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Therapeutic Considerations in Planning the Return of American POWs to Continental United States

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THE anticipated release of American POWs incarcerated in Southeast Asia poses a variety of issues relating to their post-repatriation treatment and rehabilitation. None of these issues demands a more immediate and unequivocal decision than that dealing with the speed and manner with which the men, once freed, will be returned to the continental United States (CONUS). A number of considerations will undoubtedly shape that decision, including those of international relations, political pressures, public sentiment, logistic capabilities, and the well-being of the repatriates themselves. This paper deals only with the last of these, focusing on physical and psychological factors that merit consideration in developing plans for transporting newly liberated POWs to CONUS.

The sources of data for this paper are primarily relevant studies of prisoner populations, emphasizing especially POW groups, but including also concentration camp and civilian prisoner samples. The report is based also on a number of interviews with research investigators, former POWs, and the wives of POWs now in Vietnam. References to specific studies and sources are listed at the close; they should be regarded only as a small proportion of the total number of relevant references available.

Relevant Psychological and Physical Factors

The Capacity to Deal with New and Varied Stimuli

Studies of the effects of prolonged incarceration yield strong evidence that the capacity of the released prisoner to deal immediately with the onrush of new experiences is severely diminished. Liberated concentration camp victims, military POWs and civilian prisoners have all displayed for

a time the lack of spontaneity, the withdrawal and apathy, and the emotional and intellectual blunting that flourished in the prison environment.^{3,7,11} Even among non-prison personnel subjected for long periods to a constant, non-stimulating environment—for example, those in Antarctic stations—the result is a diminution of intellectual energy, and impaired memory, alertness, and concentration.¹⁵

The greater the degree of social deprivation, and the longer it has extended, the more marked is the impact likely to be. The long-term prisoner has not received sensory input sufficient to allow his mental processes to remain receptive and active. The captive's emotional and intellectual functions are dulled from the monotony of the prison experience. A sudden release into free society poses a considerable threat; the body is free, but its functions are still tuned to the deprivation circumstances. The liberated POW cannot readily tolerate, therefore, the sensory input of a normal environment, with its rapid pace, confusion, and demands for decision-making. In the words of one released POW, the captive has adapted successfully to his monotonous prison environment by "gearing down", and the challenging task posed by liberation is to "gear up" to normal life again.⁹

The task cannot be accomplished quickly, and those POWs who have been pressed to do so have noted the stresses induced in them. Describing his reaction to being thrust abruptly into a maelstrom of post-repatriation activities, the same former POW said: "Right away, we got off the plane and it was as if we were still in prison."⁹ Among some inmates released after serving a prison sentence, symptoms such as anxiety, restlessness, sleeplessness, and irritability have become so great that they have sought means to return to the more protected environment of prison itself, with its reduced input and routine existence. Although no analogies can be drawn safely between civilian prisons and POW camps, such data do offer a sharp reminder of the stresses associated with the move from captivity to freedom, in whatever setting it occurs.

The liberated POW, certainly the long-term POW, would appear to require a period immediately after release in which he can learn to adapt to the overwhelming "inputs" offered by the world outside his cell. The POW is able to adjust to the misery of captivity in part because that misery is a routinized element of a routine existence. It is well to remember that the freed prisoner leaves an

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environment which, despite deprivation and abuse, was internally consistent, a world in which even the captor's techniques for keeping the prisoner off guard can become unambiguous and unvarying. Successful transitional communities for repatriated World War II POWs in Great Britain were based on a recognition of this fact, and were so structured that they, too, presented a consistent and simple environment.⁶ The assumption was that to catapult the suddenly freed POW into an ambiguous and overly complex world was to do him potential harm, to further damage what little sense of security remained in him. Evidence for the validity of such an assumption is strong, and merits attention in considering the speed and the setting of the POW's return.

