

I
FOOD AND HEALTH

§ (i)
BRITAIN AND DÜSSELDORF

To the Editor of The Times.

Sir,—Here in this ruined city, where we as conquerors are presumably responsible for at any rate the bare necessities of the population, it is impossible to read Mr. Strachey's Dundee speech on the food position in England without an almost unbearable sense of shame. Even after rationing, says the Minister, we are eating a little more flour as bread and cakes than before the war, 98 per cent. as much meat, and nearly 50 per cent. more fish.

Though, say, 80 per cent. of the town population in our zone of Germany supplements the official ration by a few hundred **calories—through** the black market, which is keeping people alive, or from other sources—the condition of millions is indescribably wretched. One expert whose job it is to make an assessment of such things estimates that in the city of Hamburg some 100,000 people are suffering from hunger oedema or the equivalent; and according to figures given to me by the German public health authorities 13,000 people in Regierungsbezirk Düsseldorf were being treated for this illness in hospitals or by private practitioners during the month of September. I saw at a hospital in Hamburg a starving man who had been brought in a few hours before: his death-rattle was beginning. I had a photograph of him taken—with me by his side, to save myself from the charge of exaggeration. I saw another

man in the same hospital whose swollen scrotum reached a third of the way to the floor. I have a photograph of him also.*

I have just returned from visiting a "bunker"—a huge air-raid shelter, without daylight or air, where 800 children get their schooling (Plates 1-3). In one class of 41 children, 23 had had no breakfast, and nothing whatever to eat until half-past two, when they had had the school meal of half a litre of soup, without bread. Exceptionally it was pea soup to-day; it is usually "biscuit soup". Seven of these children had the ugly skin-blemishes that are mixed up in some way with malnutrition; all were white and pasty. Their gaping "shoes"—these, too, have been photographed—mean the end of what little health they have when the wet weather comes.

Particularly horrible is the growth of tuberculosis. It is difficult to arrive at exact figures owing to imperfect systems of notification in some places. But in Hamburg it is certain that active lung tuberculosis is at least five times as prevalent as before the war, and it may even be ten times as prevalent. The number of active cases registered in that city at the end of 1944 was 9,886; at the end of 1945, 12,013; and on July 1st 1946, 16,808. As only cases in hospitals and dispensaries are registered, these figures indicate the appalling growth of the disease, but not, of course, the real total of suffering persons.

There are two main reasons for this increase in tuberculosis—malnutrition and overcrowding. In the British zone 12,000 people with open, infectious tuberculosis live in the same room with others—sometimes in the same bed

* I have decided at the last minute, after a great deal of hesitation, to suppress the photographs of these two cases, except that of the second man's face (Plate 4). I have similarly suppressed all other photographs of really bad cases of œdema where the water is still present, as I cannot bear to perpetuate a visible record of these horrors. (In hunger œdema the body swells, sometimes abominably, with water.) I have retained a photograph of a less terrible case of emaciation, and one or two of œdema where the water has gone.

with children. I shall make no attempt to describe housing conditions—your readers would not believe me. But I shall show my photographs when I return to England.

Apart from better housing, it is, above all, more meat that is required if an increasingly rapid growth of tuberculosis is to be prevented. Must we eat 98 per cent. of the meat we ate in England before the war, when we are at the same time eating more bread and nearly 50 per cent. more fish? Even a very small cut would make such a difference to the 23,000,000 Germans in our charge. And I am told by experts that if we make the "sacrifice", the amount so saved could come to the Germans—there would be no difficulty with the International Emergency Food Council.

The people in the cellars and bunkers of ruined Germany, and particularly the women and children, are for the most part wonderfully brave, and "break down" only when they are given a bar of chocolate, or whatever it may be, by a shamefaced visitor. If Mr. Attlee would only come out here and see for himself, it is inconceivable that he would maintain the ban on private food parcels.

Yours, &c.,

VICTOR GOLLANCZ.

Düsseldorf, Oct. 30.

§ (ii)

HUNGER ŒDEMA

[My letter to *The Times* of October 30th produced a reply from some distinguished Unrra consultants. They challenged my figures, not explicitly but by implication, but seemed most concerned to emphasise the claims of Unrra countries.]

To the Editor of The Times.

Sir,—No one could have more sympathy than I with the motive of Dr. Meiklejohn and his colleagues, which is, I am sure, not to minimize the plight of the Germans but

to avert disaster from eastern Europe, now so gravely menaced by the disgraceful decision to close down Unrra. While, however, the motive is admirable, the method seems to me less satisfactory. Figures are quoted with no apparent understanding of their nature and meaning. During the six weeks of my visit to the British zone, on the other hand, I have laboriously checked and checked again every fact and figure given to me both by British and German authorities, and have refrained from putting pen to paper until I have satisfied myself that I have correctly appreciated the position. On the question of tuberculosis, for instance, I have spent many days "digging down" and attempting to discover what may be the truth underlying the many conflicting views presented to me. My statement that "active lung tuberculosis in Hamburg is at least five times as prevalent as before the war" is, I am persuaded, correct.

Space will permit me to deal with only one point in detail—namely, that of hunger œdema. "Certainly the situation [in Hamburg] must have deteriorated in a most alarming fashion since the end of July," write your correspondents, "when the Control Commission reported 1,189 cases of hunger œdema in the city." But these were hospitalized cases. You must first add the non-hospitalized cases; and the relation of the one figure to the other, which no doubt varies from place to place, may be gauged from the fact that in certain districts of the North Rhine province, for the period from July 1 to October 19, there were 48 known but non-hospitalized cases for every one hospitalized case. And when you have done that you must further add the cases that come to no one's attention, but can be estimated from surveys.

It is not a question of old ladies with varicose veins. I have personally seen only two women with hunger œdema, though I have seen many who are painfully emaciated. Some indication of the true position is pro-

vided by a survey recently made (under British auspices) of the nutritional state of about 1,000 employees of the *Reichspost Direktion*, Hamburg. In males of all ages the incidence of hunger œdema was found to be no less than 17 per cent., and in females of all ages 9 per cent. These are horrifying figures. "This is a clinical assessment," says the report, "in which there was always a higher incidence among persons examined in the afternoons, and this regardless of whether or not theirs was a sedentary job. The incidence of this cardinal sign of malnutrition must therefore be even higher in fact. Further, it should be borne in mind that among large numbers of persons in the same general state of under-nourishment necessitating hospitalization little more than half do manifest this sign." It was to the latter fact that I referred when I wrote "hunger œdema or its equivalent". No less than 52 per cent. of the males and 34 per cent. of the females in the same group showed "marked loss of flesh", and 24 per cent. of the males and 22 per cent. of the females "looked positively ill".

Finally, your correspondents question the figure of 13,000 officially given by German public health authorities as the number of people in *Regierungsbezirk* Düsseldorf being treated for hunger œdema in hospitals or privately during September. This scepticism is not shared, apparently, by responsible British officials on the spot. "Recent surveys by Public Health in the *Regierungsbezirk* Düsseldorf," reported the Colonel commanding R.B. Düsseldorf to the Deputy Regional Commissioner in June, "showed that the number of hospitalized cases of people suffering from hunger œdema was comparatively low, the reason being shortage of beds. The number of non-hospitalized cases is high—in the region of 25,000."

