

## CHAPTER 27

### OTHER PRISON CAMPS IN THE FAR EAST

#### "B" AND "E" FORCES IN BORNEO

"B" Force. On 9th June 1942 the Japanese called for a force of 8,500 men for working camps on Singapore Island, and a self-contained medical unit was planned to accompany the force. On 15th June the plan was changed, and "B" Force including 1,500 Australians was ordered for an oversea destination. At this time the medical personnel in Changi was ample for requirements, and in order to provide adequate medical attention for the force, an establishment of 148 was built up, which included 118 from the 2/10th Field Ambulance. In the team there were thirteen medical and two dental officers, and one R.M.O. was assigned to each 500 troops. Medical equipment sufficient for two months was taken, and, with forethought, four large "dixies". "B" Force consisted of 1,494 of all ranks, of whom 145 were officers and 312 N.C.Os.: numbers of them were not really fit, many had had malaria, and many had dysentery and some were possibly still infective. Lieut-Colonel E. MacA. Sheppard was S.M.O. of the force. Assurances had been given by the Japanese that conditions and food would be good, but the nine days' voyage on the *Ubi Maru* to Sandakan in Borneo was an ordeal. The men were herded together in the holds, with practically no ventilation; meals consisted of limed rice and gristly stew, sanitation was unhygienic and inadequate, and drinking water was meagre and not chlorinated. The troops disembarked at Sandakan after a brief perfunctory spraying with some disinfectant, and on 18th July were paraded for a march of eight miles to the Sandakan prisoner-of-war camp.

The men were very crowded in the camp, which was designed for some 300 internees, and had to provide sanitary facilities at once, as none were existent. Specimens for bacteriological examination had been ordered by the Japanese doctor to be taken before the men left the ship, and similar tests were made on later occasions, but no precautionary measures were adopted as a result. In this camp steps were taken at once to provide hut accommodation for the sick, and to ensure a water supply. Three hospital huts were permitted, and by partitioning, space was obtained for some surgical and pathological work and dispensing. The supply of sulphapyridine tablets, used sparingly for severe cases of dysentery, was demanded by the Japanese guards for self-treatment of venereal disease, and was therefore kept in safety. The diet was deficient in protein and fat and proof of its lack of essential food constituents and vitamins was soon evidenced by the appearance of beriberi, scrotal dermatitis and painful feet. Some food extras were procured by the Red Cross representative, using 350 dollars given him in Changi, and small amounts of milk, eggs and other products, together with scanty stores brought on the ship were of help but did not last long. Lieut-Colonel Sheppard managed to

make contact with Dr J. Taylor, at the civilian hospital, who freely and generously assisted by giving valuable drugs and other materials from his own supplies. On later occasions a medical officer was sent with burial parties to Sandakan, and many small and badly needed parcels of medical supplies were taken back to camp in the officer's pocket.

Deaths were not infrequently due to dysentery and malaria, these being terminal infections in malnourished and fatigued men. They were engaged in laborious work on the aerodrome of Sandakan, and not only were they worked long hours, but they were not excused by reason of illness unless completely incapacitated in bed. More huts were needed for hospital purposes as time went on, and by September defective vision was added to the existing deficiency diseases, and skin disease, scabies and tinea in particular became prevalent. Water was scarce for washing and even for drinking, and though special hygiene officers made efforts to maintain a satisfactory standard the general conditions were poor.

Review of the Australians in "B" Force by the medical officers showed that out of 1,469 men, 101 were permanently unfit, 200 unfit for a period of 12 months, 176 for 6 months, and 236 unfit temporarily for 6 months, a total of 713. The Japanese ignored these figures, and the guards continued to select men for work as they pleased. There was the usual discrimination against non-workers, who received a much smaller ration than workers, making it difficult for sick men to make a recovery.

On 27th October 1942 a party consisting chiefly of officers was moved from Sandakan to Kuching. Sheppard handed over to Major Rayson as S.M.O. in Sandakan, and he and the rest of the party sailed on the *Riangor* for Kuching, and arrived there on 3rd November. Sheppard at least felt confident that the field ambulance personnel remaining at Sandakan would show the good results of their training and devotion as they had in the past. On arrival at Kuching the officers were paraded before Major Suga who promised that cooking and hygiene arrangements would be ready in twenty-four hours, but in fact they had to depend on Javanese and Indonesians in the next compound for food for some days. The diet was chiefly rice, but supplements of fruit could be obtained, though requests for permission for Red Cross help produced no result. By the end of the year the incidence of septic sores was increasing, and deficiency amblyopia was becoming more severe. Practically no drugs were held by the Australian party, and though many complaints at sick parades were made they were often trivial and due in part to lack of occupation. Though the officers were on the whole well treated they had little opportunity for diversion or exercise and knew nothing of what was happening at Sandakan.

Early in January Sheppard was allowed to attend a deputation which asked that more European food be provided for patients, seeing that 600 men out of 1,000 were unfit owing to beriberi and skin conditions. The basic diet only contained 44 grammes of protein, and its caloric value was only 1,600, but no improvement followed.

At this time Sheppard was allowed to visit the Kuching camp hospital, and encountered occasional violence from the guards. The hospital consisted of three huts, and housed British, Australian and Dutch privates and civilian internees. The patients were closely crowded: in the main hut over fifty patients were lying, and twenty more were exposed to the elements on the verandah. The standard of accommodation was very low, and facilities were almost non-existent. Later a hut was built for tuberculous patients. There was also an R.A.P. which was sometimes useful for the passing of messages or money for food.