The Expression of Angry Feelings

A number of investigators have noted a pattern in the emotional responses of newly released prisoners, especially those held by Oriental captors. The liberated POW moves gradually from apathy to anger, from abject withdrawal to overt resentment, almost as if he is flexing adaptive emotional resources that were forced into suppression during captivity.^{7,11}

The pattern of emotional reactions seen among POWs newly repatriated from Korea can be regarded as typical, and offers a gauge for the range of emotional responses to be expected among any prisoners delivered from long captivity in the Orient. Over 440 POWs from Korea were studied during their ocean voyage to CONUS.¹¹ The majority of these men had been prisoners for more than two years, and their initial behavior was strikingly consistent. They were unenthusiastic and subdued, as if dazed by their new surroundings. They lacked spontaneity and spoke in a dull, monotonous tone, totally lacking in emotional expressiveness. This initial picture was labelled by some the "Zombie reaction" which, while overly dramatic and inappropriate, did capture the muted and sluggish quality of the prisoners' initial attitudes.

After a few days at sea, however, a gradual but tangible change began to take place. The men became less phlegmatic and more reactive—often belligerent, aggressive and critical. For example, where they had previously expressed praise for the treatment received since repatriation, they now began to complain petulantly about the facilities of the ship and the military routine. During psychiatric sessions, they were direct in expressing overt hostility. Slowly and inexorably, subdued apathy had given way to outspoken anger. It was as if the ex-POWs had made a start toward liberating the resentment and hostility buried within.

In the view of one investigator,⁸ apathy is replaced by anger as the prisoner slowly gives up his chronic experience of disappointment and loss, and the world is once again charged with emotion. For others, it is simply that bottled-up aggression must inevitably be re-experienced and worked through. Equally likely, the pattern demonstrates a healthy movement by the POW toward establishing his lost identity and toward reasserting his suppressed individuality. The psychodynamic interpretation of the liberated POW's pattern of emotional reactions is less important, however, than its predictability. A clear requirement exists

for an initial period to allow angry feelings their free expression in an environment marked by understanding and acceptance, and the freedom from undue constraints and stress.

The Need for POW Group Experiences

The importance of group interaction as a vehicle for working through and mastering the effects of trauma is well established. Group experiences represent an especially relevant consideration in the rehabilitation of men released from captivity. A study of the adjustment of British POWs following World War II, for example,⁶ showed that the psychological resources available for overcoming the effects of imprisonment were, from the beginning, group as much as personal. Among POWs who have communicated for years only in clandestine ways, the need is great to share experiences and ideas among themselves, among the only ones who really knew the unique world of isolation and deprivation that was captivity. Liberated POWs feel strongly at the start that no one can truly understand them unless they, themselves, had experienced the realities of incarceration.¹¹

The need for group interaction among POWs arises in large part from a potent emotional base, out of the predictable surge of guilt and anxiety experienced upon liberation. No matter how well rationalized, the ordeal of captivity is surrounded for many POWs by an aura of remorse, and by agonizing questions of self-worth and self-recrimination. Imprisonment, certainly in the Orient, is calculated to enhance and exploit the POW's feelings of shame and self-deprecation over having been captured. It is a fair assumption, too, that many POWs now in Southeast Asia, anticipating their first confrontation with the outside world, will be on guard against the harshly negative judgments made by many in the recent past about the behavior of prisoners of war. Their exit from captivity, like those of former repatriates, is likely to be accompanied, therefore, by a strong need to seek from fellow POWs the kinds of supportive "feedback" that will help reduce anxieties.

During the return voyage of Korean POWs, group therapy sessions allowed the men to talk about their fears and misgivings surrounding the return to CONUS.¹¹ They spoke of acute feelings of isolation, of the inability to communicate, and devastating anxiety about the future. They perceived homecoming itself as a particularly threatening experience, and the anticipated fanfare increased their feelings of guilt and unworthiness. In sharing their fears with their fellow POWs, they were exploiting a precious common identity as repatriated American prisoners of war—the only strong group tie available to fill the emotional vacuum which had been created in them.

The POW's liberation from captivity is accompanied not only by feelings of remorse and anger engendered by captivity, but also by anxieties over the prospect of family reunions. Many of these anxieties will be reinforced by reality. The sense of isolation and abandonment felt by many POWs will be exacerbated when the men are confronted by an avalanche of family change and disintegration. The trauma associated with that confrontation will more easily be borne if shared first among fellow POWs,

whose lives already carry a common continuity of stresses. In structuring post-repatriation rehabilitation procedures, strong consideration appears merited for providing a relatively protected setting in which the now former POWs can interact for a time as a group.

