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Transitional Communities and Social Reconnection

The Civil Resettlement of British Prisoners of War*

*The Prisoner of War Experience and
the Problem of Repatriation*

THE BACKGROUND OF THE SCHEME

In the early years of World War II the need of repatriated British Prisoners of War (PsOW) for assistance in readjusting was not urgently manifest, but, as more men returned after escape or were repatriated on medical grounds, the rate of sickness and disciplinary offenses caused anxiety. Officially, PsOW were regarded both as “casualties” and as men awaiting trial by court of inquiry to re-establish their military rights. Though this attitude was largely historical and was weakened by experience of returned men, ambivalence, shown by simultaneous idealizing and scapegoating, remained.

Through the Army the POW returned to his own society. It was the Army that possessed special understanding of his difficulties, just as it had been responsible for his troubles. Among institutions in his home society it was of the Army that he was most suspicious, yet it was on the Army that he was most dependent. Despite a certain opposition to differential treatment, among both military and civilian groups, and also among PsOW themselves (many of whom were determined to deny the existence of their difficulties), it was decided at Cabinet level that the repatriate needed not only special training to

*No comprehensive account of the Civil Resettlement Scheme developed in the British Army during 1945–1946 had been available prior to the publication in G.E. Swanson, T.E. Newcomb and E.L. Hartley (Editors), *Readings in Social Psychology*, 1952, of this paper prepared by the second author from existing manuscripts.

refit him for military duty, but that the Army should itself undertake the first steps toward re-equipping him for civilian life.

This policy sanctioned the development of a scheme based on technical studies. At the beginning of 1945 a pilot Civil Resettlement Unit (CRU) was formed. By the end of that year (PsOW having been repatriated from all theaters of war), there were twenty CRUs operating in different parts of the United Kingdom, each capable of dealing with some 240 men at any one time. These units acted as bridges between the Army and civilian life. They were designed as *transitional communities* to permit change of attitudes which retarded re-assumption by the repatriate of a fully participant role in civilian life.

THE NATURE OF DESOCIALIZATION

Unsettling on repatriation could not be understood solely as a disturbance in the repatriate himself. His family was also affected. On the larger social scale this was reflected in the relations generally between those returning from the services and those who had remained in civilian life. Resettlement was a two-way process, calling for emotional readjustment by all members of the re-formed family and the wider community.

From this wider point of view unsettling may be regarded as a process of *desocialization*. Desocialization can be defined only in relation to a general concept of society, since it appears differentially related to various components in the total social order, such as *social structure*, *social roles*, *social relationships* and *culture*.

SOCIAL STRUCTURE

This term covers social forms (economic, kinship, governmental, etc.) which together act as a more or less stable and organized framework within which the basic needs of the individual may be met. Structure is external to the individual—something felt as “out there.” The effects of structural breakdown on the individual cannot, however, be traced without additional concepts, for considerable structural breakdown may often be survived with little desocialization, while desocialization may occur apart from structural breakdown.

SOCIAL ROLES

Structure by itself gives no information on the position taken up by the individual within it. A number of such positions are possible, referred to as social roles. While structure is there, it is up to the individual himself whether

he takes an available role. Through failure to take roles he goes out of the social framework in certain directions. *Failure to take roles* may be proposed as one criterion of desocialization.

SOCIAL RELATIONSHIPS

Once roles are taken, social relationships begin to be made. Their course, however, is not determined by the roles which are a condition of their beginning. The structure of his society may initially determine whether or not an individual may take a certain role, but other factors enter with respect to his ability to handle and make good the widening and changing series of relationships, variously personalized and intimate, in which he is involved if his participation and satisfaction are to continue. *Failure to sustain social relationships* provides a second criterion of desocialization.

CULTURE

Culture represents the means, however imperfect, at the disposal of the individual for handling his relationships. On it he depends for making his way among, and with, other members and groups belonging to his society. The central thesis of this paper is that *it is the internal assimilation of culture that is primarily disturbed in the process of desocialization*. This gives the third criterion to which the other two may be related.

