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Hospital magazines: sharing wounded soldiers' stories and social issues in

Post-World War One Britain.

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Introduction

Hospital magazines were common during and after WW1, reporting stories about

patients and medical personnel who were also contributors providing both articles and

illustrations. The magazines proved to be instrumental for wounded soldiers to find a new voice

in society by addressing an audience of readers who might buy copies at the hospital or in some

local shops. Ward Muir edited such a gazette that grossed £5000 per month for charity funds

at the Third London General Hospital. Among the drawings published in the gazette, Muir

called attention to J. H. Dowd's drawings as pieces of memory testifying to the long-term impact

of the war even when it was over: "What in this instance renders them (Dowd's drawings) so

valuable is their intrinsic veracity... They genuinely happened and are happening at this

moment, for, though peace has come, it will be long before the great war hospitals empty and

the boys in blue are no longer among us in town and country."² Dowd had been a patient in this

hospital and worked for three months as a caregiver along with Harry Hemsley, a well-known

actor, singer and radio star who had served during the war.

These magazines provide illuminative insight into the lives of soldiers recovering from

war wounds. They allow the contemporary reader to better understand the state of mind of these

soldiers and the different thoughts they experienced during their convalescence. The magazines

helped in the recovery of wounded veterans by giving them a voice albeit unspoken and indirect

to express their feelings. In many instances the magazines and illustrations highlighted the

juxtaposition of both the resilience and desperation that many veterans felt. Whether or not

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these testimonies influenced the personnel dealing with the collective trauma and the civilian population at large remains a subject difficult to quantify. Nevertheless the fact that the public purchased the magazines provides a basis to assume that a deeper and more sensitive perception of the feelings of wounded veterans permeated the mentality of other members of society.

Based on these magazines, the writer will study the difficulties that wounded veterans of the First World War in Great Britain faced to readjust to society and its prevailing concept of masculinity. This work will first explore the concept of masculinity present during the post-war period and the consequent repercussions of such a notion in the minds of war wounded veterans. Subsequently, the relations between these wounded veterans and women will be analyzed. Then, the writer will discuss the consequences of distinguishing a war wounded veteran through a specific uniform. The curiosity that these wounded men brought to the public's eye will then be examined. Finally, the case of men suffering from shell-shock and the reaction this unforeseen disorder triggered in society will be studied.

The concept of masculinity

Discussing the impact of war injuries on returning veterans, Joanna Bourke argues that "all men's bodies were endowed with signs and declaration of age, generations, class and ethnicity. The frame in which the male body lived, was imagined and died was socially constructed." She succinctly makes the point that while "anatomy may not be destiny, the belief that it is molds lives." Male bodies, and particularly the accompanying concept of masculinity are constructed by social values including expectations and historical factors. For the wounded veteran, the physical frame of the body had changed but social values, expectations and historical forces that impacted on this frame had not altered.

During the 19th century the dominant influence of Christianity highlighted the importance of such qualities in men such as compassion, equity and altruism in defining

masculinity.⁵ By the turn of the century these expectations gave way to more secular and aggressive ideals. Bertrand Russell comments on the masculine values central to the education at elite British schools:

The aim was to train men for positions of authority and power, whether at home or in distant parts of the empire. An aristocracy, if it is to survive, needs certain virtues: these were to be imparted at school. The product was to be energetic, stoical, physically fit, possessed of certain unalterable beliefs, with high standards of rectitude, and convinced that it had an important mission in the world. To a surprising extent, these results were achieved. Intellect was sacrified to them, because intellect might produce doubt. Sympathy was sacrified, because it might interfere with governing "inferior" races or classes. Kindliness was sacrified for the sake of toughness, imagination, for the sake of firmness.⁶

Education promoted masculine games, boys' retreat from domestic comfort and submitted schoolboys to a Spartan world in order to make them stronger and teach them teamwork. It was thought that nervous disorders, associated with manhood failure could be cured thanks to hardening physical exercises. At the beginning of the 20th century, the culture of "imperial manliness" had infiltrated much of British society through institutions such as the Boy Scoutsi and the Boys' Brigadeii where discipline was the key word. Sir Baden-Powell, the founder of the Boy Scouts writes in the preface of the manual for Boy Scouts: "The aim of the scout training is to replace Self by Service, to make the lads individually efficient, morally and physically, with the object of using that efficiency for the service of the community." By 1914, more than 40% of British teenagers belonged to an institution of this kind.