The Need for Orientation and Information

Few episodes of captivity endured by American military personnel have resulted in so wide a psychological gap between the prisoner and the outside world as that experienced by today's POWs in Southeast Asia. For many men, the period of captivity now exceeds by far that known by POWs in the past. More important than the actual time factor alone, however, the long years of imprisonment during the decade past have seen broad and dramatic social and technological changes that now pervade virtually every element of American life. Consider any aspect of society—from modes of dress to the liberated role of women, from the youth culture to space technology—and one realizes how much of America in transition today's captives have missed. The culture shock for the returnee is likely to be enormous, and a logical requirement exists, therefore, to provide for the newly liberated POW not only factual news, but an orientation to the sweepings social changes that have evolved during his absence.

Such data cannot quickly be assimilated, especially when the recipient is already the victim of impoverished intellectual and emotional energies. Even more difficult to absorb will be news awaiting the POW that strikes infinitely closer to home—news of deaths, of divorces, of the fate of children. While such personal, family information will not always come as fresh revelations, it will serve at a minimum as verification of news that the POWs were allowed to receive, or that filtered through the prison "grapevine". The emotionally overwhelming and often devastating impact of such news will be enormous, increasing further the need for allowing an opportunity for the POWs to process new information through their impoverished emotional channels.

It would appear that the well-being of the returning POWs depends in part on the availability of a period immediately after liberation during which they can "catch up" psychologically and emotionally to the personal and external worlds that have raced onwards without them. It is well to remember that the image of the world with which the POWs return is the last one they remember before capture. That image and today's reality will need to be bridged in an environment as free as possible of stress and the intrusion of external demands.

Physical Rehabilitation

As the occasion for the release of the POWs draws near, it is likely that the captor will attempt to improve the physical status of the men to circumvent international censure and criticism.¹³ Nevertheless, it can be anticipated that the liberated POWs will be suffering from a variety of physical symptoms and ailments, some of them severe, developed during long years of deprivation and abuse. In general, capture by Oriental forces has meant a greater

degree of physical stress and deterioration than that which obtained, for example, among American and British POWs of the Germans during World War II. Survivors of the Japanese and Korean prison camps displayed a relatively high rate of morbidity,^{5,14} and there is no reason to believe that the picture will be significantly altered in the case of today's POWs in Southeast Asia.

Diagnostic examinations and treatment procedures are best initiated in an environment which reduces to a minimum the potential for external intrusions, and at a pace which allows for optimum quality of care. Equally important, however, the returning POW should be protected during the vulnerable first days of his release from the threat of *additional* stresses associated with his return. The physiological and psychological burdens accompanying the repatriation process can easily place undue strains on the already severely challenged constitutions of the returnees.

The pace and tension of both formal and informal welcoming procedures, for example, will not always work in the best interests of the freshly liberated POW. His adaptive mechanisms cannot be expected to keep pace with those enjoyed by persons who have not suffered years of captivity. The stresses associated with high speed travel itself, for example, must be taken into account. Evidence from the field of biological rhythm research demonstrates how depression, headaches, fatigue, insomnia, visual problems, gastrointestinal and other somatic symptoms can arise when the body's internal clocks are disrupted by rapid movement across time zones.¹² Today, executives in industry and government are scheduling at least one day of rest after international travel before addressing work at hand. These men come to their task from a free and healthy environment, not ravaged by the stresses of captivity.

The issue is best summarized, perhaps, by the reflections of a former POW,⁹ who points out that the intense activity surrounding his release caused him to lose five pounds before he returned home. He appeared in poorer health, he claims, after he arrived at home than he did two weeks earlier. Although admittedly anecdotal, the episode suggests further the need for protecting returned POWs from the deleterious effects of an immediate and stressful immersion into post-repatriation activities.

Psychiatric Considerations

Whether couched in the technical terms of clinical psychiatry or in the popular terms laymen use to describe behavior, the adjustment problems of men liberated from long imprisonment are often severe. Based on data from previous POW episodes in the Orient, it is likely that many of the POWs now in Southeast Asia will be found upon repatriation to be suffering gross personality difficulties and emotional crises requiring immediate and expert attention. Beneath their surface euphoria, for example, survivors of Japanese POW camps of World War II and of the North Korean compounds of the 1950's displayed a wide range of symptoms, including anxiety, withdrawal and depression, hostile and acting-out behavior and, in some instances, frankly psychotic states.³ A similar spectrum of behavior problems emerged among crewmen of the *USS Pueblo* when they were liberated from captivity in 1968.