An inquiry into desocialization, therefore, implies an assessment of the level at which an individual possesses internal assimilation of his culture. So far as he has reached a state of cultural dispossession, the breaking of relationships and the refusal of roles have serious consequences, for he now lacks the resources to make the restorations necessary and the resilience to resume abandoned activities. The process will now be traced which induced desocialization in repatriated PsOW, despite the degree of structural equilibrium in post-war Britain.

THE COURSE OF DESOCIALIZATION IN THE REPATRIATE AND HIS FAMILY

At first, while serving in his home country, the soldier carried over into the Army a good deal of his former civilian being. Nevertheless, it was a common observation by servicemen that they soon found it difficult to take an effective part in their family affairs.

When the soldier was drafted overseas he had to make a second adjustment.

As he neared the combat zone, the in-group solidarity of his unit insulated him from his old life. Whether or not a man had traumatic battle experiences, emotional disturbances were commonly associated with capture. The feeling of guilt over "allowing" oneself to be taken and of rejection from the fact that the Army had "allowed" it made capture a painful experience. Life in a POW camp entailed a third adjustment—to the condition of being rendered useless, though something of the soldier's role could be maintained by engaging in a morale battle with the prison authorities. Men learned to lead a double life of surface compliance and concealed activity.

On return, after a period of leave, most repatriates spent some months in the Army before release. This had a protective effect and the full impact of desocialization was only felt when they re-entered civilian life. On demobilization men found themselves lost and out of place, separated by a gulf of experience impossible to share and by a sense of guilt related in part, and however irrationally, to the fact of having left home. When a husband or father goes away, he takes not only himself but those activities that have become part and parcel of everyday life. In his family, readjustment takes place toward the altered situation. When the absent member returns, a disequilibrium is caused comparable with that created by his departure. Outside the family, his associates had similar difficulty in accepting the repatriate into the milieu they had established without him. Such experiences led many men to feel that their rejection had been callously prepared.

Often, however, the gain in maturity was very great. One difficulty of many was how to use their maturity in a society they felt they had outgrown. The consequent isolation was as painful as the isolation of captivity.

Stress tended to pile up between the second and fourth months. If this period could be weathered, a man was set toward resocialization. If it went badly, satisfactory adjustment often posed formidable problems. The policy of the CRU was to reach men at a point when they had begun to feel the force of their difficulties—and so be willing to seek help—but before they were overtaken by the crisis of their desocialization.

THE SEARCH FOR SANCTION OF POW EXPERIENCE

After the initial shock of capture many men regressed to quasi-psychotic states, but the majority gradually became aware of the existence and power of various supranational organizations governed by the Geneva Convention on PsOW, and the International Red Cross. They also learned the extent to which their survival as individuals depended on their success as a group in keeping some kind of society alive in their midst. The European prison camp situation may be summarized as follows:

- Separation of officers and other ranks (noncommissioned officers and privates) under the Geneva Convention created the need for an alternative leadership from below. This centered in an elected “man of confidence” who represented the group to the Protecting Power.
- The removal of material weapons meant that alternative weapons had to be forged with cultural resources, since the fight had to go on and the degree of capture held as low as possible.
- The two points above had effects which reinforced each other so that a strong democratic culture developed with the double function of preserving the group and waging war.
- The prison camp emerged as a society of “creative casualties” in whom a deep revaluation and skilled utilization of certain components in their culture had occurred; but in whom, because of the severity of the trauma and the limitations of the situation, a partial mastery of their experience was alone possible.
- The democratic society of prison camps was largely self-sanctioning. It recognized no societal “parent,” except the para-medical maternal authority of the Geneva Convention and the International Red Cross.

The repatriate was in a state which led him to search for consistent sanction for the values of his prison-camp experience in the culture of the controlling societal authorities of his home society. If he did not find such sanction there remained such painful reactions as:

- Regression once more to the isolated existence of early captivity. A man would live as a passive prisoner of his own society. Men were found who had not left their houses for weeks.
- Renewal of his cultural war in a particularly embittered form—against his own society, now regarded as the enemy. He would tend to align himself with malcontent minorities.
- Alternatively, he might seek revenge by taking up a role based on unrecognized identification with his late captors, whom he would outdo in authoritarianism (and even brutality).
- He could attempt to escape from his problem by emigration.
- He might be forced to accept the role of a psychiatric casualty.