A man had to conform to some culturally and socially constructed values: his behaviour testified to his inner qualities whereas his physical strength bespoke his bravery. Although these features could be a source of debate, and even included competing influences towards the end of the Victorian era, masculinity was seen as a unitary standard forming one harmonious whole.¹⁰ Masculinity suggested attributes that were culturally and socially praised.

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ⁱ The Boy Scouts movement was created in 1908.

ii The Boys' Brigade were created in 1883.

For a generation of young boys and the society that surrounded them the war was seen as a test of masculinity. Oscar Wilde's son felt that he had to bear the burden of this definition of masculinity to resist his father's reputation: "First and foremost, I must be a man. There was to be no cry of decadent artist, of effeminate aesthete, of weak-kneed degenerate."

However, by the end of the war the terrible contrast between the handicapped veteran and the prevailing image of masculinity surfaced albeit at times unexpressed. The works of British historians Joanna Bourke¹², Ana Carden-Coyne¹³, Deborah Cohen¹⁴ and semantic scholar Wendy Jane Gagen¹⁵ all make reference to this issue. Bourke examines the importance given to masculinity in the post First War British society and the negative impact this concept had on wounded veterans.¹⁶ Cohen also shares this idea and insists on the marginalisation the disabled veterans underwent.¹⁷ Coyne notes that "while industrialized violence exposed the failed expectations of manliness, reconstruction addressed uncertainty about what it was to be and look like a man."¹⁸ On the other hand, Gagen underlines that gender identity was not invalidated even though some long lasting views did exist on the loss of masculinity due to disabilities.¹⁹ According to Gagen, the strong ideals that existed around masculinity played a dominant role in the definition of masculine identity.²⁰ Along with these scholars, Peter Buitenhuis stressed the way in which military experiences opened an unbridgeable abyss between the schoolboy version of war, including the imagery of knights and angels, and the cruel reality of war in Flanders.²¹

Nevertheless despite the fact that the physical attributes that constructed male identity had been altered by the return of wounded veterans, many of those with physical and mental injuries looked back to their pre-war images of male identity in an effort to reconstruct their post-war lives. The wounded veteran was thus trapped by a cultural gender double bind. The former mascular, virile, stoic, courageous Christian who defended his family and nation was

juxtaposed with that of the wounded veteran who struggled in disillusionment and despair to create a new respectable identity.



Figure 1: Drawing from The Gazette of the Third London General Hospital, October 1918.²²

In an October 1918 drawing (Fig. 1), Hemsley published a drawing about a wounded veteran seated in front of a woman with caption conveying the dialogue between them. With different handicaps that were now part of their lives, men would struggle to maintain their masculinity. The veteran did not want to be seen as a victim. Despite the fact that he has many obvious injuries, he is smoking and capable of making an ironic comment in an effort to maintain his image of a virile man. Along with this interpretation, the simple technique of changing the subjects in the sentences that finish with: "being through a great deal" shows the stoic and humorous response that covers the hidden, unexpressed feelings concerning the veteran's loss of self-esteem and identity.

Wounded veterans and their contact with women

One of the aspects linked to masculinity was obviously a man's capacity to seduce a woman, to have a girl of his own. Having a fiancé or a wife was an expected part of the success in a man's life. Hospital magazines included drawings and love stories that expressed love beyond injury.