Allow me to add a word in conclusion. The most horrible of my experiences has been a visit to the camp at Belsen, where I saw the tattoo marks on the arms of the

Jewish survivors. I am never likely to forget the unspeakable wickedness of which the Nazis were guilty. But when I see the swollen bodies and living skeletons in hospitals here and elsewhere; when I look at the miserable "shoes" of boys and girls in the schools, and find that they have come to their lessons without even a dry piece of bread for breakfast; when I go down into a one-roomed cellar where a mother is struggling, and struggling very bravely, to do her best for a husband and four or five children—then I think, not of Germans, but of men and women. I am sure I should have the same feelings if I were in Greece or Poland. But I happen to be in Germany, and write of what I see here.

Yours, &c.,
VICTOR GOLLANZ.

Düsseldorf, Nov. 12.

§ (iii)

TURKEYS AND STARVATION

To the Editor of The News Chronicle.

Sir,—The shamelessness of the Government becomes intolerable. Turkeys and poultry specially imported, extra meat, sweets and sugar—these are among the luxuries which Mr. Strachey announces for Christmas. I don't know what sort of part my friend Strachey has played in making this monstrous decision; if any part at all, he is not the Strachey I worked with for so many years.

Have these Christian statesmen of ours the slightest idea of what is going on in Germany? Apparently not, for if they had they would not make the idiotic statements that cause such consternation among intelligent members of the Control Commission. Let me tell them, then, something about life here in this ruined city of Düsseldorf.

The normal consumer's ration is supposed to be one of

1,550 calories a day—about half ours in England. But this week four of the items that account for most of this bogus figure—bread, cereals, skim milk, and even vegetables—are either non-existent or in horribly short supply; and the same has been the case, in varying degree, ever since I've been here.

The bread famine has meant that after standing in the queue hour after hour and day after day since six o'clock in the morning—and it is now vilely cold—many have been turned away empty handed. In Wuppertal there was no bread at all for 10 days.

The plain fact is that that portion of the Düsseldorf population that cannot, or will not, supplement the ration by a few hundred extra calories from the black market or other sources—the old, the feeble, the lonely, the very poor, the hardest working and the over-conscientious—have been living these last days on anything from 400 to 1,000 calories. Four hundred—and I have been in many homes where this has been the daily ration—is half the Belsen figure.

I wish Mr. Attlee, Lord Pakenham—whose speech in the Lords was a model of feebleness and futility—and Mr. Strachey could have been with me a couple of days ago in the big hospital here, when I spent a ghastly morning photographing cases of hunger œdema and emaciation. I cannot believe that they would not have been as sickened as I was.

Our prestige here is pretty near the nadir. The youth is being poisoned and renazified. We have all but lost the peace—and I fear that this is an understatement.

Yours, &c.,
VICTOR GOLLANZ.

Düsseldorf, November 8.

A REPLY TO MR. STRACHEY

[A reply by Mr. Strachey was published in *The News Chronicle* the day after the above letter appeared. Next day Mr. Cummings commented.]

To the Editor of The News Chronicle.

Sir,—A. J. Cummings says that “it is absurd, as well as grossly unfair, to suggest that the British Government is indifferent to elementary human needs in the British Zone”. It is not absurd; it is not unfair; it is the fact. Listen to this.

Private food parcels—to be made up from rationed foods only, spared from his own ration by the would-be donor—would be invaluable.

I don't want anybody to tell me that they would hardly touch the fringe of the problem; after six weeks in Germany I know all about that a good deal better than many of the objectors. But, first, every individual case is an individual case, and if one person out of every hundred or ten thousand can be spared extreme hunger, then that is so much gain; and, secondly, it is impossible to exaggerate what such gestures mean in giving evidence of human solidarity.

American parcels are now beginning to arrive in our zone, and I have personal experience of what they mean to the recipients. That the Americans are sending parcels and we are not will be still another count against us; and this will be doubly lamentable in view of the fact that the American all-over failure is indeed far greater than ours.

Now what has happened about these food parcels? The following. “Save Europe Now” had been attempting for months to get them sanctioned; and when Strachey replaced Ben Smith at the Ministry of Food it seemed certain that the scheme would go through.

We worked out the details with officials of the Ministry

and the many other departments concerned at a number of extremely tedious conferences.

Then the whole thing collapsed. Why? Because bread rationing was introduced, and the Government, alarmed by an outcry which was very largely as bogus and engineered as it was in any event disgraceful, simply refused to face the hypothetical charge that “in so grave a domestic crisis” it was allowing food to go out of the country—idiotic though such a charge would be, since every bit of the food in question would simply be transferred from an individual and willing consumer in England to an individual consumer in Germany.

I challenge both Attlee and Strachey to deny that this is a true statement of the facts; and I say that this is just one example of indifference—or, if you like, comparative indifference—to elementary human needs in the British zone.

I see that Hynd has now made another of his famous “optimistic” speeches. It will send a cold shiver down the back of every intelligent member of the Control Commission—as in the case of his recent Berlin effort, on the very eve of the present appalling crisis in the Ruhr. Everyone in Germany is asking: “Where on earth does Hynd get his information from?”

As for John Strachey, he is so intelligent, and his reply so feeble, that I must assume that he has got himself mixed up with a policy of which he disapproves, and is making the best of it.

What Germany must have, he says sagely, is not turkeys or sweets, but regular cereals. He's telling me! But

(a) He misses the point that to give us extra Christmas rations, over and above the high general standard of living of which he talked with so much pride recently, is morally degrading to ourselves and must add still further to the growing cynicism with which the Germans regard “Western democracy”;

(b) The Germans need, God knows, the "variety" of which Ben Smith had always a deal to say; and they might have had a little of it, but for our selfishness, this Christmas;

(c) They desperately need animal proteins. I believe I am right in saying (but will not vouch for it, as I am away from my documents) that if the Germans of our zone had been given the amount of meat by which our ration was **recently increased**, they would thereby have received a **regular additional 50 per cent.*** And now we take still more meat, as well as specially imported turkeys and poultry; this extra Christmas ration of meat alone would suffice to give four pounds to every child in the British zone. The fact that the miserable German fish ration has been quietly reduced for the current period makes matters worse;

(d) "You can't feed 'Germany' on sweets." How true! But if Strachey had been with me when a Salvation Army man gave sweets to some children in a miserable underground cellar where they "live" he might have grasped the point.

The Cabinet, says Strachey, knows exactly what is happening in Germany. No doubt; but usually after it has happened. How otherwise explain, among other things, Hynd's Berlin speech?

Yours, &c.,
VICTOR GOLLAN CZ.

14, Henrietta Street, November 16.

§ (v)

A REPLY TO MR. HYND

To the Editor of The Times.