*"E" Force.* On 28th March 1943 "E" Force, including some 500 A.I.F. troops left Singapore for an oversea destination and arrived at Kuching after a bad trip in a small ship of 1,000 tons with deplorable arrangements. Major H. H. Eddey was S.M.O. to the force, which included two other medical officers and eight other ranks. After being staged at Kuching for a week, "E" Force went to Sandakan, and was quartered on Berhala Island in Sandakan Bay, and several weeks later, was transferred to the main camp at Sandakan, there meeting "B" Force again. Conditions were fairly good at first, though the work was hard and supervision often harsh, rations were increased and some recreational facilities were allowed. But in August 1943 wireless sets were found, and as the Japanese suspected a plot, all officers of both forces were sent to Kuching, with the exception of several combatant officers, three medical officers and two chaplains. In Kuching, the medical officers of "E" Force had nothing to do but assist in looking after a compound of 140 officers. Before leaving Sandakan Eddey noted that no fresh cases of dysentery occurred, and thought that this was due not only to the activity of the hygiene squads, but also to the administration of dysentery vaccine to all the men on their arrival. This vaccine was also used in Kuching in 1943 and early in 1944, but no outbreak of dysentery occurred till 1945 when general resistance was lowest.

Another observation made in Sandakan was that improvement was noted in tropical ulcers after a sharp bout of malarial fever. On the hypothesis that fever *per se* might raise immunity, artificial fever was induced with peptone with good results in early cases, and with some limitation of extension in the severer ulcers.

*1943 to 1944.* The Japanese required an oath to be taken that no attempt would be made to escape. Lieut-Colonels Walsh and Sheppard and Major Rayson at the head of a parade of over 1,400 men refused to sign the second part in which they were to request the Japanese to "shoot to death" any attempting escape, but they compromised by stating that they understood that any escaping would be shot.

The officers of "B" and "E" Forces at Kuching were quite out of touch with their men at Sandakan. As previously noted, the medical activities in Kuching were slight. The same difficulties persisted in obtaining a reasonable diet and even rudimentary facilities for necessary medical work. In three and a half years of life in prison camps in Borneo only

one-sixth of a Red Cross parcel to each man was distributed by the Japanese. The rice ration was about 4 ounces per man daily. Malnutrition caused most of the invalidity, and was the chief cause of 600 deaths in the compounds at Kuching.

During the later period the condition of the men deteriorated greatly in Sandakan; to the steady weakening of exhaustion and starvation were added infections by malaria and dysentery and the death rate mounted. As in other areas the attitude of the Japanese was modified by the falling of the tide of their success, and more consideration was paid by them in some ways to the needs of the sick.

*The fate of "B" and "E" Forces.* When the end of the war was coming into sight, fearing no doubt an invasion of Borneo by the Allied forces, the Japanese in several theatres of war sent bodies of men out on forced marches, and submitted them to brutality which few survived. All who could walk at all were sent 140 miles on foot inland over dense jungle from Sandakan to Ranau, and there "set to perform superhuman work on starvation rations". The first march to Ranau left Sandakan at the end of January 1945. Those who fell out sick or exhausted on the journey met the same fate as those who survived the labours at Ranau and were killed. Continued neglect and starvation of those left sick at Sandakan despatched these by famine and pestilence as surely as by the sword, and of 2,400 soldiers at Sandakan only six survived. These men were at last rescued by the liberators who found them living with natives, the last witnesses of the fate of "B" and "E" Forces. Fortunately the swift movement of events following the landings at Brunei and Labuan prevented the possibility of similar tactics elsewhere in Borneo. The officers at Kuching thought that they were destined for a similar fate, and intelligence information suggested that the end would come in September: fortunately the day of freedom was closer at hand.

The civilian hospital in Kuching previously used by the Japanese for military casualties was then made available to the prisoners of war. Major Eddey and Captain I. C. Heinz headed a medical detachment that took over this hospital and found a deplorable state of neglect which needed the hard work of a coolie gang in association with the prisoners of war before normal service could be restored. This made possible prompt measures of resuscitation, as is told in Chapter 28, and saved the needless sacrifice of valuable lives.

## PRISONERS OF WAR IN JAPAN

### THE TRANSPORT OF PRISONERS TO JAPAN

Prisoners of war of several nationalities reached Japan at different times and were immured in camps scattered over Japan and other areas under Japanese control. After reaching Japan they were also subject to movements from camp to camp, where conditions varied according to geographical and climatic differences, administration and the fortunes of war. Australians were scattered in various camps from Formosa to Manchuria,

and were included in numbers of working parties in the islands of Japan itself. Some of the groups of servicemen and women (for there was one small party of nurses) came from Singapore Island, others from Burma, Thailand, and Indo-China and New Britain.

*From H.M.A.S. Perth.* Shortly after midnight on 28th February 1942 H.M.A.S. *Perth* was sunk in action in the Sunda Straits, and many casualties were sustained, particularly after the order had been given to abandon ship. Many of the more severely wounded did not survive the ordeal of hours in the water, which was covered densely with fuel oil. Surgeon-Lieutenant S. E. L. Stening, R.A.N. who was wounded, was amongst those saved; they were picked up by a Japanese destroyer and transferred to the *Somedong Maru*, on which they were imprisoned for a week. After some days a Japanese army surgeon came with two assistants and good equipment, and with the help of Stening and a petty officer dressed the wounds, though insufficient dressings were left for after-care. Some 300 men were then taken to Serang in trucks, where they were kept in the gaol and a cinema. Only after ten days were the medical officers released from gaol cells. Stening had only a dressing forceps and scissors and very few dressings with which to work, and quite inadequate drugs to treat the dysentery and malaria which soon beset the 600 men in the prison compounds. After a month, during which two deaths occurred, Stening and twelve other officers were taken to Batavia and shipped to Japan. They arrived at Moji on 5th May 1942 and were taken to an interrogation camp near Yokohama, where they were prohibited from communication with others and starved on a good but inadequate 1,200 Calorie ration for five months.