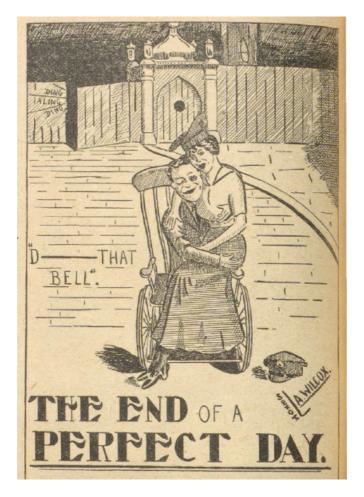


Figure 2: Illustration in The Pavilion Blues, May 1919.²³

Sergent A.Wilcox's illustration (Fig. 2), shows a veteran supporting a woman who is sitting on the arm of his wheelchair. Both characters are happy, the woman does not seem to be troubled by her companion's handicap. No one else appears on the drawing, they are alone. The veteran does not want to go back to the hospital as he states "Damn that bell". It is clear that the man has spent a lovely day in the company of the woman. The fact that they are drawn alone, as if secluded from the rest of society and that the woman is wearing the man's hat allows the reader to draw different interpretations from the scene. Indeed, while the man is still in hospital and has not returned to normal life his masculinity is not questioned. But when he will finally be

discharged, this peaceful and happy atmosphere will take a different turn. The woman will have more responsabilities in the house and will, like her partner, be subjected to judgements from society. The man would obviously lose his male role of breadwinner. For those who were less severely wounded or who had recovered from their injuries the courtship of women allowed men to recover their confidence.

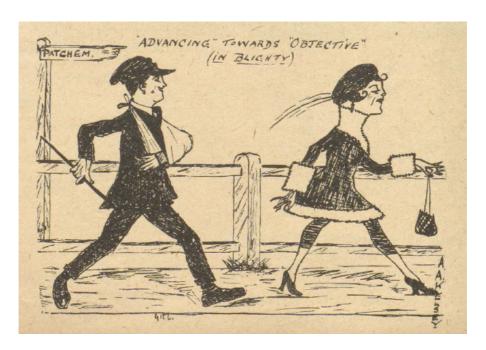


Figure 3: Illustration in The Pavilion Blues in May 1919 entitled: 'Advancing Towards Objective'24

In a 1919 illustration in *The Pavilion Blues* (Fig. 3) a convalescing veteran is on the offensive to win a partner. His stride is determined and confident. Instead of advancing towards the Germans, the objective now is a future wife. Just as he was resolved to advance towards the objective in the war, so he is equally strong-willed in his pursuit of a future wife. He is back home in Blighty and wants to rebuild his life as a future husband, father and breadwinner. His desire to reintegrate in society is a strong motivation. The man having regained most of his physical capacities and thus his masculinity is now able to regain confidence in himself and approach women. On the other hand certain veterans who had low self-esteem found themselves in potential relationships where the expected courtship roles were reversed.



Figure 4: Drawing from The Gazette of the Third London General Hospital, May $1919.^{25}$

In Dowd's 1919 drawing (Fig. 4), the famous saying: "None but the brave deserve the fair", meaning only those who are courageous and unafraid will find success, or in with particular reference to veterans, only a courageous and gallant soldier deserves a beautiful woman, has been inverted, the sentence is now "None but the fair deserve the brave". The man and the woman have switched positions in the saying but also in the drawing. The woman is in control of the situation while the man does not even dare look at her, he is very coy and shy. Their body language is also inversed: the woman adopts the behaviour and the seating position of a man while the man looks more effeminate. She is chewing on a stem while the man is playing with the button of his shirt. The veteran clearly appears to have lost his self-confidence even though

the saying on the drawing highlights his bravery. He fought, he was wounded and for these reasons he deserves the fair maiden.

While looking at the relation wounded men had with women, one has to also consider the role of nurses in these men's road to recovery.



Figure 5: Drawing from The Gazette of the Third London General Hospital, February 1919.²⁶

In a February 1919 drawing of Dowd (Fig. 5), one can see an amputee dancing with a nurse. They are both smiling and seem to be having a good time. The nurse's arms surround the man's torso as if she was supporting him. Despite his handicap the man is taller than the woman and is confident in his masculine role. The incongruity of the scene can also be noted in that the body bears the trauma of war but the scene is joyous.