All these reactions must be thought of as techniques of living, not so much mutually exclusive as coexisting or alternating in any individual man. The first four are based on aggression. It is only in the last that there remains any conviction of success in the search for sanction from the home society. But the repatriate was an unlikely person to declare himself as a psychiatric patient. Yet his own illness remained a fact whose denial whether by himself or others had

serious consequences. Early follow-up studies showed that only a minority of repatriation states were self-adjusting. A special scheme was necessary but had to be built up in a wider para-medical setting.

The Character of the Transitional Community

PRINCIPLES AND POLICY

To meet the situation described it was necessary to secure acceptance of the principle that participation cannot be imposed. Military authority had either to take no action or to sanction the development of a permissive community within the Army. This meant offering a voluntary scheme and reversing a number of rules and regulations.

By conferring the right to volunteer for a CRU the Army gave evidence of its willingness to accept the negative feelings of the repatriate (who could reject the offer), and also of its evaluation of his worth and its trust in him (by risking a considerable investment in a scheme which only a few might utilize). By abrogating its authority over him it recognized its responsibility toward him. The method of gaining his trust was to take *informed social action*.

To volunteer implied for the repatriate the acceptance of a role which opened up relationships in a community whose culture was fashioned in terms of his own values and whose existence was itself proof of their compatibility with the home society. His shattered sense of security, mistrust, and need for consistency made him a "connoisseur in sincerity" and adept at looking for snags. He could accept only a community where acceptance of his values was consistent.

The production of this self-consistent participant community did not in the first place depend on action taken within the Civil Resettlement organization, but on decisions made—and maintained—by the controlling War Office branches of all sections of the Army, and also by civil ministries and organizations, both industrial and social. It was from widespread discussions on implementing these decisions that the intergroup relations between the repatriate and the home community were clarified.

THE DEVELOPMENT OF THE SCHEME

It was postulated that if the scheme was planned with the participation of repatriates no difficulty would arise in obtaining volunteers. Over-all, 40,000 to 50,000 men attended CRUs. Contact with as many more was made latterly, on a day basis, through the Extension Scheme.

A survey of the regional distribution of the homes of PsOW permitted the scheme to develop so that men could attend a CRU in their own part of the

country, units being located on the boundaries of industrial areas to provide contact with social and industrial life. The staff had to bear the stress of an unfamiliar para-military and para-medical community and were specially selected. In training, they received, first, opportunities of contact with repatriates, then group discussions on repatriation problems and finally a brief apprenticeship at a working unit. The pilot unit was administered under medical and social-science auspices. In working units, administrative control reverted to regimental authorities advised by psychiatrists and psychologists. New units budded off from old.

The initial task of a new CRU was to make contact with the Ministry of Labour, through which groups of guests representing various industries and trades were invited to the empty unit, an explanation of the scheme made and suggestions received as to how repatriates could make informal contact with those on the job. A developed CRU was in touch with 200 to 400 firms and social institutions willing to allow visits by repatriates.

THE STAFF AND ORGANIZATION OF A CRU

The officer staff consisted of a commanding officer, second-in-command and nine officers for casework—four “syndicate” officers and five specialists. A syndicate was a man’s living group and each syndicate officer was parent to 60 men—four sections of 15 from successive weekly intakes of 60 to the whole CRU. This staggered intake allowed each syndicate to contain old as well as new members.

Specialists ran “practices.” All attendances were voluntary. With a monthly turnover of over 200, units with a disproportionate load of disabled required two medical officers. Two units had a resident psychiatrist; in others he was part time. A vocational officer and sergeants helped men to evaluate, on a reality basis, long-cherished vocational plans and fantasies. A Ministry of Labour officer facilitated practical openings. The technical officer provided, through workshops, an opportunity to rebuild confidence. The women social workers—known as Civil Liaison Officers—were psychiatric social workers. Matrimonial problems made up two thirds of social case work in returned service people and were abundant at CRUs.