*Senior officers' party.* The first party to leave Singapore was the senior officers' party, whose removal from the capitulated forces in Malaya followed the usual procedure for prisoners of war. On 16th August 1942 forty-seven senior officers were sent from Changi, and Palembang in Sumatra. Included in the party were Colonels A. P. Derham, D. C. Pigdon and E. R. White of the A.A.M.C.; Captain D. J. Brennan acted as the medical officer of the party. General Percival objected strongly to the ship originally selected, and the party embarked on another, one of an escorted convoy which travelled at a very low speed. The trip was similar to others on Japanese sea transports; there was gross overcrowding, and washing and sanitary facilities were lacking, with a resultant outbreak of dysentery. Food was very bad, and the officers were only allowed in batches up from the holds where the heat under the steel decks was very trying. After a voyage of three weeks they disembarked at a port in the south of Formosa in September, and were finally moved to a camp on the north-east coast, where only the scenic features were pleasant. Work was demanded of all the party on farms which they made out of bush-land. They were treated like coolies, and were not immune from physical violence for trifling or imagined offences. They were not permitted to enjoy any but a small proportion of the products of their toil. On July

9th 1943 they were moved again to Shiri Kawa, near Nagi, close to the south-west coast of Formosa, where malaria was rife. In October 1944 another move was made to southern Japan, as Formosa was threatened by the Americans in the Philippines. On this journey to Moji gross discomfort was suffered by the 259 prisoners of war on board, herded together in semi-darkness. The ship was detained for three weeks by fears of air attacks, when alarms came the crew used to leave the ship with prisoners in the holds. Eventually the ship escaped safely and reached Japan without escort. The party was taken to Beppo, a popular resort, where conditions were better, and then after a couple of months, went via a south Korean port to Manchuria. Conditions here were very trying owing to the intense cold and will be described later.

*From Rabaul.* The medical officers and nurses taken prisoner in Rabaul were moved to Japan during July 1942, as previously described in Chapter 22. Though they travelled under conditions of some discomfort they at least had the fortune not to be drafted to the *Montevideo Maru* which was sunk on the voyage. Six members of the A.A.N.S. and thirteen civilians were in the group which reached Japan. The nurses had cared for Australians in the Kokopo camp hospital in Rabaul after the invasion, though with scant facilities. Two patients died there from exhaustion and dysentery. In Japan they were in a camp in Yokohama, and later were housed in another camp twenty miles from the city, and did not do further nursing work. They were employed on light work, such as knitting small silken bags, and making and gluing envelopes, for which they received small pay, 1 sen per 1,000 envelopes. They suffered from the extreme cold in winter, as little extra warmth was provided. Showers were unheated, and in winter water had to be drawn from a frozen pump. One small piece of soap was allowed per month. Clothing included four yards of warm material, but little else, and wooden clogs. Diet consisted chiefly of rice, decreasing in quantity as time went on, some mouldy bread, small amounts of vegetable, with a little potato and sweet potato, and a little dried fish or fish soup. Fruit was rarely seen. Malaria and dysentery were the chief diseases of the camp, and small quantities of aspirin and quinine the only drugs. During three years only one official visit from a Red Cross representative was allowed, in July 1945; twelve individual parcels were distributed and one bulk package. No correspondence was received.

*Singapore Maru from Java.* Late in October 1942 a party of 1,000 prisoners of war was sent on a cargo ship, the *Singapore Maru* from Java and Singapore to Japan. In this party were included patients convalescing from dysentery in Java and Singapore so as to make up the numbers of the draft. On the ship were stocks of European type food, probably from Red Cross stores, but little of this reached the prisoners, as the illiterate Japanese soldiers threw most of it away. A few days out from Singapore an epidemic of dysentery broke out, and fanned by the intense heat in the overcrowded holds, the poor diet, and the completely

inadequate sanitary arrangements, flamed into an outbreak which killed ninety men before the ship reached Japan. A large medical party was sent from the Zentsuji camp to attend to the sick at the docks. There shivering sick men stood on the pier in the bitter cold with no winter clothing, and in the hold others lay sick, dead and dying in masses of filth. Among them completely exhausted was Gunner C. W. Peacock R.A., who for three days had laboured night and day to help the helpless. The dead were removed, and fifty-six men were taken to a disused quarantine station at Shimonoseki and there looked after by a section of the medical party. Medical supplies were most inadequate for dying men for whom only a few flasks of saline could be obtained. Diet for the sick was rice water or gruel, a little rice and later watery soup. Other sections cared for less urgently ill men in Kokoura Army Hospital and in a Y.M.C.A. building, and lesser emergencies from *Singapore Maru* were treated in camps at Nagasaki.

*"C" Force.* "C" Force was a detachment which was assembled at Adam Park working camp on Singapore Island in November 1942 as a working force for Japan. Captain A. K. Barrett and fourteen other ranks formed the medical detachment for the force, which was commanded by Lieut-Colonel A. Robertson. The medical party was not permitted to visit Changi to obtain medical supplies, but some were sent from Changi before they left in December. Later that month the force, which numbered some 600 men, arrived at Nagasaki where they were separated. Three hundred went to Kobe under separate command, and the remainder, chiefly 2/20th Battalion men, with some from the 2/18th and 2/19th Battalions were sent to Naoetsu on the west coast of Honshu. The men were set to work at two factories, making stainless steel and chemicals, and during the summer also unloaded coal barges in intense heat.

About two months after their arrival Robertson died from meningitis, and Captain J. Chisholm took over the command. The winter was exceedingly cold, and snow drifts were up to 16 feet deep. For the first year treatment was described by the men as "most brutal", and during this winter about forty men suffering from malnutrition and avitaminosis died of pneumonia. Working conditions were severe, and throughout the whole period food was poor and inadequate. Only a small proportion of Red Cross supplies arriving in the camp reached the prisoners of war. Sixty deaths occurred in the first thirteen months, but after this, though working conditions remained severe, general treatment improved somewhat, and no more deaths occurred in "C" Force. The personnel in the camp changed considerably. Eight officers were sent to Zentsuji, and in 1943 about thirty Dutch and Javanese and twenty British joined the camp. In January 1945 the camp was filled by the arrival of some 400 Americans. From this time onwards till August 1945 general conditions and treatment by the Japanese deteriorated greatly.

Two of the largest parties sent to Japan were "G" and "J" Forces which left Singapore on 25th April and 15th May 1943.