The two possible interpretations, one of the rehabilitated veteran and the other of the veteran whose supported by a woman offer the reader an insight into the oscillating feelings

wounded veterans experienced. Contact with nurses was not always as happy as in Dowd's illustration.



Figure 6: Drawing from The Gazette of the Third London General Hospital, June 1919.²⁷

In Private Harman's 1919 drawing (Fig. 6), the nurse appears once again as a redeemer. The soldiers are grateful for the help the nurse has given them and therefore place the nurse on a pedestal. The nurse is like "the statue of liberty" providing a beacon of light. Nevertheless, the way the soldiers are drawn reveals their varied feelings and the public's possible vision of them during this post-war period. Clearly, the soldiers are attached to and dependent on the nurse. The woman is positioned above the men which makes the men even more vulnerable than they already are. One of the soldiers is kneeling on the floor praying, two others are looking at the

nurse in admiration. A fourth man is in bed and his face is partially hidden. There are a number of thoughts running through the minds of the men: vulnerability, a lack of independence, loss of masculinity, reliance on and admiration for nursing staff. In Private Harman's 1919 drawing (Fig. 7), the role of nurses in caring for severely wounded veterans takes on a more pitiful tone.

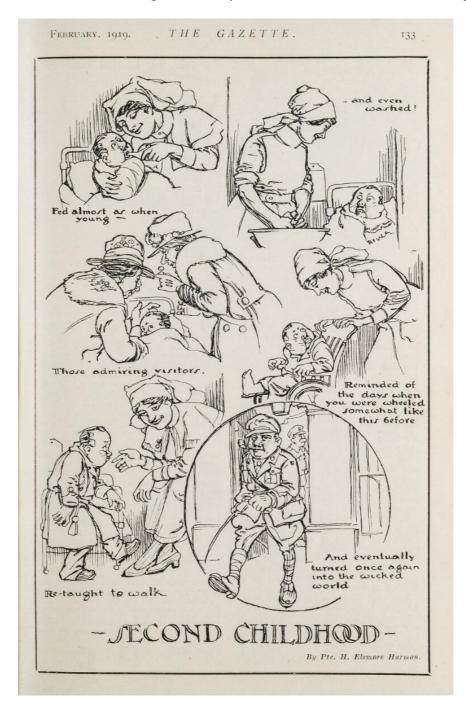


Figure 7: Drawing from The Gazette of the Third London General Hospital, February 1919.²⁸

The message of the title of this drawing "Second Childhood" is clear, the veteran is back to being a child and needs to be cared for. Through the different scenes, the wounded veteran's recovery is paralleled to the care and development a baby experiences. The veteran, like a baby, is fed, washed, has admiring visitors, is pushed around in a wheelchair as if in a pram, is taught to walk and finally enters the real world. The nurse is seen here in a motherly role.

Despite the moral message transmitted to society, particularly the fact that women had the duty to care for and nurse handicapped soldiers, this never erased the feeling of pity the men experienced. As Joanna Bourke puts it: "commentators returned to time and again: women were emasculating men. Their pity was stifling".²⁹

Soldiers wearing hospital blues

During the war, while women adopted clothing representing their independence wounded soldiers wore uniforms reinforcing and at the same time compromising their masculinity. As Ward Muir underlines in an article about Dowd's drawings involving a soldier named Donovan: "The convalescents wearing those brilliant blue suits which are so piquant a touch of colour for England's climate could tell us strange tales of their sensations on being wounded." ³⁰

On his return home, a wounded soldier was either sent to a specific hospital according to his injury or sent to a convalescent care facility. In these institutions he was given a blue shirt and a blue pair of pants, a white shirt and a red tie. He also wore his military kepi with his regiment badge. This uniform was called the "hospital blues", "hospital blue", "blue invalid uniform", "hospital suit" or "convalescent blues". This uniform was large and badly tailored. Men had to often fold their sleeves and pants to the appropriate size. In *Healing the Nation*³¹, Jeffrey S. Reznick dedicated an entire chapter³² to the blue uniform of wounded veterans. Since the beginning of the 19th century, authorities in correctional homes, prisons, and schools had realized the benefits of an institutional piece of clothing as a means of insuring personal and group hygiene but also as a way to preserve discipline and order within the institution. It was

for these reasons that the country's authorities decided to put into place the "hospital blues" at the beginning of the Great War. Military authorities required that this uniform be worn by all soldiers who were receiving treatment in a military hospital or in a convalescent care facility. Officers did not have to wear this uniform instead they were given a white armband with a red King's Crown on it along with civilian clothes. This distinction tended to classify the officers as a class above other men. The fact that officers did not have to wear the blue uniform categorised the others to a lower rank.