Because many of today's POWs have been incarcerated

for unusually long periods, it is likely that their symptoms will be relatively acute and persistent. They will range, for example, from depressive reactions accompanied by listlessness and withdrawal to anxiety states marked by agitation and irrational fears; psychosomatic complaints and sleep problems are likely to be frequent.¹ Such reactions are predictable in view of the known stresses of captivity. During their long incarceration, "many men have over-extended their abilities to tolerate disappointment, hardship, and frustration. Therefore, they have already depleted their personality resources by the time of release."⁴ Those resources must be replenished as quickly and effectively as possible if the POWs are to be successful in handling the new stresses they will encounter on their return from captivity.

The process of providing a thorough system of psychological support for the returning POWs should not be conceived simply in terms of the traditional stereotype of psychiatric treatment for the mentally ill patient. A broad range of psychiatric, psychological, and social services will be required—group as well as individual—requiring the skills of a broad range of mental health professionals. Indeed, the difficulties likely to be encountered by returning POWs need not, in most cases, be regarded as signs of specific, diagnostic categories of mental illness. As one psychiatrist who treated the POWs returned from Korea pointed out: "It was evident to the examining psychiatrist that . . . the majority of repatriates did not suffer from any psychiatric disease." They were not, by and large, totally incapacitated psychiatric casualties but, rather, victims of natural and predictable reactions to the stresses they had endured. Confusion, indecisiveness, anxiety, feelings of insecurity expressed as aggressiveness, lack of sexual interest, fearfulness about return—these were among the typical responses of POWs returned in the past, and they are likely to haunt tomorrow's repatriates as well.

Without suggesting, then, that preparations need be made to treat hundreds of men suffering total psychiatric disability, a logical requirement clearly does exist to plan for a period immediately after release during which the POWs will have available optimum psychotherapeutic aid. To do otherwise would be to ignore one of the most clearly foreseeable eventualities surrounding the prisoners' return. Guilt and anger over the past, anxiety and panic over the future, an inability to adapt to the realities of the present—all of these will likely fill the life space of the liberated POWs. An initial period, protected from outside stresses, is required, during which treatment may be begun. Psychiatric personnel specially trained to recognize the outcome of unique POW stresses should be available to respond to the immediate mental health needs of returning POWs, and to help define and structure future psychotherapeutic efforts. The successful accomplishment of these goals warrants the investment of whatever period is necessary subsequent to the release of the POWs.

The Released POW's Self Image

Among the most dramatic and devastating results of incarceration are the changes induced in the prisoner's self-concept.⁷ By any index or criterion the POW might use,

his image of himself in captivity is constantly threatened, and often severely altered. It is not simply that he has moved precipitously from freedom to enslavement, from a potent military role to degradation and impotence. He has also altered physically, aged and deteriorated by the passage of time and the privations and stresses of captivity. The devastating changes in self-concept suffered by prisoners are a long time being undone.⁷ Indeed, they have been noted as chronic elements in the personalities and attitudes of prisoners long after their incarceration experience. It would not be surprising, therefore, if a major concern among many POWs in Southeast Asia were the quality of the image they will present to the outside world upon their return. In matters of physical appearance, health, behavior and personality, the goal of POWs is often to appear as "normal", as much like the original precaptive man, as possible. How they *seem* to others—for example, on first encounter with family and friends—ranks high on the list of prisoners' concerns.⁹

Tangible changes in the appearance and demeanor of the returning POWs should, of course, be expected, and they cannot fully be addressed or counteracted in the period immediately following repatriation. Nevertheless, the released POW's first experiences with important figures in his life will often help shape the quality of his adjustment over the long term, and it is of considerable importance, therefore, to allow for a period immediately upon repatriation which the POW can utilize to begin altering his self image, the image he presents to the outside world.

The return of even a modicum of physical well-being is, of course, of utmost importance in altering the POW's self-concept. Such matters as energy and appetite, and the sense of normal physiological functions are crucial. So, too, are purely cosmetic factors, among them adequate weight, the absence of dental problems, and freedom from skin eruptions.