Sir,—In the debate on Wednesday (November 27th) Mr. Hynd, speaking about food in Germany, said: "I do

* The figure should be 70 per cent.

not think there is any difference between Mr. Gollancz and myself." There is a world of difference.

"The calculations upon which my statements are based," he continued, "are those of the actual amount of food that has been distributed. . . . We have maintained the ration steadily up to the present time, apart from local breakdowns." This is untrue.

On arriving in the Ruhr (October 27) I visited homes and schools, and was horrified by what I found. Many were living, the day I visited them, on a cup of milkless "coffee" for breakfast, potatoes with cabbage for lunch, and the same in the evening, bread being entirely absent.

I then made official, but still local, inquiries. I first discovered that the 1,550 calories were, even officially, a myth. The ration is made up of 14 items: there is a printed sheet showing the quantity of each item and the calorie value of that quantity, and these calorie values add up to 1,548. But while the public is entitled to the printed quantities in the case of 12 of the items, they are not so entitled in the case of bread and cereals. In the case of these two, the Press announces each week how much may be bought. The amounts shown on the sheet as necessary to make up the 1,550 calories are 10,000 grammes of bread and 1,750 grammes of cereals for the 28 days. But during the period which started on October 14—the period for which rations were officially raised to 1,550 calories—the amount of bread to which the public was entitled, even officially, was not 10,000 but 8,500 grammes; and the coupons for cereals were not "called up," in the official phrase, at all except in an infinitesimal percentage for special classes only. So the 1,548 calories have already become 1,206.

But it was clear to me that many were not getting 1,206 calories or anything like it. So on November 8 I went to Bonn and spent the day there with our Regional food team, which is responsible for North Rhine-Westphalia. I

found a general impression that, though there had been breakdowns for a few days here and there, the thing had evened out and that over the whole period the 8,500 grammes of bread (but not, of course, the 10,000) were being met. I was unable to accept this assurance, and it was courteously agreed that certain towns should be rung up with a view to discovering in each case the stock of flour at the opening of the period, the amount necessary to meet the ration (on the 8,500, not the 10,000, basis) during the first three weeks of the period, the amount actually received during those three weeks, and the closing stock. When the results came through they showed a deficiency in Düsseldorf of about 50 per cent. and in Essen, Mülheim, Oberhausen, Duisburg, and Dinslaken, taken as a group, a deficiency of about 35 per cent. It was added that deliveries from small mills were not included, but that these would not seriously affect the general picture.

I then asked about cereals. The responsible officer stated that these had been unobtainable for a considerable period, that there was no possibility of an early resumption of supplies, and that the back-log would have to be written off.

I next inquired about skim milk. I was first told that 80 per cent. of the ration had been met. Again I could not agree, and begged for inquiries. The reply came through during the afternoon: over the whole North Rhine region the deficiency since October 14 had been about 50 per cent.

Mr. Hynd is the last man in the world to deceive the House of Commons. What, then, is the explanation?

Yours, &c., VICTOR GOLLANCZ.

14, Henrietta Street, Nov. 28.

To the Editor of the Manchester Guardian.

Sir,—Mr. Dalton, announcing in the House on December 3 the plan for the fusion of the British and American zones of Germany, said that “the food ration of 1,550 calories for the normal German consumer must be accepted for the present, but will be raised to 1,800 calories as soon as conditions of world supply permit.” This statement will be read with the greatest disquiet. Several considerations arise:

1. “A diet containing an average of about 2,650 calories a day . . .” says the report of the Emergency Economic Committee for Europe, issued on February 6, 1946, “has been recommended by the U.N.R.R.A. Food Committee as the amount of food sufficient to maintain full health and efficiency in a population with a normal distribution according to sex, age, and occupation.” A diet of 1,800 calories for the normal consumer seems, therefore, a curious target, even if it is not the ultimate one.

2. How long is the 1,550 scale to be retained? A week or so ago a well-known and reliable correspondent of the “Observer,” writing from Berlin after an interview with responsible officials there, put the probable period at close on another year. This is folly. “A diet of 1,200 calories,” according to the fourth report from the Select Committee on Estimates, House of Commons, November 5, 1946, “may be characterised as slow starvation . . . 1,550 calories is probably no better than even slower starvation.” Moreover, the Germans had been living for many months on no more than 1,000 calories, and some of them, from time to time, on considerably less. Against such a background the prolonged continuance of 1,550 calories must inevitably involve a still more rapid deterioration in the

general health and in particular a progressively intensified increase of active lung tuberculosis.

3. What arrangements are being made to ensure that even the 1,550 calories will really be met? As everyone knows, they were far from being met during the period starting on October 14. For the following period, starting on November 11, a quota of cereals representing nearly 200 calories was put on the official sheet with a view to bringing the total up to 1,550. But I was assured at the Regional Food Headquarters in Bonn that these cereals would, in fact, be virtually unobtainable.* Maintenance of the ration will require a regular reserve of, at the very minimum, a month's supply of grain. Is this being provided for? When it comes to our own country Mr. Strachey considers a reserve of eight weeks the indispensable minimum. Unless we cease to work on a hand-to-mouth basis there will be constant repetitions of the disgraceful breakdown I witnessed in Düsseldorf and the Ruhr.

4. How is the diet to be composed? In the period starting October 14 the daily quota of visible fats for the normal German consumer amounted to 6 grammes (7 grammes = $\frac{1}{4}$ ounce), and that of protein to 43.1 grammes, 11.6 of which were animal protein. But I am informed by a leading expert that for building up bodily resistance 70 grammes of protein are essential, of which 30 should be animal protein, and that, while there is no definite

* The following answer by Mr. Hynd on December 11 is really almost unbelievable. The "current" period, as at December 11, is not the period starting November 11, which would be bad enough; it is the period subsequent to that. Here are the question and answer:

Mr. Foot asked the Chancellor of the Duchy of Lancaster what proportion of the cereal ration in North Rhine-Westphalia was met during the 28-day period beginning 14th October and is being met in the current period; and why has the cereal quota of the current ration been retained at 1,500 grammes. *Mr. J. Hynd*: Since 14th October only an insignificant proportion of the cereal ration, as distinct from bread, has been met in this region. I hope, however, that imports of grain will soon be sufficient to enable the full rate of distribution to be resumed and the ration scale has therefore been retained at 1,500 grammes.

evidence to prove that fats are necessary for health, it is, in fact, extremely difficult to "live" on less than 20 grammes of visible fats a day.

"This is the beginning of the end of our economic problems," said Mr. Bevin when announcing the plan. Unless its food arrangements are drastically revised his optimism will prove misguided.—Yours, &c.,

VICTOR GOLLANZ.

14, Henrietta Street,
December 4.