"G" Force comprised 200 Australians, 300 British and 1,000 Dutch, under the command of Major R. V. Glasgow. By order of the Japanese no medical officers or orderlies joined the party, but four British and one Dutch orderly were sent unofficially, and the A.D.M.S. A.I.F. sent two medical panniers. At a later date Major J. F. Akeroyd and Surgeon-Lieutenant Stening were attached to the force. During the journey of three and a half weeks 1,500 men occupied the holds, each man only having a space of 5 x 2 x 4 feet. Sanitation was inadequate, and there were no facilities for ablutions. Dysentery broke out on the second day; men were segregated in sick bays on deck by permission of the Japanese, and the efforts of a signals officer and six medical orderlies controlled the outbreak. The force went to Taisho sub-camp at Osaka and worked at the Osaka iron works. About April 1945 the bulk of "G" Force transferred to Takefu camp, and after the capitulation, Major Glasgow and Lieutenant L. A. R. Evans became Allied administrators of Takefu.

"J" Force, made up of 600 British and 300 Australian troops, mainly convalescents, left Keppel Harbour in convoy on 15th May 1943. Lieut-Colonel L. J. Byrne commanded the A.I.F. troops, and Major F. J. Murray was S.M.O., with two other medical officers, one A.I.F. and one British, and thirty medical orderlies. The voyage, at a speed of six knots took twenty-three days with halts at Saigon and Formosa, and the ship reached Moji in Japan on 7th June after a narrow escape from being torpedoed. The diet was monotonous, rice, thin soup and some vegetables; a small case of marmite promised at Selarang was never found on the ship. This was unfortunate, as it was wanted for fifty Australians with ocular deficiency disease.

The force had no important illness and after the rituals of glass rod tests and disinfectant spraying by the Japanese they disembarked at Moji. There "J" Force was sub-divided. One party of 150, of whom 50 were Australian, was made up of sick and convalescent, and left for a rest camp near Moji, but made no further contact with the other parts of the force. A party of 250 A.I.F. went by train to Kobe, and a third party of 500 also travelled by train to Hokkaida.

Most of the other forces sent to Japan were made up of men who had been in the working camps of Burma and Thailand.

*From Burma and Thailand.* After "J" Force had left Singapore several other parties were assembled in Thailand during 1944, to be sent as labour forces in Japan where the need for reinforcement of industry was growing. By this time Allied bombing of ports and shipping and areas concerned with war industries was becoming more intense, and attacks on southern Thailand and Indio-China caused some alterations in these plans. Some of the Thailand forces were returned to Singapore Island, and were not further moved. Others were moved to Singapore Island as a preliminary to transfer to Japan. One of these was largely a British force which was concentrated during May and June 1944 at Tamuang, and thence taken to River Valley Road camp. Another party was assembled in



groups of 150 at Tamarkan, two of which were embarked for Japan; 950 men on the captured *President Harrison*, renamed *Kachidoki Maru*, and 600 British and 716 Australian troops on the *Rokyu Maru*, which also carried Brigadier Varley, A.I.F., Group Captain Moore, R.A.F., and Colonel Melton of the American Air Force. These ships bore no evidence of carrying prisoners of war when they sailed in convoy on 4th September 1944. Both vessels were torpedoed off Hainan Island on the 12th/13th September. The *President Harrison* sank in twenty minutes, and the men, who were so crowded that there was only squatting space, had little chance of survival in the oil-covered water.

Various units of the Japanese navy picked up 520 men who were placed on board an oil tanker in Hainan-To Harbour on 15th September. They were suffering from oil burns and the effects of immersion as well as injuries of various kinds, and were virtually helpless. Meanwhile the 1,319 men on the *Rokyu Maru* suffered a similar fate, as this ship was torpedoed early on 12th September and sank twelve hours later. The crowding on the *Rokyu Maru* was even worse than on the other ship, but fortunately none suffered severe injury from the explosions. Destroyers picked up the Japanese survivors, and thus freed more life-boats for troops who were on rafts and wreckage. Among those lost were Brigadier Varley and Major Chalmers. Captain C. R. B. Richards, A.A.M.C., the only officer survivor from *Rokyu Maru*, estimated that by dark some 300-400 men were in life-boats, but it was believed that other boats were sunk by the destroyers, since the only men rescued by a Japanese destroyer during the morning of 14th December were fifty-six British and eighty Australians in four life-boats. The next day this remnant of the force joined the other survivors from the *President Harrison* and tried without other assistance to alleviate their desperate plight. The rescued men were not only exhausted from previous malnutrition, malaria and dysentery, but suffered also from multiple septic sores from immersion and exposure; many had corneal ulceration from irritation by fuel oil. Richards helped to organise parties of the less affected men from the *Rokyu Maru* to care for them. The Japanese refused to put them on shore for further care, and the whole party was transferred to a whaling mother ship which sailed for Japan on 16th September. There was at least more room on this ship, and the same ration was issued as to the Japanese survivors. Eight men died on the voyage. On arrival at Moji 300 British troops were moved to Yokohama, an independent party of 50 Australians was sent to Tokyo, and except 10 seriously ill men left at Moji the remaining 290 were sent to Sakata. On arrival at Sakata the men were still suffering from mental and physical exhaustion, enhanced by the effects of immersion and infection of neglected wounds. They were accommodated in a draughty rice store, and suffered greatly from an exceptionally severe winter, during which a number of them died from pneumonia. Some help was given by the Japanese in providing medical care for the men, particularly by civilian doctors who visited the camp.

## CONDITIONS IN PRISON CAMPS

*Formosa.* The senior officers' party from Singapore went to Japan only in passing. From September 1942 this group was in various camps in Formosa (Taiwan) until in 1944 it was moved to a secret destination, which, after a journey *via* Japan and South Korea, proved to be North Manchuria. Conditions in the camps in Formosa were bad. Diet consisted chiefly of rice, with little protein and small amounts of unpalatable boiled greens, and all the officers lost considerable weight. They were subjected to very oppressive conditions and none were immune from physical violence.

The officers' party remained there till October 1944 when they were transferred to a camp in northern Manchuria after three days and nights in a train *via* South Korea. A group of 250 American officers, 50 British and Australian, and later 50 Dutch officers was accommodated in an old barracks.