Beyond matters of physical health and appearance, however, in purely social terms, the POW will soon sense upon release how far his captivity has led him from the world he had once taken for granted. It is a fair assumption that some brief period will be necessary to allow the POW to begin relearning basic social skills, to adapt once again to a society to which he has become unaccustomed, even where rudimentary activities such as eating and sleeping are concerned. The social rehabilitation histories of former POWs are instructive. One investigator, for example,³ describes in detail the socially inappropriate behavior of personnel recovered from Japanese prison camps in World War II. They ate huge amounts of food, and in the mess hall, they were self-conscious in the use of tableware; their tendency was to use a spoon for all purposes, just as they had been doing during their long confinement. The returnees lost all conception of camp sanitation and policing; in the barracks they were likely to live in an area of confusion, their beds frequently surrounded by a disordered pile of clothes, shoes, and personal property. In a similar vein, a number of POWs returned from Vietnam have had to correct for the natural tendency to sleep on the floor rather than on an available bed, and to squat rather than sit.^{9,13}

Before he must make his confrontation with society, it appears essential that the POW have an opportunity to

adjust his image of himself. We comb our hair and straighten our tie—even smile into the mirror—when we anticipate an important appointment. The POW must be allowed a moment in time to do likewise, as he struggles to erase the years of physical deterioration and psychological squalor imbedded in his body and mind.

Views of POWs and Their Families

The speed with which POWs liberated from Southeast Asia are returned to CONUS is of course, a prime concern to those directly involved. It is the prisoners and their families who will bear the unique stresses posed by liberation. The assumption might easily be made that, after long years of captivity, a speedy return would be viewed to be in the best interests of both POWs and their kin. While individual differences in attitude are inevitable, available data suggest that the opposite view is most prevalent. A large proportion are likely to welcome a period between liberation and return in which to prepare for the initial reunion.

Returning POWs will inevitably view the issue from the perspective of their individual experiences. The short-term POW, for example, is likely to want as little delay as possible in returning to CONUS; the long-term POW, in contrast, is more likely, for many of the reasons noted here, to feel a strong need for a buffer period.⁹ Preliminary data based on interviews with the wives of POWs suggest strongly that most feel a similar need for a period in which to prepare for the stark realities of the POWs' return. Some cite their strong convictions that their husbands will want to prepare themselves physically and psychologically, while others note their own and their children's requirement for a period in which their lives can be psychologically restructured to prepare for the event. In only isolated cases to date have the wives of POWs interviewed seen a quick return as anything but threatening and stressful.¹⁰

It is noteworthy, too, that a retrospective survey of POWs returned from Korea yields comparable data. Much more frequently than Korean veterans who had not been captured, the former POWs indicated the need they felt for a "sheltered, gradual transition" into their post-Korean lives. They would have profited from, for example, "more orientation to the problems we were to face," from a program designed to "build myself up physically and mentally," or for "at least one month of psychiatric treatment and counseling."² Indeed, even for healthy men, there is evidence that military "pipeline" status—with its emphasis on quick transition and adaptation—poses a psychological stress.¹¹

It would appear that plans for repatriation which take account of the attitudes and feelings of the POWs and their families should include the option of providing a period during which both can adapt to the realities of freedom and the resumption of family contacts.

Summary

This paper has provided data relevant to the issue of the speed and manner of the return of American POWs

now incarcerated in Southeast Asia. The data focus on a number of physical and psychological factors that merit consideration in developing plans for transporting newly liberated POWs to CONUS, including: the capacity of the POWs to deal with new and varied stimuli; the expression of angry feelings; the need for POW group experiences; the need for orientation and information; physical rehabilitation; psychiatric considerations; the POWs' self image; and the views of POWs and their families.

There is strong evidence to conclude that the process of return should incorporate for many POWs a period in which physical and psychological rehabilitation procedures can be initiated in an environment protected against the stresses of the outside world. The provision for an effective buffer between the POWs and the predictable tide of pressures from the outside world—the media, the public, political figures, even family and friends—appears as a major therapeutic maneuver. Such a buffer period, allowing the opportunity for sound therapeutic interventions, might more easily be maintained outside rather than within CONUS. In this connection, the potential merit of a return voyage warrants consideration.

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