§ (vii)

MORE FACTS ABOUT HEALTH

It is easy enough to get a reliable general picture of the state of what is called "public health" in Germany today. No one could doubt that it is deplorable, except the sort of person who concludes that nothing can be wrong if he doesn't see every second person dropping dead before his eyes. But it is difficult to get accurate details. Opinions vary a good deal about statistics and their meaning. Some, but by no means all, of the British doctors (who come largely, one gathers, from the R.A.M.C. and I.M.S., and a few of whom seem naturally predisposed to regard every sick man as a malingerer) are suspicious of, or even downright hostile to, their German confrères; and some, but by no means all, of the German doctors tend to exaggerate—which is certainly a fault in the better direction. Within a few days of my arrival I had a remarkable interview with a British medical officer of fair importance. He started by advising me always to see English doctors; he was so emphatic on the point that I realized at once how important it was for me to see German doctors as well. He agreed that "there wasn't enough penicillin", but his own explanation—"the Germans can't pay for it"—appeared, in his view, to dispose of the matter once and for all. I was to remember what he said when I saw a man

a few days later at the University Hospital of Hamburg, in agony because there was no penicillin for him—you can see his face for yourselves on plate 5. This doctor also suggested that the German authorities had falsified the V.D. figures—penicillin at that time being permitted only for cases of gonorrhœa—“to get more penicillin”. As to insulin, hospitals, he said, had 100 per cent. of their requirements—“and bad cases presumably go to hospital”. I was to remember this too, when I was told by a German doctor whom I learned to trust that people forced their way into hospitals when the coma was about to come on in order to compel admittance. I next learned that all the people suffering from œdema, for instance in the Hamburg hospitals, were oldish—and so they might really be suffering from other kinds of œdema, such as cardiac or renal. So indeed this one or that one might; but the general impression that the remark might have conveyed to the unwary would have been wholly false, as I shall presently show. I ended the interview by asking whether any drugs etc. were in seriously short supply, and if so what, and in what order of priority. I got a satisfactorily categorical answer—penicillin, insulin, liver extract, cod-liver oil and malt, vitamins A and D.

In Kiel I found a high proportion of the people with grey and yellow faces, and I shall have something to say about this later on. Here, also, I was to have my first experience of a characteristic in the population that literally forces itself more and more on your attention: people drift about with such lassitude that you are always in danger of running them down if you happen to be in a car—as, being a Britisher, you almost invariably are.

On the day after my arrival in this city I went into the tuberculosis figures for Schleswig-Holstein. Tuberculosis is one of the things about which you have the greatest difficulty in arriving at the truth, as I was soon to discover.

There are many reasons; in Hamburg, for instance, until a few weeks ago only open infectious cases were notified and, as I mentioned in *The Times*, only cases in sanatoria and hospitals were registered. The number of notified and registered cases, therefore, is an imperfect guide to the amount of active tuberculosis, even by way of comparison with 1939, as general conditions are now so much worse, and in particular such hordes of “expellees” have been flooding into our zone and so many doctors have been “denazified” that there is likely to be a considerable percentage of tuberculosis that never comes under notice at all. Some attempts have been made here and there to get an all-over picture by mass X-ray surveys of the population; but these have to be treated with great caution, first because the samples are small, and secondly because a proportion of the “conspicuous pulmonary findings” certainly indicate bronchitis, old healed cases, cases in process of cure, etc. Nevertheless, these surveys must be taken into account.

The number of new cases of active lung tuberculosis registered in Schleswig-Holstein during the first six months of 1946 was between four and five times the number of new cases registered in the whole of 1939, and more than five-sixths of the number registered in the whole of 1945. The population is now double what it was in 1939. The registered figures for 1946, therefore, show something between a four-fold and a five-fold increase over 1939, after correcting the population statistics. After a similar correction, deaths from the disease during the first six months of 1946 come out as more numerous than those for the whole of 1939. I think I am right in adding that the monthly figures this year were rising steeply up till August, with a small drop in September; and that the number of new cases registered in that month was more than 60 per cent. higher than the numbers registered in January and February respectively.

As to the real increase since 1939, a layman's guess is as good as a doctor's, once he has had the whole thing explained to him. My guess is that for Schleswig-Holstein the increase is at least ten-fold, and probably far more. The horde of "expellees" is one of the reasons, of course, for the particularly bad situation in this *Land*.

Infant mortality in Schleswig-Holstein for the first six months of 1946 was at the rate of 116.1 per 1,000 live births, against the 1936 figure (for the Reich as a whole) of 66. But in the zone generally infant mortality is at the moment declining: it was 136 per 1,000 live births in January 1946 against 61 in January 1938, but only 75 (provisional figure) in August 1946 against 57 in August 1938. It is to be hoped that the winter will not see another rapid increase.

An interesting report has been written by Dr. Walter Büngeler, Dean of the Faculty of Medicine at Kiel University, about general health conditions in Schleswig-Holstein:

"The pathology of the post-war period is controlled by the direct or indirect results of deficiency- and under-nourishment, which are becoming increasingly evident amongst the majority of the German population. Among cases we have investigated death through starvation has occurred only twice. Apart from this the effects of undernourishment have been established by the fact that all dead persons, even those who have died as a result of an accident or some acute infection, have been appallingly underweight. A 30% weight deficiency is by no means uncommon. Especially in the spring and summer of 1946 an enormous loss of substance in the vital organs was most striking in a large number of post-mortems. A 50% loss of weight in the liver and heart was frequently noticed. Finally already in middle age osteoporosis has been clearly established. . . .

"In the summer months of '46 the indirect results of deficient- and under-nourishment became far more evident. To this category belongs also the increased virulence of tuberculosis, with comparatively high mortality, which has been proved in our clinics. In almost all TB cases we find unusually disproportionate weight and frequently symptoms which prove a loss of immunity far exceeding the usual proportions (galloping consumption, unusual symptoms of generalisations of TB in adults).

"Furthermore septic infections frequently show unusual symptoms. Serious infections appear after relatively harmless staphylomykosis of the skin and flesh. Also the individual symptoms which then appear show emphatically the completely inadequate powers of resistance of the body.

"This general lowering of immunity leads also to loss of immunity and resistance in those organs whose physiological task it is to protect the body, and which now only show localised resistance in the form of inflammation, instead of general resistance.

"In this connection must be mentioned the extraordinary frequency, seriousness and persistence of skin staphylomykosis since this winter. External hygienic conditions have aggravated this tendency. The mucous membrane of the stomach and intestinal canal is normally a barrier to germs. Genuine intestinal infections have, however, not been so common as a result of appropriate hygienic measures. Almost all typhoid cases observed by us follow an extraordinary course. Clinical observations confirm these findings. Various relapses have been noticed, and even in serious typhoid cases, which later led to death, the level of the agglutinations-titre remained abnormally low or non-existent.

"All these observations explain to us the nature of an intestinal infection which up to now was most rare,

but which has recently been increasing: acute or sub-acute unspecified enteritis phlegmonosa.

"This disease was up till now so rare that every case was given publicity. Up till 1923 forty cases were known in Germany, in more recent times there were known in Germany a few notifications. At the end of spring 1946 cases begin to appear again and they have meanwhile reached alarming numbers. . . ."