*Manchuria.* A camp was established at Mukden in Manchuria on 28th October 1942. In December 1942 the poor conditions were evidenced by the frequency of enteritis, dysentery, pneumonia and beriberi. Malaria was also common.

The Australian officers' party was transferred to the main camp at Mukden in May 1945 where there were some 2,000 other ranks of various nationalities. The general conditions in Mukden were in some ways fair, by comparison with other camps, though there was overcrowding, and the bitter cold of the winter was in itself a hardship. The action of some of the guards, who would violently rouse the officers at night and make them turn out increased the discomfort. Even big coal-burning stoves made little impression on the cold when the outdoor temperature fell to many degrees below freezing point. The American troops who had come direct from the Philippines felt the cold severely. Brennan who was with a group consisting chiefly of Americans with a few British and Australian soldiers found that the burning feet syndrome was particularly common in Manchuria. Dietary supplements of soya bean and baker's yeast benefited all who could obtain them, but there were obvious signs of deficiency states in Mukden, which seemed to be exaggerated by the cold.

*Camps in Japan*

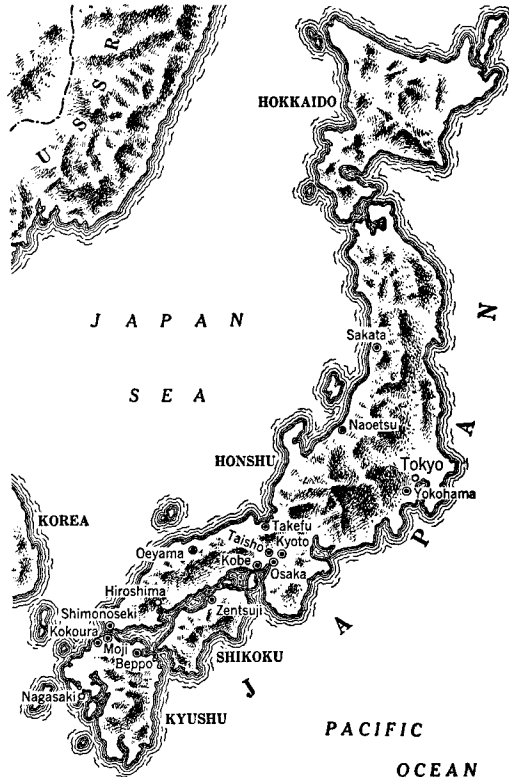
Conditions differed somewhat in various prison camps, in some laborious work imposed hardship, and there was also variation in the rigour of the administration. Some details concerning certain camps illustrate this.

*Zentsuji.* This was the chief prisoner-of-war camp in Japan in the 1942-1943 period. Here most of the officers were sent, and it was a "show camp". Food was more adequate, and could be prepared by the prisoners' own cooks, and some Red Cross supplies were distributed. Observation and investigation of the diet established that there were definite deficiencies of important constituents, though the clinical manifes-

tations were not so evident as in some other camps. It was found too that deficiencies existed with no obvious results, such as those of calcium and vitamin *A*. Extra rations were given to men doing hard work. It was from Zentsuji that emergency medical parties were drawn in November 1942 to render special services to the men on the *Singapore Maru* mentioned above.

*Yokohama Group—Ofuna.* One of the camps near Yokohama to which Australians were taken was Ofuna. Most of the men did not stay

there long as the camp was under naval jurisdiction, and was used purely for interrogation. Most of the prisoners were officers, but this did not save them from violence. Stening on having a difference of opinion with a Japanese medical orderly over a patient, was publicly beaten; so too was the patient. The food in this camp was good, but inadequate in amount; the camp routine was strict and harsh. Breaking of the rules of any kind was frequently punished by physical violence. The trials of interrogation were augmented by beatings and solitary confinement. All medical treatment was done by the Japanese. The physical and mental strains of this camp caused all men to lose weight, deficiency diseases appeared, dysentery of the Flexner type was common. Amenities consisted of Japanese newspapers and conducted walks round the countryside in the summer.



Prisoner-of-war camps, Japan.

*Osaka Area.* The importance of the Osaka area lay in the presence of the iron works at which many prisoners were required to labour.

(a) *Taisho sub-camp.* "G" Force was sent to this camp, about a mile and a half from the iron works.

Rest days were allowed weekly at first, but later only every fourteen days. Some Red Cross parcels arrived at the camp, but in December 1943 a consignment was kept and consumed by the Japanese prison staff. During 1944 three lots of parcels were distributed to the prisoners and

helped them through a hard winter. Since no medical officers were allowed to accompany this force no attention would have been possible had it not been that Private J. G. Carr carried out duties as a medical orderly with ability and courage, despite beatings by the Japanese. A Japanese medical officer visited the camp at rare intervals, and assistance from this quarter rested with a 2nd class private. Few drugs were available, and Carr had to diagnose the men's complaints and treat them chiefly for malnutrition and dysentery. Repeated efforts failed to secure consideration from the Japanese. On 15th October 1943 Major Akeroyd acted as the camp medical officer till March 1944 and at other periods Stening and Lieutenant Indorf also worked there from June 1944. The advent of these officers improved the medical outlook greatly, not only by reason of their technical ability but of their influence and courage.

The food at first was good, but after a change of the Japanese quartermaster it deteriorated though not to a dangerous degree. A midday ration was supplied at the works, and helped to maintain the men's ability to work, though frequent struggles went on to save sick men from being sent to work. As all men were ordered to work in July 1944 Stening introduced occupational therapy and encouraged men to engage in light work much to their benefit. Though a hard camp its conditions improved in the later period of captivity.

(b) *Ichioko*. A temporary hospital was established in the Osaka area originally for survivors of the sinking of *Lisbon Maru* off Shanghai. From July to October 1943 Stening and Akeroyd worked there to relieve Surgeon-Lieutenant C. A. Jackson R.N.V.R. who had worked alone for a year. Accommodation was fair, but vermin abounded. Rations were very meagre, especially for the sick, owing partly to robbing of the patients and hospital staff. Clothing was scanty also. Treatment was bad, and the frequency of physical punishment for trifling matters, and in particular for interceding for patients increased the tension and mental distress. Jackson acted with great tenacity and courage. Surgical treatment was carried out in a Japanese hospital, and was of a low standard. The death rate here was high owing to starvation and neglect by the detaining power.

