contacts built up between officer and rating under the peculiar circumstances of this camp have assisted certain individuals to change their attitude towards the community as a whole, and to discover for the first time that their own paranoid suspicions regarding the country in general and the Navy in particular were not grounded in fact. Gradually a better attitude towards authority becomes apparent in the majority of cases, hostility dies away, and perhaps some shame-faced mutterings begin to be heard about " getting back to sea " ; then is the time to draft, and men caught in this frame of mind and got away to a ship before they can deteriorate generally do very well.

Another value of the camp has been its presence as a sort of trump-card in the hand of the depot psychiatrist, to be played in the face of rank non-co-operation, half-heartedness, and possibly malingering. It is probable, too, that the camp exerted a wholesome prophylactic effect in the depots while it was still unknown outside the realms of rumour.

The various psychiatric specialists have testified as to the value of Kielder as a deterrent in this way.

Finally, there is the experimental aspect of the camp. It has now been demonstrated that, provided the State is prepared to spend sufficient time and effort over the individual, a possible two-thirds of the worst hooligans and bad psychiatric bets in the Navy in time of war can be reclaimed in some measure, and that further useful service can be extracted from many of them. Naturally the Navy was more interested in raising and maintaining their morale, but the question of making bad citizens into better citizens was not forgotten.

It is only fair to add that great difficulties were encountered at all stages. Perhaps the greatest problem was that of staff, for the Fleet requires first choice of personnel, and with a few exceptions those who assisted in the work at Kielder were old, or unfit, or inexperienced. But there was also the sense of isolation from the outside world with which to contend, not to mention a series of wet summers and cold winters—no pleasant experience in a hutted camp. Finally there was the presence of the men sent for treatment ; the majority of these were neither genuine medical cases nor pure delinquents, and daily contact with large numbers of men of this type over a long period is extremely irritating to those who are neither interested in nor gifted for this type of work. It is remarkable that good results continued to come until the very end, in spite of many disappointments and setbacks.

Kielder Camp was closed on July 13, 1945.

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