From Kiel I went to Hamburg. One of my early visits there was to an elementary school for girls, the age group being 6 to 14. I saw three girls being medically examined. The first had an underweight of 7 pounds, the second of 8, and the third of 17, but my arrival had been expected and these may perhaps have been specially selected cases. I was told that there was a regular underweight in the school of 8 pounds, and that there had been a great deterioration since the ration cut in March; but I had no means of checking this statement. The girl with the 17 pounds underweight was very small for her age, and pot-bellied. It was at this school that I first saw the horrible skin blemishes which I was later to see in all the schools I visited. The headmistress told me that 50 per cent. of her children suffered from them, and from counts I personally made elsewhere I should say that this was not a very serious exaggeration. The complaint takes various forms: very small red marks over a large area of the body, sores of the impetigo type, and small flat carbuncles which half heal and then break out again. My own view is that dirt and lack of soap are the origin, but that immunity is reduced, the trouble aggravated and a cure prevented by malnutrition, and in particular by the lack of meat, cheese, milk and eggs.

I went on to an elementary school for boys, where I saw children chosen for a "recovery home". You will find a photograph of some of them on plates 6 and 7.

I have already given the Hamburg tuberculosis figures in my letters to *The Times*. I would only add that the figure of five times pre-war is, in my view, a very conservative one, and was arrived at after several very lengthy **cross-examinations**. Two supplementary figures are of interest. The official British public health review for Hamburg, January to June 1946, states that 5,321 new cases of active TB were registered at clinics during these 6 months, against 5,818 for the whole previous year; and in one Hamburg hospital for children, out of 425 beds occupied in 1939 there were 20 cases of tuberculosis, whereas in the same hospital, with approximately the same number of beds, these cases now number 170. I was assured that this was a fair sample, and that it conveyed a terrible warning; for children catch tuberculosis far more easily than adults from living in the same room with the infectious. In general, the present overcrowding means a progressive infection—one person infects two or three others, and so it goes on. Owing to shortage of beds in sanatoria urgent cases cannot be taken in; and people who in normal times would be isolated in a room at home are now living and sleeping with three, five, eight others. Unless this process stops, no one can see the end. "About 4,000 cases of infectious tuberculosis", says the Hamburg report already referred to, "were being nursed in their own houses, and under the bad and overcrowded housing conditions constituted a serious menace." The reference is, of course, only to known cases.

There was an improvement in the infant mortality rate for Hamburg similar to that for Schleswig-Holstein. It was (approximately) 50 per 1,000 live births in 1938, 145 in 1945, 125 in January 1946, 77 in March 1946, 114 in April 1946, 82 in June 1946, and 84 in July 1946. Miscarriages, on the other hand, which according to statistics of the Hamburg Health Authority were 12.2 per cent. of reported pregnancies in 1940 and increased about 1 per

cent. a year till the end of 1945, when they reached 17.7 per cent., jumped during the first six months of 1946 to 20.1 per cent. A gynæcologist, with a practice in middle-class and intellectual circles, attributed the increase to food shortage, insufficient clothing, lack of fuel, bad housing conditions, homes overcrowded with strangers, queuing up by the hour for food, inadequate transport facilities, and overcrowded trains. His report continues:

"All this results in general in a considerable lowering of women's power of resistance and energy, and in particular it affects the female generative organs.

"Otherwise thoroughly healthy young women and girls suffer to an alarming extent from hypoplasia uteri. This is partly the result of shocks received during air raids, partly caused by the unfavourable change in the mode of living and by the barely sufficient one-sided food. It is very alarming in so far as it is a bad prognostic for conception. The treatment is very much impaired by the lack of all hormone preparations and the impossibility to send the women to suitable convalescent homes. That is where help is urgently needed.

"Inflammatory diseases of the abdominal organs, especially chronic catarrhs of the vagina, inflammations of the bladder, and nephritis, have to be increasingly dealt with during consulting hours. In many cases they are the result of staying insufficiently clothed in unheated rooms. The rise in gonococcal infections is very serious.

"The wish to have a child is waning. Instead of desiring a child many women are now succumbing to a deep despondency, thus the diagnosis of a new pregnancy often arouses fits of despair. The women are weighed down by the anxiety how to procure the most necessary things for the expected baby. There are no beds, no bedding, no baby-clothes and diapers. On account of the bad housing conditions a confinement at

home is generally out of the question, and the maternity wards are overcrowded. . . .

"Abortions are on the increase. Admission and production of contraceptives are urgently required in the present times of distress in order to restrict to a minimum illegal interruptions of gravidity which are often very detrimental to the health of the women."

This specialist's reference to abortion is confirmed from other sources; in one city I was told "The doctors are living on abortion."

As to hunger œdema in Hamburg, there is little to add to what I have written in *The Times*. I am satisfied that the estimate of 100,000 is a reasonable one; and it must be remembered that the survey of post-office workers was carried out under expert British auspices, and that but for it the existence of the majority of such cases would probably never have been known. The survey makes nonsense, of course, of the "old people with renal and cardiac œdema" argument. When the reader looks at the photographs of cases of œdema and emaciation which I took in various hospitals,* he must bear in mind that doctors are sometimes in error, and that this case or that may in fact be due, for instance, to kidney trouble or cancer. But the point is that this is what bad cases of œdema and emaciation look like, and that a very high percentage of them are unquestionably caused by starvation. I will give further proof of this later on.

Fortnightly weighings of industrial workers have been undertaken in Hamburg. Though the report of the Welfare Committee responsible for them states that the figures are "average figures of such a great group of population that they give a true picture of the loss of weight" I quote the findings with all reserve, as I lacked the time to investigate the *expertise* of the body in question. The figures, as

* I have suppressed most of these. See p. 24.

at the end of June 1946, show an average loss varying, in different groups of men and women, from 8 per cent. to 15 per cent. The weighings of children show no loss of weight up to 5 years of age, and average losses in other groups varying from 3 to 10 per cent. Weighings in old people's homes show an average loss of 20 per cent. for both men and women.

On October 15 I paid a visit to the University Hospital of Hamburg, where I took photographs. A chart prepared by Professor Jorez showed that of males weighed on admittance in 1939, whatever their complaint, 25.7 per cent. were overweight, 15 per cent. more than 5 kilos underweight, and a further 12.8 per cent. more than 10 kilos (about a stone and a half) underweight. Similar weighings in June 1946 showed 1.8 per cent. overweight, 19.4 per cent. more than 5 kilos underweight, and a further 49.3 per cent. more than 10 kilos underweight. These figures may be considered reliable. The Professor also informed me that the weight of mentally deficient children at the Alsterdorf Anstalt was generally normal in 1939, but in the second quarter of 1946 was deficient in the case of girls by an average of 6 kilos and in the case of boys by an average of $9\frac{1}{2}$ kilos (again, nearly a stone and a half); and that the mortality rate in this institution had increased from roughly 1 to roughly 5 per cent.

I enquired about the rations of hunger oedema patients. I was told that these, even for the worst cases, amounted to only 2,300 calories. I would remind the reader that in England the average calories are at the moment just on 3,000.

From Hamburg I went to Düsseldorf and the Ruhr. I will give first the public health figures for the North Rhine Province as given me in a document dated November 6th and prepared by the German M.O.H., Dr. Gerfeldt.