This uniform had sanitary benefits as they were a means to establish and maintain "cleanliness in the hospital, where soldiers usually arrived in dirty, worn-out and infested uniforms and 'greatcoats' that required sterilization and thorough disinfection."³³ It also had administrative advantages for hospitals. In order to gain efficiency, hospitals categorised men in four different sections according to the severity of their wounds. This differentiation was done thanks to the blue uniform and the colour of each man's armband which corresponded to the type of wound.

Furthermore, the blue uniform was a means to maintain discipline in and out of the institutions. Within the facilities, the uniform allowed a distinction between the personnel and the patients. In some facilities reserved for wounded soldiers only, the uniform was used to maintain good behaviour. At Shepherd's Bush Hospital for example, if men attended the workshops they could obtain the right to wear their military uniform instead of the blue uniform.³⁴ The authorities asked men to wear their blue uniforms outside the institutions as a reminder that they were still part of the military corps subject to sanctions for transgression such as simulating a health problem or drunkenness.³⁵

At the beginning of the Great War, certain groups of women harassed men who did not wear a military uniform, considering them as not playing their part in the war effort. They gave them a white feather as a symbol of their cowardness³⁶. Nicoletta F. Gullace underlines that for

most women of the time, one of the symbols of masculinity was courage which was expressed in the military uniform.³⁷ She also notes that these women sometimes gave white feathers to wounded men dressed as civilians. The blue uniform was in this way a form of protection for wounded soldiers. These men were publicly exposed and this could facilitate the appreciation of their service to the country.

This blue uniform worn by wounded soldiers had a major role of propaganda during and after the war. It helped to put the wounded veteran on display and was thought to facilitate public appreciation of his service to King and Country.³⁸



Figure 8: Drawing from The Gazette of the Third London General Hospital, December 1918.³⁹

Hemsley's drawing (Fig. 8) illustrates the reaction some members of the public had when they encountered a man in his hospital blues. The woman in the drawing is dressed extravagantly, almost overdressed in hat, gloves, tailored overcoat and good shoes. She has a supercilious

smile on her face. By contrast, the one-legged soldier is dressed in his oversized plain hospital blues. He has a forlorn look on his face. The contrast in their physical appearance is reinforced in their comments. The woman's proposal to kiss the soldier is insincere, artificial and false. The soldier's response is blunt and honest. He resents her suggestion to kiss him and is indirectly resenting her pity. He has suffered enough physically and does not want to suffer emotionally by being an object of pity.

In March 1928 a correspondent's letter in the *Dover Express* explains the impact of this uniform during the post-war period: "Eleven years ago the sight of a blinded soldier in his hospital blue or khaki uniform aroused in all thrill, not only of sympathy, but of high admiration for the wonderful way these men were overcoming their great loss." This quote is perfectly illustrated through Dowd's drawing published 10 years earlier (Fig. 9).



Figure 9: Drawing from The Gazette of the Third London General Hospital, October 1918.⁴¹

In Dowd's 1918 drawing (Fig. 9), a convalescent soldier approaches a bus as policemen hold back the crowd cheering the soldier. On the bus, some passengers offer him their seat while others offer him cigarettes. In the street an old man acknowledges the soldier and tells him: "Hail, Saviour and Protector!". The scene and reactions of the public seem to be so exaggerated that the drawing provokes a feeling of both humour and ridicule. To a certain degree the obligation to wear the hospital blue further categorised these men to the level of school children.