(c) *Kobe House, Kobe*. In June 1943, 250 A.I.F. troops of "J" Force arrived at Kobe, and joined 400 other prisoners chiefly British, with a few Americans and others. They were housed in brick warehouses under the medical care of Captain C. R. Boyce. A room in an old wooden building was used as a camp hospital. Space and ventilation were insufficient in these quarters, and sanitation primitive. Diet consisted of rice, some vegetables, irregular quantities of meat or fish, and for a few months, bread rolls. Sick were allowed only half rations, but this was circumvented by equal division of the total rations. Red Cross parcels were issued, but little more than one per man per year. Some clothing was issued. The cold was felt intensely in January 1945, when the indoor temperature sometimes did not rise above 0°C. A good deal of respiratory disease occurred, but no pneumonia. On 17th March 1945 Kobe was bombed and burnt; Kobe House escaped, but on 5th June it was destroyed

by incendiaries and the prisoners carrying their stretcher cases and kits, marched to Kawasaki camp in the hills.

(d) *Kawasaki*. Survivors of the bombing of Kobe prisoner-of-war hospital on 5th June 1945 joined those from Kobe House at Kawasaki, a hutted camp in the foothills behind Kobe. The Kobe prisoner-of-war hospital had been established to take the severer medical and surgical cases from the working camps in the area. After doing useful work this hospital suffered severely in the bombing of Kobe: fortunately enough medical supplies were salvaged and taken to Kawasaki by the "J" Force party to help in the treatment of the survivors. Amongst the victims of the second raid which destroyed Kobe in 1945 were patients in a tuberculosis ward which was hit by a petrol bomb.

(e) *Wakinohama*. The remainder of "J" Force, about fifty men, leaving another twenty at Kawasaki, established a camp in a partly burned school on 21st June 1945. Food was very poor until supplies were dropped after the Japanese surrender. The health of this party remained good, and in spite of the natural tension engendered by air raids there were no cases of anxiety neurosis. Indeed Boyce found only ten in "J" Force.

(f) *Takefu*. This camp was in a valley in the hills north-east of Osaka. "G" Force supplied men for heavy labour at the iron works, where they were engaged in tending electric furnaces, crushing fertiliser, and similar heavy tasks; some of them were on night shifts. Food was fairly good early in 1945, with reasonable supplies of fish, though little meat, but became much scarcer later. One good feature of the camp was that the men were not disturbed in the sleeping huts. Otherwise treatment was harsh and punishments were common. Stening gave medical care to the camp till the capitulation. He continued to have medical supplies brought to Takefu, and in spite of a clash with the Japanese, obtained some Red Cross supplies also. He set up a small hospital and had constant struggles to save sick men from being sent to hard work. Injuries occurred frequently in the works, some caused serious physical damage; skin diseases were common, minor grades of diarrhoea and of beriberi were also seen.

*Oeyama*. This camp was on the north coast of Honshu Island near a nickel mine and smelting works. It was well laid out with ventilated huts and a separate hospital, food and clothing stores. Water was adequate in quantity but sometimes polluted, and sanitation was poor. Up to early 1944 the personnel were chiefly British and Canadian, but later there were officers of several nationalities. Before the capitulation Glasgow of "G" Force, was in charge of a working party of forty officers, which included a few Australians. Stening was senior officer and medical officer from October 1943 to June 1944. Food deteriorated during 1944. Red Cross food arrived for Christmas 1943, with unfortunate results on some of the enfeebled digestions; further supplies arrived later, but the system of distribution was most unsatisfactory as it rested with the Japanese medical corporal. In April 1945 Stening made a successful protest and appeal to the commandant, and all supplies from the Red Cross were

handed to him for distribution. Hard work and punishment were standard conditions till May 1944 when Stening was allowed to control discipline and punishment; though it placed great responsibility on him the system worked well. This permitted hygienic and medical control, much needed in this camp where most of the men were in poor condition on arrival. Malnutrition was universal amongst them, so too was diarrhoea which often led to serious results. Dental work was done by a local dentist till December, 1943, when Stening took it over himself, and successfully used extemporised instruments, for temporary and emergency treatment.

*Sakata.* A party of 261 British and 29 Australian troops arrived at Sakata on 3rd October 1944 after the tragic journey in which two transports were torpedoed. Three days later they commenced on coolie type of work; three days' respite were given each month. Issues of clothing were made, as most men had nothing more than shorts or a loin cloth on arrival. The clothes were satisfactory, but, as was general throughout Japan, the boots were not; later only straw slippers could be obtained. Three blankets were allowed in winter, but the men felt the cold severely. The medical officer, Captain Richards, found a more reasonable administration than in Thailand, and Japanese civilian and service doctors tried to give some assistance, though the result was usually slight.

Dysentery was common, and two men died. Amoebic infections and carrier states were discovered also with diagnostic help from British and American medical officers at Shinagawa hospital, where the men in question were successfully treated. Food deficiency diseases were common. Oedema was frequently seen, and as it responded best to vitamin *B* preparations with protein, its cause was apparently twofold; amblyopia was also noted. Neurological changes were usually found in men who were also dehydrated. Several sudden deaths occurred, owing apparently to *shoshin*. Pneumonia appeared in epidemic form during the winter and caused anxiety: there were eight deaths in forty-five attacks, six being recurrences. The overall mortality in Sakata was 6 per cent. General medical conditions were fair in the camp, and essential instruments and medicines were supplied and maintained by the Japanese. One good package of Red Cross medical supplies was received on 1st January 1945. It was a long uphill struggle for the men in this camp to regain reasonable health, but by the time hostilities ceased some headway had been made.