Population: October 1939, 6,500,000; September 1946, 5,947,000, including about 250,000 refugees. Active cases of tuberculosis on the register: 31st December 1944, 9,902; 31st December 1945, 19,102; 30th June 1946, 25,000. This information was supplemented verbally at a conference with Dr. Gerfeldt and other leading German public health officials. They stated that the real figure was probably about $33\frac{1}{3}$ per cent. higher than the one shown; that 6,000 known cases of infectious tuberculosis were not isolated: and that at a clinic for all children's diseases in Stadtkreis Düsseldorf the number of cases of tuberculosis was about two and a half times as high on September 30th 1946 as on January 1st 1939. There was a similar rise in the death rate from children's tuberculosis in this institution.

At the same conference I was given body-weights in the North Rhine Province, as follows. Children from 6-12: in Düsseldorf (I think the Regierungsbezirk, but possibly the town only), normal 81.4%, middle (loss of weight less than 3%) 4.8%, bad (loss of weight more than 3%) 14%. In Cologne, normal 11.7%, middle 58.8%, bad 29.5%. In Regierungsbezirk Aachen, normal 9%, middle 23%, bad 68%. In the whole *Land* North Rhine-Westphalia, average underweight in men 8.5% and in women 7.5%.

The British public health authorities added the information that in North Rhine-Westphalia the total number of known infectious cases of tuberculosis at the end of June was 23,500, but the number of beds in hospitals and sanatoria only 10,066. They further stated that in North Rhine, while there had been little increase in new registered cases as between January and June 1946, there had been an increase of nearly $33\frac{1}{3}$ per cent. in open and infectious cases during the same period. The Friends Relief Service have recently reported from Dortmund that in Landkreis Iserlohn nearly $33\frac{1}{3}$ per cent. of all the children examined there were TB positive.

While in Düsseldorf I visited three ordinary schools, as well as the bunker school referred to in the *Times* correspondence. In a class of 45 boys aged 6 or 7, only one, I thought, looked healthy. Many were clearly undernourished, and there was a plague of spots and sores. In another mixed class of children of 13 or so the undernourishment of all the boys without exception was even more noticeable; most of the girls, on the other hand, looked fairly normal. Many of the boys had swollen glands. I had a few undressed. Photographs will be found on plates 14 and 15.

I spent November 2 at Oberhausen, a typical mining town. Mr. Buist, the *Times* correspondent, and I got away from the officials and entered miners' flats at random. In two tiny rooms we found a mother and father, a baby that looked as if it wouldn't live, and three other children. Two of the children were barefoot; the other had a pair of house-shoes borrowed from the man's father-in-law. By way of bedclothes there were 3 blankets for the whole family and nothing more. The miner had money, but no *Bezugsmarken*; he had done his best to get them but without success. It must be explained that you can't just go into a shop and try to buy a shoe or almost any other personal or household necessity; you have first to obtain a *Bezugsmark*, or coupon, which you may—but usually do not—receive on proof of need. If and when you have got it you then have to go from shop to shop—sometimes, recently, even from town to town—to try to get the article.

I suspected what these children would look like naked, and was horribly torn between shame at asking to photograph them and desire to bring conditions like this home to the British public. When I asked the mother's permission she broke down and was comforted with difficulty by Buist, who however eventually persuaded her that this might be a way to help Germany. You will find the photographs on plates 16 and 17.

Back in Düsseldorf, I spent a morning (November 5th) at the Town Hospital. I saw a few very badly underweight children there—the trouble was, the doctor said, that they had to be sent home without proper shoes and clothes, and so got ill again. I also saw a child of ten with heavy TB—the kind of TB, I was told, that you find normally only in babies. The disease was spread over the whole body, and bandages could be changed only under morphia. Such cases, it appeared, were today much commoner in older children. Previously there had not been enough to fill the building; now another building, as well as this, was full. Photograph on plate 18.

One of the patients at this hospital was its own lady doctor. She lived alone, was too busy to get food from the Black Market, and couldn't queue up; so she had had no bread for weeks. She was now recovering slowly from hunger oedema.

At the baby clinic attached to this hospital I was told that only one in three mothers could feed her baby properly; the breasts of the others were dry within a week.

Later in the day I had a talk with Dr. Arnold, the Burgomaster of Düsseldorf and one of the half dozen best Germans I met. During the last few weeks, he said, he had been visiting factories and workshops, and had personally examined people in Stadtkreis and Landkreis Düsseldorf, as well as in Essen, Bochum and the Ruhr generally. The condition of the men was so bad that their working capacity was on the verge of collapse. He had noticed that when miners and metal workers were bathing at a distance of 8 yards he could count their ribs. He had been told by factory doctors that within a period of three months there had been losses of 15 to 20 lbs.

Dr. Amelunxen, the Minister-President of North Rhine-Westphalia, spoke in a similar sense. He was convinced that during the next few years two or three million would die as a direct result of present conditions—old people, the

tuberculous, and a very large number of young children who would fail to overcome the normal childish diseases. Many senior British officials are equally alarmed. "There is a general deterioration in the health of the population" wrote the Colonel commanding Regierungsbezirk Düsseldorf to the Deputy Regional Commissioner on June 25th "and in their ability to resist disease, which is having an adverse effect on their morale. There is a considerable increase in the number of cases of hunger oedema in the larger towns in the R.B., notably among women and old people and business men who are at work all day. Stillbirths are on the increase. . . . Simple ailments, such as colds, boils, carbuncles etc., which would normally be treated at home, have now to be treated in hospital, and complications often follow. People have been seen collapsing while waiting in queues, and for the Düsseldorf ferry." He proceeds to give some particulars from Essen, Wuppertal, Oberhausen, Solingen, Düsseldorf, Mülheim and Remscheid. "In Düsseldorf on 19th May there were 145 cases of hunger oedema in one hospital (Grafenberg). Of 934 persons reported to one of the Stadtkreis Medical Officers, 200 were found to be suffering from hunger oedema, and only 70 were in normal health." "In Mülheim average loss of weight in hospital 20%. Increase in number of hospital patients in one year 18% to 20%." "In Remscheid definitely undernourished in April 6,648, in May 7,259. Suffering from lack of albumen April 1,732, May 1,792." Then follows the estimate of 25,000 as the number of persons in the R.B. suffering from hunger oedema, which I quoted in my letter to *The Times*.

I thought I would round off the whole investigation by having a talk with a world-famous British expert on nutrition, who was doing special work in the neighbourhood on hunger oedema. He was as cautious as a scientist no doubt should be, and he had a poor opinion of the veracity of Germans in general and of German scientists in

particular. Nevertheless, the upshot was substantially to confirm my own conclusions. He could not say whether the prevalence of spots and sores was due in some degree to malnutrition. He agreed that the majority of adults you saw about looked yellow (as well as thin); but the reason, he said, was not clear to him. If I understood him aright, he thought that the yellow, parchmenty appearance might be caused by a failure of the blood to flush the skin. "A sort of defence mechanism" suggested one of his assistants. But when I put a direct question, the answer was a frank "Of course, it's connected in some way with malnutrition". As to oedema, he explained, as so many others had explained already, that only some of it was hunger oedema, and that this type could easily be identified by its quick response to extra food. Later on in the conversation, when I was asking another question about oedema, "You'd be surprised" I was told "how many of the cases that pass through my hands improve very rapidly when quite a small amount of additional food is given." These cases, then, must have been hunger oedema.