Clerical and domestic arrangements were standard for a static military establishment, but the scale of accommodation was that provided for the ATS (the women’s branch of the Army). It included, for the whole unit, beds and sheets as opposed to boards and blankets. The proportion of permanent staff was high—the seriousness of resettlement was indicated by allowing repatriates to be fully occupied in learning about civil life. One hundred of the other

rank staff (NCOs and privates) of 140 were women (ATS) who enabled the CRU to develop the mores of a mixed community.

Men with experience of starvation placed a high value on food and the conditions of eating. Meals were served at pleasantly arranged tables by ATS, midday dinner being taken in a common dining room by all ranks and by repatriates and staff alike. This event symbolized CRU "democracy," while common sharing in the scale of accommodation eliminated trouble between repatriates and other rank staff and assisted them to discover a common identity as potential civilians.

THE RESETTLEMENT PROGRAM

Length of stay averaged four to five weeks. Except for terminal interviews, a man was not ordered to see anyone. He passed through four phases: learning about and testing out the unit; establishing himself within it; orienting himself to the surrounding industrial and social community; making and reality-testing personal plans. These phases may be summarized as neutralization of the suspicion of authority; return to a less regressed social attitude with role-taking in the safety of the unit and assimilation of its culture; a more general movement toward a reconnected relationship with the home society; the structuring of personal goals. The program was sequenced accordingly—reception phase, settling-in phase, orientation phase, planning phase—and the balance of spontaneity and control altered to throw the repatriate more and more onto himself. The gradient was steep so that the anxieties aroused could be dealt with during the program month that made up the standard CRU course. In content, scope, sequence and duration this standard was intended to act as an over-all interpretation of the nature and dimensions of the resettlement task and to indicate a norm in terms of which men could gauge their progress. (Provision was made for lengthening stay up to three months.)

Special care was necessary over the reception phase (Thursday afternoon to Saturday midday). The socialized adult usually belongs to a family group, a work group and an informal group of leisure-time friends. It was postulated that if repatriates could be inducted—as rapidly as possible—into prototypes of these three groups, *on a basis of personal choice*, they would be securely positioned in the unit.

On the first day the unit took little initiative while giving the repatriate full scope to find out about it. After an arrival meal, men were conducted to a dormitory to choose their beds, then left free to hear what those already there thought. On the second day the unit took more initiative. After an introductory talk by the commanding officer, the 60 new arrivals were taken around the unit

in informal groups, briefly introduced to key resettlement staff, then invited to redivide themselves, for syndicate allocation, into four sections of 15. A man at once experienced the value of his syndicate in a group discussion with his syndicate officer, with whom he also had a personal interview. During the afternoon he attended a first workshop session. By the evening he had usually found friends. On the Saturday morning he selected civilian clothes, which he wore home, weekends being spent at home to avoid damage to new social roots in the home environment and to keep alive questions related to future planning.

During their first full week (apart from a visit to an employment exchange and to one factory) men were occupied inside the unit, attending workshops and informational discussions. They took part in a social life which included dances, attended by civilians, particularly girls from the neighborhood, who did much to diminish exaggerated fears of women. By the second week they were visiting factories, shops, training centers and social organizations in small self-chosen groups. During the third and fourth weeks assignments became more individual. Men undertook job rehearsals, spending several days acquiring the feel of a job—without the burden of responsibility. Personal problems were discussed with the specialist staff, vocational anxieties usually being brought out before those concerned with family relations. Many of these latter anxieties first appeared in the guise of job problems. As CRUs matured they passed generally from being employment dominant to becoming family dominant, and wives and families were more fully brought into activities and discussions.

THE INTERACTION OF ACTIVITIES AND DISCUSSION

The many-sided activities and the frequent contact with civil life stimulated the need to talk, while the syndicate and other groups provided the occasion. In this way the activities of individuals led to a therapeutic discussion of their significance, and the process of acting out or testing out plans was linked to that of evaluating and assimilating their significance—the process of working through. The raised insight and changed feelings led to further activity—but at a higher social level, e.g., group projects through which the repatriates attempted to express altruistic needs often freed up as they resolved individual problems. A kind of circulation came into existence—from action to understanding and back again to action—which gathered in spontaneity and extent as the community matured.