These brief accounts summarise the conditions in most of the camps in Japan to which Australians were sent. Conditions varied from camp to camp, chiefly in regard to the severity of the administration, the hardness of the work, the accommodation and the food. Many Australians experienced a bitter disillusionment on reaching Japan when they found how different was reality from the promises made before they embarked. This disappointment was successfully surmounted, for the men who had suffered hardship in other places had learnt in a school which taught them much in their relations with the Japanese. Some of the later moves of the A.I.F. in Japan brought harder conditions, and as on other fronts, the

termination of the war saved the men from greater physical disability, and even determined their survival.

There was ample evidence that the general population of Japan subsisted on a dietary which is inadequate for Australian people. The occurrence, recurrence and persistence of malnutrition among the A.I.F. troops in Japan is sufficient evidence of the deficiencies in their diet. The same story of constant struggles of medical officers to prevent sick men being exposed to the hazards of toil and bad weather is here repeated. The men often owed much to the courageous protests of the officers. The severity of the winter in Japan, especially the constant cold of the first two months of the year added greatly to the trials of many prisoners.

Boyce in a comprehensive study of "J" Force concluded that survivors emerged with few permanent ill effects. He thought that the A.I.F. though defective in knowledge about matters of health, had better personal hygiene than other forces, possessed greater initiative and adaptability, and responded well to environments involving danger or endurance.

#### NURSES IN CAPTIVITY IN THE NETHERLANDS EAST INDIES

When the fighting on the Malayan peninsula reached a climactic point, and both the probability of a retirement on Singapore Island and its risks became apparent, the question of returning the seriously ill and wounded to Australia caused anxiety. With this also arose the related question of the members of the nursing service. It was tragic that no evacuation by hospital ship was made while there was yet time. Colonel Derham, A.D.M.S. of the 8th Australian Division, between 20th and 25th January 1942 recommended officially to Major-General Gordon Bennett that the nurses should be sent from Singapore by the first possible hospital ship, and repeated this recommendation before 30th January. On each occasion the recommendation, though supported by Colonel Broadbent, A.A. & Q.M.G., was rejected on the grounds that if carried out it would have a bad effect on the civilian morale of Singapore. Another similar appeal was made on 8th February when the divisional headquarters was at Bukit Timah, on Singapore Island. Derham was informed that he was responsible only for divisional units. However he instructed Glyn White to send as many nurses as he could with any casualties leaving Singapore, and on 10th February, six members of the A.A.N.S. embarked on *Wah Sui* with 120 A.I.F. sick and wounded, by order of Brigadier Stringer. Their movements have been described in Chapter 21. Gordon Bennett then stated that the remaining nurses should be embarked as soon as practicable. On 11th February, at two hours' notice fifty-nine nurses were embarked on the *Empire Star*, and Derham made attempts through Malaya Command and the Naval Liaison Officer to send off the other sisters. The following afternoon the remaining sixty-five sisters and physiotherapists sailed on the *Vyner Brooke*. The *Empire Star* was bombed during the early part of the voyage, and the nurses showed great calm under most alarming conditions. They were in the ship's hold all night with practically no food

or water till the next day, when mass attacks were made on the ship by torpedo-bombers and dive-bombers. Great bravery was shown by nurses who in attending wounded during a raid tried to shield them with their bodies at the risk of their own lives. Numbers of the troops on board were wounded. Fortunately the ship made its escape safely.

*The Vyner Brooke party.* The *Vyner Brooke* carried some 300 passengers, mostly women and children, and including many Eurasians, Chinese and Malays. The sisters and physiotherapists were the only service personnel on board. The ship was bombed by Japanese aircraft and was abandoned; it sank in Banka Strait off the south-eastern coast of Sumatra. Two of the nurses were wounded by flying splinters. They all suffered excoriations on the hands and chin while making an emergency exit from the ship, and one was struck on the head by a raft. Some of the passengers who contrived to make their escape clung to life-boats and rafts: others were drowned. Some of the survivors landed later at night on Banka Island; some of the nurses landed on Radji Beach, others were picked up by a small launch after being in the water all night, and landed on a pier, not knowing at the time that Japanese were on the island. Most of them were in the water from periods ranging from sixteen to thirty hours: two were separated from the main party and were in the water for seventy-two hours. There seemed no alternative to surrender, so a ship's officer went to Muntok to get the Japanese, who, regardless of all explanations from the nurses that they belonged to the army, took away the men of the party in two groups.

Meanwhile some of the survivors on the beach had started to build a fire, and were joined by others who walked along the beach, carrying sick and wounded, until they had collected a party which awaited the Japanese. This included twenty-two army sisters and ten to twelve sick. When the Japanese arrived an officer ordered them to separate into three groups, officers, other ranks and nurses. They took the men round the beach and shot them, and then bayoneted the officers at the same spot. Returning to the helpless women and sick men the Japanese ordered the nurses to walk into the sea; two were too ill to walk and had to be assisted by others. When they were knee deep in water the Japanese machine-gunned them, and killed all but one. The survivor, Sister V. Bullwinkel, miraculously escaped serious wounding, and regained consciousness to find herself washed ashore lying on her back, while the Japanese were laughing and running up the beach. After a further period of unconsciousness she found herself on the beach, surrounded by the bodies of the others. For three days she remained in the jungle, and there met a wounded Englishman who had survived bayonetting. They subsisted there about ten days, and obtained food from women in a native village, then gave themselves up and were sent to coolie lines by the Japanese on 28th February.

Of the sixty-five servicewomen on the *Vyner Brooke* eleven were lost at sea, and twenty-two were murdered: only thirty-two survivors reached Muntok. Matron Drummond of the 2/13th A.G.H. was shot by the Japanese, Matron Paschke of the 2/10th A.G.H. was drowned after giving



up her place on a raft to a nurse, and Sister Kinsella of the 2/4th C.C.S. was last seen on a raft.