All this doesn't mean, as I said at the beginning, that people are dropping dead in the streets. The crude mortality rate has been improving and in August was normal. The point is that a very great number of people feel wretchedly weak and ill, and that the health of the population as a whole is being undermined with such startling rapidity that, unless radical measures are taken to effect an improvement, the toll in one, two or three years' time will be appalling. It must be remembered that mortality from tuberculosis did not reach its climax until five years after the last war. Even the increasing prevalence of infectious diseases is not the most important aspect of the matter, serious though this is. In the Control Commission's information room at Bünde there is a chart headed "Diseases of the German Population", and showing a graph of seven diseases with March 30 1946 as the

first date and September 14 as the last. Scarlet fever is about the same on the later date as on the earlier, dysentery also about the same, diphtheria a trifle higher, gonorrhœa considerably higher, syphilis much higher, tuberculosis about a third higher, and typhoid nearly double. But what really matters most is a more generalised degeneration in the health and strength of the whole community.

My own view may be summed up in the words of a British M.O.H. who suddenly "let himself go" at a mess in Hamburg one Sunday afternoon. "What on earth are you politicians in London up to?", he said, mistaking my occupation. "Do you realise what's going on here? Ignoramuses see some people in the streets looking fairly well nourished but don't realise that they are living on carbohydrates and have no resistance, and they forget that the most seriously undernourished people are at home. The present figure of tuberculosis is appalling, and it may be double next year. An epidemic of any kind would sweep everything before it. We are on the edge of a frightful catastrophe: and if you politicians in London"—he looked at me indignantly, and swept my disclaimer aside—"don't do something about it very soon two problems that seem to have been worrying you will be solved. The size of the German population and manure."

II

SHOES AND OTHER THINGS

§ (i)

"THIS MISERY OF BOOTS"

(From The Daily Herald, Nov. 30)

WHEN I WAS in my early teens, a very famous Fabian pamphlet was published called *This Misery of Boots*. H. G. Wells was the author. For thirty years or more I had forgotten all about it: but the title rang in my head day after day and hour after hour in Hamburg and Düsseldorf and Oberhausen and a dozen other places. It is ringing in my head still.

Attention has been almost exclusively concentrated on the desperate food situation in Germany, but food is by no means the whole story. The working class has been wearing out its last articles of necessity, and the possibilities of replacement have, for a large majority, just not existed. The result is literally indescribable: you can only understand what it means when you actually see it—or, at a long remove, by photographs.

I can deal here with only two of the most urgent necessities. The first is children's shoes. I went into school after school in Germany, taking classes at random and simply asking children with *kaputten—ruined—shoes* to put up their hands. Here are a few of the results: 34 out of 58, 15 out of 37, 34 out of 53. (Incidentally, 50 per cent. of the latter had had no breakfast—and, during the bread famine in the Rhineland, this was a common occurrence.) I then got the children to come up to the front, and had a

to create dissension between the Allied Powers". A serious study of Potsdam by a German economist: an objective comparison of Soviet communism and Western democracy: a translation of Lord Beveridge's *Times* articles: a novel or play about the frustration of German youth—these are a few of the pamphlets or books the issue of which would be unthinkable. What it amounts to is a total ban on most of the topics of living interest. And that is what we call "re-education" and democracy.

I have left myself little space to deal with the "denazification" not of books but of men. Let me say only this. There have already been three "denazification" procedures; and now there is to be a fourth, under which not only anybody who in future may apply for a large variety of jobs, or may be denounced or reported, will be placed in one of five categories (with appropriate penalties in the case of four), but everyone who has already filled in a Fragebogen or questionnaire on a previous occasion will come up automatically for "categorisation". This will mean the re-examination of nearly a million and a half Fragebogen; and people previously "passed", and who therefore thought themselves safe, may now find themselves subjected to penalties and restrictions. The uncertainty will be horrible. The Fragebogen itself must be seen to be believed. There are 133 questions—and among them the following: "Have you any relatives who have held office . . . in any of the organisations listed from 41 to 95 above?" "List on a separate sheet the titles and publishers of any publications from 1923 to the present, which were written in whole or in part by you and all the public addresses made by you, giving subject, date and circulation or audience." "List all journeys . . . outside Germany . . . persons visited." The German wits add a final question: "Did you play with toy soldiers as a child? If so, what regiment?" *

* See Appendix.

I asked one of the highest authorities on this procedure how long the re-examination of the Fragebogen would take. "About two years" he said—"but of course" he added "the whole thing will be discontinued before then." Then why, in the name of the liberal tradition of which we were once so justly proud, don't we set an early term to this disgraceful nonsense immediately, and give Germany the one thing she above all must have if she is not to go down into the pit and drag us all down with her—a new start?

§ (iii)

A FURTHER NOTE ON HERRENVOLK

The disparity between British and German living conditions, to some extent inevitable, is far greater than it need be. While millions of Germans are living four, seven or nine to a hole, our officers' messes are at worst pleasantly comfortable, and such of the senior ones as I visited were, for the most part, quietly and discreetly luxurious. Every time I entered such a mess before dinner the atmosphere reminded me very vividly of Singapore in 1918: there was the same sense of happy relaxation, the same feeling that you belonged to a privileged caste, the same climate of dignified well-being. I am not suggesting that many of these people did not work extremely hard, nor that, except in one or two cases, there was anything in the nature of vulgar display. The whole thing was far too well-mannered for that.

After the preliminary drinks, one definitely "dined"; and though the amount of food in any one course was not excessive, the number of courses, so far as the senior messes were concerned, almost invariably was. Further on I reproduce some menus, and these are not exceptional: I just slipped a menu card from time to time into my pocket when I was able to do so without observation. Germans meanwhile were eating as I have described above.

Most of the finest buildings still standing in the various cities are used as British messes or clubs of one kind or another, when not in occupation as offices. Many of our higher officials live in considerable state. I visited three of the four Regional Commissioners and stayed with one of them: the more modest type of residence was a mansion, and the less modest a palace. I am not saying this by way of criticism of the Regional Commissioners, for at least one of them, I know, intensely disliked the pomp in which he lived, and was planning to use part of the enormous space for unhappy children: but however strongly they might disapprove, being a species of colonial governor they had to submit. You could see the same kind of establishment, I was told, often enough in Berlin, but I didn't go there and so cannot speak from personal observation.