This circulation made it easier than might be expected to impart CRU technique to a wide variety of people. Social sharing and diffusion of insights are implicit in any group technique, for different kinds of people come into the group. Group techniques represent a change in the means of production of

insight, establishing an exchange that permits circulation in an open and public, as distinct from a closed and professional, market. The simpler discussions of the syndicate officer and the more sophisticated discussions of the vocational officer or social worker were events in the same series to which the group session of the psychiatrist belonged. The power of the series was raised as various specialists learned to work together as a team (which had its own discussions).

REDUCING THE "FEAR OF FREEDOM"

Central were difficulties over authority. The development of a morale-based self-discipline was the basic prescription of treatment. Absence of formal discipline caused severe anxiety both to PsOW and to unit staff. Of special importance were the interviews and discussions through which this fear of freedom was reduced.

Some weeks after the first CRU opened, a group of 15 men refused to cooperate, using the CRU as an easy-going hotel. Two or three were flagrantly antisocial and in trouble with the civilian population and the police. All exhibited psychosomatic symptoms and depressive trends. The administrative staff had come to the end of their tether; expulsion was their only solution. The presence of the psychiatrist also created anxiety. In consequence, he and his patients were isolated in a consulting room in a remote part of the building. The remainder of the community felt that they had rid themselves of a doubly dangerous group, and that the delinquents could be conveniently removed by the psychiatrist, via a hospital or, if they refused treatment, by his taking the responsibility of recommending termination of their stay.

For the CRU so to rid itself of its troubles would have been fatal. The first duty of the psychiatrist was toward the staff, his first efforts to impress them with the necessity to keep these disturbing elements within the CRU. Manipulation of the neurotic "attack" on the community was outside the scope of the executive. His second function was to tackle and, if possible, to canalize the neurotic force. This was undertaken by group discussions.

The topic thrown up in these discussions was the failure of the unit to provide discipline; without the discipline of authority there could be no punishment, and without punishment nobody knew where he was. Could they go on behaving in the way they were doing? If they did, would not authority take action? Authority in the person of the psychiatrist assured them that, so far as the CRU was concerned, no action would be taken; but that outside bodies, such as the War Office or the civil authorities, were less inclined to such tolerance, and their behavior might so seriously reflect on the scheme as to bring it to a close. Also there were 385 other people in the CRU who would

assert their authority should they be affected adversely. They were up against not the authority of the executive but the wishes of the CRU as a group. A general meeting would be held and a vote taken on their conduct. This approach proved effective. After one memorable and stormy meeting in which this whole situation was made quite clear there was silence. Then, one by one, each gave an assurance that no further trouble would be experienced.

Needless to say, what was going on between the psychiatrist and the neurotic group was being closely watched by the rest of the CRU. The outcome was to decide the future pattern of unit government. Should the neurotic triumph, chaos would result with subsequent dissolution of the resettlement unit; if the neurotic was expelled, authoritarianism would supplant the democratic atmosphere essential to the scheme. The recognition by the neurotic element of the effect they were producing on the rest solved the immediate problem. Their altered attitude became reflected in the unit as a whole, which was now not only tolerant of the "bad boys" but also took up a rather protective attitude, removing them from public places if drunk and so shielding them and the unit from the outside world.

Practically no further difficulty was experienced in disciplinary matters after this showdown; nor did one arise later with similar intensity at any other CRU subsequently opened. The solution of this single psychiatric event influenced the growth of the whole scheme. The psychiatrist emerged from his confinement into the general life of the community. The increasing rate of the demand for his help was shown by the following figures: during the first month about 5 percent repatriates were seen, all referred through a medical or other officer; whereas in the third and fourth months some 60 percent were spontaneously seeking advice.

A Follow-Up Appraisal

METHOD

In one area, chosen in accordance with carefully determined criteria, comparable samples of 50 repatriated PsOW who had, and 100 who had not, been to CRUs were studied in relation to a control group of 40 families from the same area. These represented the civilian norm at the socio-economic levels at which the repatriated groups were settling down some months after demobilization.

