

IN MEMORIAM

**GEORGE RONALD HARGREAVES,
O.B.E., M.Sc.(LEEDS), F.R.C.P. (EDIN.)**

(1908-1962)

Many members of the APA must have met Dr. Ronald Hargreaves, either during the war, when in 1943 he visited around the army posts in this country and those in Canada, or on his more recent visits as Professor of Psychiatry at the University of Leeds, England, or perhaps at Geneva when he was Head of the Mental Health Section of the World Health Organisation. All of us therefore will have been grieved and shocked by the news of his sudden death on the 18th December, 1962, in Queen Square Hospital, London, at the age of 54, following an operation for an aneurysm which was causing pressure on his optic chiasma.

Ronald Hargreaves was one of perhaps half a dozen people in the world who made a major impression in the field of social and preventive psychiatry, and he was someone who could ill be spared.

Ronald Hargreaves was a Yorkshireman, though none of his time since early boyhood had been spent in Yorkshire until he returned to Leeds as Professor. After school, he took his medical course at University College, London, and then at University College Hospital Medical School, where he did very well. His perceptive contemporaries at the Medical School recognised that he possessed the most original mind amongst the students of his time. The sudden death of his father caused Hargreaves to postpone house appointments at his own hospital in order to earn money for the education of the younger ones in the family. He worked at Hill End Mental Hospital, St. Albans, and as clinical assistant to Dr. Bernard Hart, University College Hospital. His interest in the neuroses took him to the Cassel Hospital, and then to the Tavistock Clinic, where he was appointed a full physician in January 1938.

At the outbreak of war it was decided that a certain group of psychiatrists should

be called up as soon as possible to service in the army, and Hargreaves was one of these. During the six months of waiting for that call up he did an immense amount of reading. He read Fortescue's *History of the British Army* and, still more remarkable, procured and read the training manuals of every arm of the fighting services, in this way equipping himself with background knowledge for the work he was about to undertake.

R. Hargreaves was blessed not only with outstandingly good intelligence, but also with a phenomenal memory; and when, around Christmas time 1939, he actually came into the army, he knew more about the army's history and difficulties and background than most regular officers knew.

The work which Hargreaves did in the army, first of all as a specialist in Northern Command, and then at the War Office, was quite outstanding, and indeed, made by far the biggest contribution to the development of all the social psychiatric activities that were developed during the war. It was his experiments and work which led to the rather overdue development of a proper selection service for all men coming into the army, and later all officers who were to be considered for commissions.

Hargreaves had not merely read the history of the British army, he had also read and mastered Tom Salmon's masterly work in Volume X of the U. S. Army history of the 1914-18 war. This served as a Bible to British army psychiatry, just as later the British army was able in return to be of some help and guidance in the enlargement and development of psychiatric services in the U. S. army.

Hargreaves was distinguished by many things, but certainly by a healthy determination to see the right thing done, if at all possible, and it was fortunate that he very quickly won the complete confidence

of the General of the Northern Command, who later became Adjutant-General of the British army (Sir Ronald Adam).

In 1943 he came over with Brigadier Rees, who was the Consulting Psychiatrist to the army, on a visit to the U. S. and made a tour, along with General Brock Chisholm and some of our Canadian colleagues, to the Canadian military posts as well as those of the U. S. army. They got permission for William Menninger, then Consultant at Atlanta, to go with them, and teased him much about being just a clinician when there was a war on, with the result that Colonel Menninger (as he then was) found himself whilst in Canada let in for all kinds of soldierly activities which he had only envisaged before, but which gave him increased insight into the life of the combatant soldier and officer.

Hargreaves' visit to America on that occasion was of value to him, in that he saw many things that might be copied in the British army, some that he did not want to copy, and at the same time it established for him many excellent friendships which persisted through the years with psychiatrists and others in the U. S. A.

When the war ended, Hargreaves was appointed O.B.E., though many people thought he should have had a higher decoration for his immense contribution to the health and welfare and morale of the British Army. He then took on the job of Senior Medical Officer to the great international firm of Unilever, where he was faced with many problems not altogether dissimilar to those in the British Army, but in an industrial setting. With some heart-searching, he allowed himself two years later, in 1949, to be taken out of this job, to undertake, at Dr. Brock Chisholm's request, the work of first Chief of the Mental Health Section of WHO in Geneva. Here he again did a brilliant job, of quite a different kind. His erudition and knowledge, his interest in every branch of medicine (for he was never at any time limited to psychiatry or to analytic procedures) created very firm foundations for the mental health work of the organisation. The Expert Committee meetings which he organised produced reports, for the writing of which he was largely responsible, which have had

a lasting influence throughout the world in upgrading the concept of psychiatry and the therapeutic community and community services.

I remember very well sitting in his room in Geneva one day (for I was often there) discussing the joint operations of the World Federation for Mental Health and WHO. During an hour's talk five or six people came into the room, and would have withdrawn quickly, seeing that he had somebody with him; but he beckoned them in, and they had just come to return some books he had lent them, of which they had read the special pages or parts which were relevant to their particular problem, and wanted to tell him of the kind of plans they had formulated for their sections in other branches of medicine, on the basis of discussion with him. Consequently, on what was about the smallest budget of any section of WHO, Hargreaves produced an enormous amount of good work, because the other sections—public health, nursing, education, health education, *etc.*—ran projects which, because of the influence and advice of Hargreaves, became in fact mental health activities; but they ran on their own budgets and not on his. This has always seemed to me to be a very impressive activity, and one which many of us could try in our own circles to copy.

The illness of his wife prevented him from travelling as much as he would have liked, but whenever he did travel he left behind him a wealth of good feeling and a great deal of wisdom, and he was enabled to encourage the arrangements for consultantships and fellowships to be given to countries where they could do the maximum good.

After five years at WHO, Hargreaves decided to apply for, and was appointed to, the Chair of Psychiatry at Leeds University, where he did a remarkably fine job in building up a sound, very high grade team to work with him, excellent education, very good relationships with his colleagues in the faculty and, what is perhaps just as important, very good and helpful relationships with other faculties, like Education. It was impressive, when talking to some professors from other faculties at the Memorial Service in Leeds recently, to find

some of them were deeply moved by his loss.

One could write almost indefinitely about Ronald Hargreaves. He was a very good artist, an excellent cook, a wonderful raconteur, as many people will remember. A very modest man, he was always concerned with the good of the job for which he was working rather than for himself. He was in fact a very rare person. I hope that in the future there will be many more who resemble him in some of his qualities and char-

acteristics.

Ronald Hargreaves had four children. Three are in training for special jobs. Eva, his wife, who had been a very skilled anaesthetist in the days when she was at hospital, died after a long series of operations last summer, so that now our sympathy goes to the children who are left, and to his brother, who is a general family physician.

John R. Rees, M.D.