However, from the point of view of the convalescent men, the uniform was not always an emblem of pride. For example, in 1928, the patients of the Ministry of Pensions' hospital in Leeds considered it an injustice to wear this uniform:

We should much prefer to wear our civilian clothes, especially when we are outside the hospital but this is strictly disallowed. There is no glamour about these shapeless blue suits now, and by the way some people look at us we cannot help feeling that they must think we are "swinging it" to be in hospital so long after the war.⁴²

The men experience no pleasure in wearing their uniform. In their view, this piece of clothing does not help them to receive better consideration from the public but, on the contrary, it makes their life more difficult.

In the same year, a press article reports the story of fifty veterans in convalescence at the Ministry of Pensions' orthopaedic hospital of Newcastle.⁴³ One evening, these veterans decided to venture out of the hospital in their civilian clothes. After having wandered in the streets, they decided to go back to the hospital. On their return, they were refused entry into the institution. After long conversations, the men were allowed back in but were warned that they would have to answer for their actions to the colonel in charge, a decision which clearly had military connotations. It is added that it was the second time that the soldiers had protested against wearing the hospital blue.

Objects of curiosity

Hospital visitors were sometimes curious to see whether the loss of a limb, the effects of shell shock or other injuries had diminished the patient's masculine identity or in extreme cases dehumanised him to the level of an object. Silence often became a refuge for wounded men confronted with insensitive questions, observations and judgements of visitors.



Figure 10: Drawing from The Gazette of the Third London General Hospital, December 1918.44

The veteran in Hemsley's drawing (Fig. 10) has chosen silence and a written poster as his form of communication with visitors. He does not want to communicate orally with the woman. He has written on the poster the answers to the questions that he anticipates she will ask. He has been wounded in the left leg, has been gassed and now that he is feeling better he will soon be going back to the front. There is both despair and resilience in the soldier's way of satisfying enquiries. Even though some civilians were sincere in their visits and questions, veterans must have suffered from a lassitude of always having to answer the same questions.

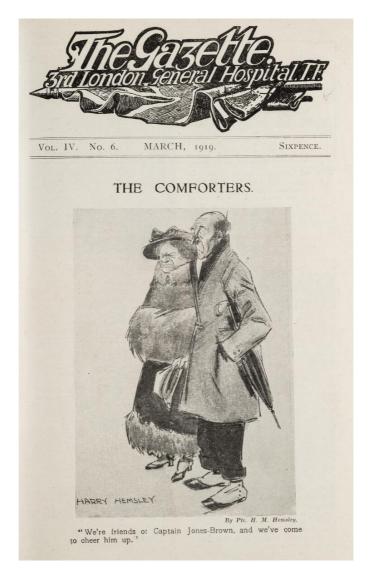


Figure 11: Drawing from The Gazette of the Third London General Hospital, March 1919. 45

The intention of visitors is also targeted in another of Hemsley's drawing's (Fig. 11). The two characters in the drawing describe themselves as being the soldier's friend and say they have come to cheer him up. However, the man and the woman are not smiling and look austere. This couple is unlikely to brighten anyone up which makes their statement: "we've come to cheer him up" ironic. These visitors will not be of any support for the soldier, more likely they have come to see the man out of curiosity. Ward Muir writes about this in an article in *The Gazette of the Third London General Hospital* in July 1919.⁴⁶

Curious how many otherwise sane citizens and citizenesses are inflamed with a morbid desire to poke their noses into any and every war hospital at any and every hour of the day!... Whereupon it turns out that the would-be visitor merely yearns, without rhyme or reason, to "look round."

Now, there are very excellent considerations why it is not permissible for inquisitive strangers to "look round" a war hospital. A war hospital and its denizens are not a spectacle to gape and gush over.

Muir criticised the idea that certain visitors to war hospitals had no legitimate reason to visit veterans. In fact their real motives were simply those of curious inquisitive strangers. The title of Muir's article is depicted in a humorous manner.