It is awkward to criticise the hospitality which I almost invariably received, but I ought to mention that at one mess at which I stayed in a particularly ruined city my bedroom measured 720 square feet. It was admirably furnished with two beds, though I had no bed-fellow, and a private bathroom was attached. There was central heating, a continuous supply of hot water, and "every convenience". As I lay in bed one night I happened to read a memorandum prepared by Dr. Arnold, the able and humane Burgomaster of Düsseldorf, for the religious delegation that had just preceded me. "The population very much regrets to see" he wrote "that the constructing and repairing of buildings for entertainment purposes is carried out by the Occupation Forces on such a large scale as would even have been remarkable in pre-war Germany, and that building material and labour are being used for this purpose, which might be utilised for the building of dwellings. On the other hand it is planned to close down factories manufacturing cement and building materials." In this connection, I have already mentioned the Victory Club at Hamburg (Plate 113); it may be added, to give

a little more precision, that the labour and materials employed on it could construct 1,500 dwelling units and house 6,000 persons. The total cost of the work, which started in November 1945, is estimated at 13,000,000 marks. 1,500 men and 35 contractors are already engaged on the enterprise, which is expected to require 350,000 bricks, 800 tons of cement, 260 tons of iron, and so on. These are the figures of the German housing authority, which also states that "the works comprise dining-rooms, shops, rooms for management, ball-rooms, dancing-clubs, play-rooms, reading-rooms, sports-amusement facilities, restaurants, lounges, rest-rooms, bath-rooms etc., including staircases and lifts. Instead of the former cinema and theatre-hall a big ball-room will be built."

Now it happens that in a finely planned working-class quarter of Hamburg not only are the roads and sewers intact (which is half the battle), but the outside walls of the magnificent blocks are quite undamaged. (Plates 114-116.) If labour were employed here speedily, part of the Hamburg population, and in particular people living in the cellars below, could be decently rehoused with great economy; if, however, the buildings remain open to the sky, they will rapidly disintegrate. But nothing is being done about it, while work on the Victory Club proceeds.

A good deal has been said about the Hamburg Project, but I find that most people don't know what it is. There are only three more or less undamaged areas in Hamburg, and one of them is away by the river. In the other two, which are known as Zone A and Zone B, a great body of Control Commission personnel from all over the zone is to be concentrated, with office accommodation in other parts of Hamburg. This will be, in other words, a sort of Garden City for the C.C.G. When I was there, a total force of 14,226 labourers was engaged on the Project, of whom approximately 3,500 were employed on rehousing Germans evicted, or to be evicted, because of it, and on pro-

viding alternative office accommodation. That gives you a net figure of more than 10,000 labourers, as against 1,700 employed on ordinary civilian repairs for the miserably housed Hamburgers.* Meanwhile, perhaps 17,000 Germans have been evicted from their homes in Hamburg for one reason or another. This is a German figure; the British put it lower.

Mr. Hynd's repeated statement that Germans are never evicted until suitable alternative accommodation has been found was furiously denied to me, not only by Germans, but also by the British housing officer in one of the most seriously affected centres. In Düsseldorf the average living space per person is 3·2 square metres: if on top of that you proceed to turn out a lot of Germans to house a few British, where could the Almighty Himself find "suitable alternative accommodation"? On the other side of the account, the evidence is indisputable that British accommodation—I am talking now of general living quarters, not of messes—is often absurdly lavish, not merely by comparison with German housing conditions, but absolutely. I have recently received from two different persons—one a Control Commission officer and the other a relief worker—a statement of the position in a small town, the population of which has been more than doubled by the influx of "expellees". 40 Britishers are living in 131 rooms from which Germans have been evicted, and 213 rooms in requisitioned boarding houses, containing 213 beds, are occupied by 69 Britishers, 5 offices, and a sergeants' mess. The occupants are partly C.C.G. personnel and partly "families".

In this connection, is it realised that when Germans are evicted they have to leave their furniture behind them, including beds but not, mercifully, bed-clothes? No single British action has caused such bitter hostility, for many of these people have been bombed out three or four times, and specially treasure what they have managed to save.

* See Appendix.

They are told that their things will be returned to them when the premises are derequisitioned. This is certainly the rule, though there have been scandalous breaches of it, at any rate temporarily; but it is cold comfort to be told that you will get your bed back one day when meanwhile it is virtually impossible to buy another. In spite of everything written in this book, I only once felt ashamed of being a British citizen; and that was when I was told about a German musician whose bed—let us call a spade a spade—had been stolen from him.

Every C.C.G. officer receives, as a matter of right, 200 cigarettes, a box of matches, a piece of soap and a fair amount of chocolate every week. The German ration of cigarettes is about seven a week, and they get once a month either a small tablet of "schwimm" soap that looks as if it would disappear after a couple of applications, or a piece of nondescript material, detestably hard, with which I found it impossible to wash at all. In addition, an Englishman could buy at the Atlantic a piece of soap every day, as well as towels and other similar articles of necessity or pleasure. I tested this out for myself. I was told that you could freely buy in the same way at country clubs and the like.

The wife of an education officer told me that though she and her husband shared everything equally with their two German servants they still had twice as much food as in England. I give this statement, which I did not attempt to corroborate, for what it is worth; but I can think of no reason why the lady should have wished to deceive me.

Food and drink are fantastically cheap. I lunched or dined at such places as the Atlantic at Hamburg and a club at Celle for about a third of what a similar meal would cost at home.

The fact is that life is far too easy for the Control Commission. I know that this will be furiously denied, and not

least by some of the most humane men out there, whom I learned very greatly to respect: but that is because, in occupation conditions, many even of the best people have inevitably lost any vivid realisation of the contrast between their own conditions and those of the people among whom they live.

§ (iv)

SOME MENUS AT OFFICERS' MESSES

(The mistakes have been retained)

(1)	Cheese—Biscuits
Consommé in cups	— Coffee
—	—
Fried Soles in butter	Friday, November 1,
Fresh Potatoes	1946
—	(3)
Dutch Steak	St. Germain Soup
Mashed Potatoes	—
Cauliflower	Braised Beef
—	Cauliflower au Gratin
Raspberry Cream	Fondant Potatoes
—	—
Cheese	Apple Tart
—	Cream
Coffee	—
—	Welsh Rarebit
Tuesday, October 8, 1946	—
(2)	Coffee
Hors d'oeuvres	—
—	Saturday, November 2,
Tomato Soup	1946
—	(4)
Rumpsteak	Hors d'oeuvres
Garnie	—
Chip Potatoes	Consommé
—	—
Creamed Caramel	—
—	—

Vienna Steak	Cheese Straws
Red Cabbage	—
Carrots	Coffee
Castle Potatoes	—
—	Monday, November 4,
Savorie	1946
—	(6)
Cheese and Biscuits	Cream Soup
—	—
Coffee	Vienna Steak
—	Curry Sauce
Sunday, November 3,	Peas
1946	Salad
(5)	Sauté Potatoes
Mockturtle Soup	—
—	Liqueur Fruit Salad
Roast Pork	—
Brown Sauce	Savorie
Stuffing	—
Beetroot Salad	Cheese and Biscuits
—	—
Pears	Coffee
Ice Cream	—
—	Sunday, November 10,
	1946