The investigator saw most men several times in different settings: (1) *Alone*. Covering at least an hour, often much longer. (2) *At work*. The managements of several factories provided facilities for men to be seen in working hours, a type of contact most effective when it combined a private interview with the man with a subsequent more general discussion involving management, staff, fel-

low workers and others. (3) *With his family*. These contacts frequently took place over a cup of tea, and were invaluable in demonstrating the whole family situation, including the wife's reactions to the husband's condition. (4) *In group discussion*. The investigator often had other discussions in addition to those listed above. These were sometimes arranged but sometimes grew spontaneously out of meetings in the home or the works. Family members, fellow workers, other PsOW and neighbors took part.

The role adopted by the investigator was that of a supplementary extension officer of the CRU organization—that is, an officer concerned with aftercare, and with extending CRU facilities to non-volunteers, or to men who had canceled their applications. His initial approach—that he had come to see if there was anything he could do—quickly dispelled the apprehension of men or their wives at meeting an officer who obviously knew something about them. This view was supported by the greater difficulty experienced in establishing relations with the control group.

Actual elicitation of information was through observation and discussion, rather than through direct questioning. With the CRU samples, one stage was an explanation of the purpose of follow-up, which involved a modification of the investigator's role as initially described. This was important for two reasons. First, in his follow-up role, he moved out of the part of a counselor who might raise dependency hopes which could not be fulfilled. Second, there was a therapeutic gain in giving men, through the assistance they provided by their information, a chance to participate still further in an experiment which had helped them.

All men were seen at approximately the same juncture of their lives as reestablished civilians.

THE DEVELOPMENT OF CRITERIA FOR NORMS OF SOCIAL PARTICIPATION

Sherif (1936) writes of social norms as follows: "Social norms arise from actual life situations as a consequence of the contact of people with one another. . . . But once formed, they tend to persist. Many times they outlive their usefulness." In the samples under discussion norms had rather neutral prestige value and were described as "all right"; "just ordinary"; "nothing special"; "quite respectable."

Besides the norms, certain forms of deviant behavior were observed. In the first, roles are rejected: the husband deserts his wife; or the worker leaves his job and makes no effort to get a new one. In terms of the norm, this behavior lacks prestige. The man concerned is judged as either "sick" or "wicked."

A second type of deviation occurs when a man accepts the roles, but cannot use the culture to manage the relationship: he gives his wife housekeeping money, but never goes out with her or helps her in the home; he works, but

without loyalty or friendliness to employers and fellow workers. Such a role has great persistence, but behavior of this kind is inadequate to any emergency in which flexibility is required. Sometimes judgments about these men are more harsh than about those in the first category, since an element of pity often enters into references to a man whose domestic or social life is completely disintegrating.

A third type of deviation was *positively* assessed and appears to represent congruence of individual development with the realities of social situations. In this third deviation the patterns are the good husband and neighbor; the man who has a certain capacity for leadership; the men who are loyal employees, but prepared to take positive action if their principles are outraged. In such people the approach to situations is flexible, and less governed by stereotypes. This type of deviance, above the norm, appears to represent the cultural aspiration level of the norm itself.

In the norm, certain features of behavior imply anxiety, typified by the erection of barriers which restrict the mobility of human relationships. Many of these barriers take the form of culture stereotypes: that men do not push the pram, that they do not take their wives to football matches. But there is no derogatory evaluation of those who do.

If the norm and the three deviations are scaled by standards of social participation, they occur in the following ascending order: first deviation (roles rejected); second deviation (roles accepted, inability to use culture); norm; third deviation (behavior at cultural aspiration level of norm). These findings are consistent with the concept of desocialization. There follows an analysis of behavior which illustrates the application of this scale. The sequence of these illustrations corresponds with the arrangement of the different regions of the life space of the individual. These are ordered to radiate out from family relationships through neighborhood and work groups to the more abstract relationships with authority.

For convenience, the two infranorm deviants, the norm and the supranorm deviant are named grades on a four-point scale, and appear in the later tabulations as *Grade 1* (first infranorm deviant); *Grade 2* (second infranorm deviant); *Grade 3* (norm); and *Grade 4* (supranorm deviant). In some of the statistical tables these grades are used as scores and treated as equal class intervals.

FINDINGS

1. The first step was to determine whether the criteria of social participation could be regarded as valid indications of the degree of resettlement. Two other criteria were available. The first may be called a psychiatric criterion—con-