Figure 12: Drawing illustrating Ward Muir's article from The Gazette of the Third London General Hospital, July 1919.⁴⁷

The illustration by H. E. Harman (Fig. 12) in Ward Muir's article titled "Varied Memories" shows a group of people visiting a veteran in hospital. The visitors include a smiling well-dressed woman, a serious older couple and a priest or pastor holding his hands in a praying position. The four visitors are all leaning slightly forward but at a distance from the patient in his bed. There is no close contact between the man and his visitors. The veteran is lying in bed with only his face uncovered. He looks worried and alienated. There is no written dialogue attached to the drawing but the lack of spoken words or silence provokes the reader to simulate a non-expressed conversation between the man and his visitors. The visitors would ask questions tainted in pity and curiosity, making observations, judgements and comments on the man's loss of identity. The man himself would be asking questions about the intentions of his visitors and what memories of them he would take with him when he eventually left hospital.

The self-doubts that he encountered surrounding his identity as a man came from the observers, the visitors who often came to hospitals out of pity and curiosity.

The idea that a veteran could be relegated to another status than the one of a human being also appears in the following drawing by Hemsley (Fig. 13.):



Figure 13: Drawing from the Gazette of the Third London General Hospital, June 1919.⁴⁸

The patient present in the first drawing at the top is sitting in his bed and hears a conversation coming from the room next to his. When he hears the conversation the man starts to panic. In the second drawing we understand that the voices are coming from a room where two men are restoring a chair for a charity event. Despite the thin line between tragedy, horror and humour, one cannot but perceive the uneasy feeling of the veteran who underwent complicated surgical procedures. The cold medical announcement to amputate a wounded soldier no doubt had a

devastating impact on the victim. The medical procedures that the man could be forced to undergo are linked to that of a piece of furniture that could be sawed, stitched and repaired. The veteran is completely dehumanised. This dehumanisation could often lead to the feeling of marginalisation, a notion that is reflected in the following drawing:

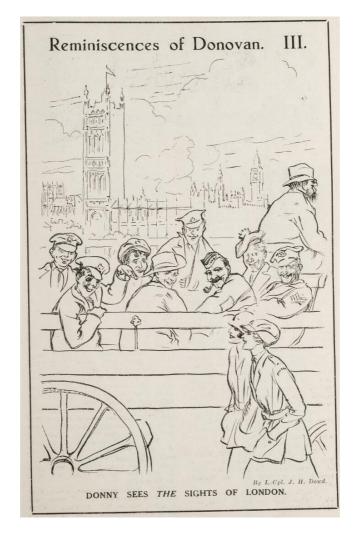


Figure 14: Drawing from The Gazette of the Third London General Hospital, December 1918. 49

In Dowd's drawing (Fig. 14) all the veterans are seated in a cart and are visiting the sights of London. However, these men are more interested in the sight of women, as potential partners, rather than the other sights of London. As they pass the Houses of Parliament, the men are busy looking at two women walking in the street who smile back at them. Even though these men are driven around the streets of London as a special treat, putting the men together in the same means of transport reinforced their difference. The veterans are supposed to be there to see the

sights but eventually they become an attraction for bystanders, curious to see what scars the Great War had left on these veterans.

Shell-shock: an unforeseen disorder

After the war, the majority of mental disorders were categorised as "neurasthenia". But several other terms also existed such as "nervous anxiety", "debility", "nervous debility". This reflects the lack of clarity and precision that surrounded this disorder. In 1922, the War Office Committee of Enquiry into "Shell-Shock" in defining the term "shell-shock", included mental disorders, emotional disorders and concussion. ⁵⁰ Even though, the Committee tried to define the term "shell-shock", the concept remained vague. A general at the time noted: "'shell-shock' as I understand it is a very wide term applied to a great many different things, and I have heard of people suffering from 'shell-shock' who were perhaps merely frightened, and other people purporting to be suffering from 'shell-shock' who were really suffering from what was undoubtedly a derangement either of nerves or of health, which was very serious". ⁵¹ The causes of shell-shock gave birth to different theories: malingering ⁵², moral weakness ⁵³, the existence of predispositions ⁵⁴, hereditary causes ⁵⁵ and Freudian theories ⁵⁶, all which reflected the lack of understanding around this new disorder during the post First World War period.