There were hundreds of internees and prisoners of war on Banka Island. Among those taken to the Customs House at Muntok by the Japanese was the main party of the escaped nurses. They were suffering from great exhaustion, severe sunburn of all exposed parts, and abrasions which were fast becoming infected. That night they spent in the Customs House, and had their first meal for three days, a meagre cup of dirty rice. The next evening they were moved to a cinema where there were wounded men of the navy, and air force, whom they cared for as well as possible till they were sent next day to live in coolie lines. Here the Japanese were most offensive and there was no privacy. They lived there for two weeks, and received only a ration of dirty rice, though they were promised pork stew. Meanwhile Sister Bullwinkel had rejoined the party, and the survivors of the nurses on the *Vyner Brooke* with the other internees, were embarked on an overcrowded ship at Muntok. Thus they arrived at Palembang, where the nurses were housed in huts, but were moved out to other houses where the Japanese proposed to start a "club". They were told to attend on the opening night, and all but three sick nurses went together. They were told that only four were to remain, and if they did not comply with Japanese wishes they would be starved. The four who remained returned safely the next morning, but all refused to enter the club again. After further constraint of four nurses selected from a list, the Japanese told them they would have to work for the Japanese. They replied that nursing was the only work they could do, and preferred starvation. Next day a message was sent to the Governor of Palembang through a Dutch doctor, and the nurses were then transferred to bare overcrowded bungalows in another quarter, with up to thirty women in three rooms, and only cement floor to sleep on, with rice bags and curtains for coverings. There were myriads of mosquitoes, wood was extremely scarce, forcing them to use part of the structure of the house, and sanitation was very primitive.

Their diet was at first rice and vegetables: the rice was mouldy or weevilly, but later it became more meagre, though very minute portions of duck were sometimes added. The nurses had no money and therefore could not buy food at the camp canteen, where beans, sugar and fruit could be obtained. Several of them suffered from neuritic pains in the extremities, and were admitted to hospital with a diagnosis of beriberi.

In January 1943 a high official came from Singapore to see the members of the nursing services. He promised to transmit their names by radio from Singapore, and kept his word. After this small supplies of tea and sugar were issued.

In September 1943 the nurses were removed to a large desolate camp area in Palembang, near a men's camp. Here they lived in huts, and those who were at all able were required to do manual work. A few British, Australian and Dutch nurses worked in the camp hospital. Food included fish, but the distribution and condition of it and other food was

very unsatisfactory. For the next year their diet was gradually curtailed till they received some two ounces of rice a day, with no sweet potato or fruit as previously, only kang kong in small amounts and morsels of cucumber and beans. A number of nurses had typhoid fever; the others had various ailments such as dengue fever, skin complaints and diarrhoea. Inoculations were carried out by the Japanese for dysentery, typhoid and cholera, and also vaccination for smallpox. In this camp the work was quite heavy. Bowing to guards was obligatory, and slight or alleged offences were punished by a period of standing in the hot sun or by face-slapping.

In October 1944 they were returned to Muntok on Banka Island by a small river boat on which 200 women were herded together with barely sitting space. Though diarrhoea was prevalent a bucket was the only sanitary arrangement provided. After twenty-four hours in fierce heat, they were huddled into a hulk, handling their own baggage, and finally landed, with swollen legs, weak and exhausted. For a couple of weeks they were allowed a slightly better ration by a lenient commandant. Trading by money or barter was the only way to get food, but the Australians had no money, though some borrowed from internees. From November 1944 to April 1945 their starvation ration depended for its protein on five sardines twice a week. The members of the A.A.N.S. joined the hospital staff there and lived in bamboo and attap huts. This camp was in a highly malarious area, and most of the nurses had frequent fevers and shivers, undoubtedly due to malaria. At this time their weight decreased still further, and signs of deficiency increased. Incoordination of the limbs was noticeable, and nocturnal diuresis was frequent. Quinine could only be obtained occasionally in small amounts. A limited water supply was obtained from wells, and washing was difficult except in the rain.

Numbers of people died in this camp at this time, and included in these were four Australian nurses during the period February-March 1945. The immediate causes of death were said to be general malnutrition, beriberi, and malaria. An epidemic of virulent fever known as "Banka fever" broke out here, and numbers of deaths occurred. Food was scarce and there was a black market through the guards.

In April 1945 they were transferred back to Sumatra to a camp at Lubuck Linggau after another appalling journey during which several people died. They were housed in verminous old attap buildings which leaked causing acute discomfort in the rainy season, particularly as overcrowding was extreme. The dietary contained more vegetables, which they supplemented by growing kang kong, spinach and sweet potatoes, but their disturbed digestion could not tolerate this food, and they suffered from discomfort and diarrhoea. By this time most of the nurses had lost two to three stone in weight. The rice diet still produced nocturnal diuresis and diarrhoea which interfered with nightly rest. Four more of the sisters died between April and August 1945; they were buried by their own colleagues.

The women were expected to work hard on maintenance of the camp, and their health steadily deteriorated. Drugs were scarce, in fact non-existent except for quinine and this too was unobtainable for weeks, only some quinine bark in its stead.

On 23rd August 1945 the native guards were sent away and the next day the commandant told them of the peace. Food and medicines became plentiful; extra food was dropped from the air. Parachutists arrived on the 24th and took over the camp till a fortnight later, when English and Australian parachutists came and finally on 16th September train and plane took them to Singapore.

The news of the peace came just in time for some of the nurses, who were very weak. When the male internees from a neighbouring camp were allowed in, they helped the nurses and other women to get extra food by shooting wild pigs. During internment the nurses had very little medical care. On Banka Island they were helped considerably by a Dutch doctor who was afterwards executed by the Japanese.

On admission to hospital in Singapore the nurses were emaciated but, with two exceptions, not oedematous. There seemed no doubt that they had suffered from thiamin deficiency, but there was no evidence of significant cardiac involvement. No optic atrophy was observed. Under a regime of controlled intake with ample protein and vitamin they made good recoveries and found that physiotherapy greatly benefited their muscles, which showed extensive wasting. Symptomatic amenorrhoea was corrected as the physical state responded to a liberal diet. Haemoglobin values were low, but only a few were below 10 grammes. A few also had low plasma protein levels in the blood. When they left Singapore there seemed no reason to doubt that they would make a complete recovery.

Of the sixty-five nurses and physiotherapists on the *Vyner Brooke* only twenty-four survived to return to Australia after three and a half years of captivity. Thirty-three were lost at sea or massacred on Radji Beach, and eight died from starvation or disease.