Symptoms such as nightmares, fatigue, obsessive thoughts, inexplicable pains and trembling characterized shell-shock.⁵⁷ These symptoms were often questioned and incomprehensible for the society who had never witnessed them before.



Figure 15: Drawing from The Gazette of the Third London General Hospital, October 1918.⁵⁸

Hemsley's 1918 drawing (Fig. 15) underlines the public's misunderstanding of shell-shock. Here, the woman questions the man about his shaking. The soldier then answers that it's because of the jelly he was given in hospital. Hemsley approaches the issue of shell-shock with humour. Instead of giving a direct and honest answer to the woman's question concerning the symptoms of shacking, the soldier dismisses the problem with a humorous response. The soldier's response was typical of the societal expectations that often required veterans to support their handicap with stoicism and humour. In the illustration, the veteran puts on a front to cover his unspoken sensitivity and desperation.

When psychiatrists were confronted to war veterans with mental injuries, they were confused about which treatment to give to these men. Doctors had never received any training in psychological problems and therefore were at a loss on how to treat such disorders.⁵⁹ The large variety of medical responses given as treatment for mental trauma such as electric shock⁶⁰,

talking therapies⁶¹, hypnosis⁶² and hydrotherapy⁶³ all indicate the confusion surrounding shell-shock.



Figure 16: Drawing from The Gazette of the Third London General Hospital, July 1919.⁶⁴

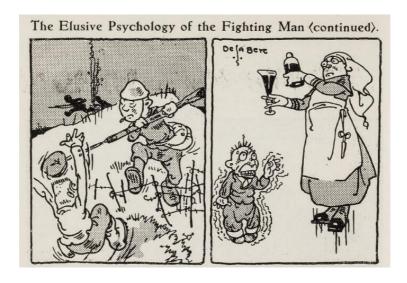


Figure 17: Drawing from The Gazette of the Third London General Hospital, July 1919.⁶⁵

Lieutenant S. Baghot de la Berre illustrates a soldier who was exposed several times to shellings and enemy attacks (Fig. 16,17). In the last drawing, the veteran in his hospital blues is physically impaired, he is shaking from top to bottom and looks exhausted. The veteran is clearly suffering from psychological problems due to his exposure to explosives. He is anxious and frazzled. The nurse by his side gives him what looks like a syrup, probably a tonic, the only remedy found at the time to calm the poor veteran. This drawing draws attention to the fact that: "Psychiatry's performance during the war could not be relied upon as a source of comfort. Shell shock exposed an era of mental medicine about which many asylum doctors knew little".66

Conclusion

First World War wounded soldiers came back to a country in which society had strong norms and values when considering the role of men. During the 1920s, a man was frequently judged on his physical performance, particularly in employment where manual labor was still common. Even though historians such as Deborah Cohen⁶⁷ have pointed out a change in the characteristics associated to masculinity in the post-war years, many of the symbols and images of masculinity of the pre-war period continued to be dominant and deep rooted in the minds of men and women. Disabled men were under pressure to maintain their masculine status

according to the norms imposed by society. "Relegated to silence, disabled veterans in Britain became mute objects of gratitude, rather than subjects in their own right. Their vaunted cheerfulness just as often masked despair."

The drawings in this article highlight some social and identity issues wounded veterans were confronted to. With simplicity and sometimes humour, veterans expressed their feelings concerning their return to the country. This homecoming was often synonymous with a marginalisation but could sometimes have a tinge of hope.

Notes

¹ Carden-Coyne, Ana. *The Politics of Wounds: Military Power and Medical Patients in the First World War.* Oxford: Oxford University Press, 2014, p. 279.

² Ward Muir. "In Hospital and Out." *The Gazette of the Third London General Hospital*, March 1919, p. 150.

³ Bourke, Joanna. *Dismembering the Male: Men's Bodies, Britain and the Great War.* London: Reaktion Books, 1996, p. 11.

⁴ Ibid.

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