

## **Broken Men – Shell Shock, Treatment and Recovery in Britain, 1914-1930**

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With a few exceptions, the history of shell shock in Britain has focused primarily on doctors' and patients' responses to mental trauma during wartime.<sup>(1)</sup> In particular, scholars of psychological trauma have investigated doctors' dilemmas in diagnosing shell shock, wartime debates over restoring individual health versus military needs, and the 'crisis of masculinity' this wound represented in European culture.<sup>(2)</sup> The history of mental illness is, however, still a developing field, and one of the areas that begs more research is the experience of traumatized men after 1918, in particular their struggle to restore themselves in work and family life.<sup>(3)</sup> As the focus shifts towards the postwar period, the agency of 'hysterical men' becomes apparent as we find evidence of their struggle to gain respect and assert authority over their diagnosis and the memory of the war. Fiona Reid makes an important contribution to the scholarship on shell shock. She persuasively argues that by studying the shell-shocked soldier in the post-war world, we can gain new perspectives on how the memory of the war was constructed, and changing perceptions the war's most symbolic victims. Reid argues that while shell-shocked men are largely responsible for contemporary British culture's empathy for trauma victims, a reaction against a 'stiff upper lip' image of British manhood, and a collective memory of the Great War as the epitome of catastrophe and futility, shell-shocked men themselves had a very different set of goals about their image and legacy. Today's images of shell-shocked British soldiers as tragic, wasted victims of a hopeless war obscures the more complex realities faced by actual men who were eager to salvage their sense of masculinity and restore their sense of honor as legitimate war victims in the eyes of the nation. Reid's book focuses on the efforts of institutions responsible for the care of these men, in particular the ESWS (Ex-services Welfare Society), as well of the voices of shell-shocked men themselves to recover the attitudes of British civilians and veterans toward mentally ill

victims of war. The trenches and military hospitals were not the end of the story for shell-shocked men, Reid argues, but the first part of a long ordeal for disabled men as they sought respect and self-determination in the world of work, family and political and economic restitution.

Reid's book is organized thematically, with chapters that focus on the experiences of these men through the landscape of the trenches, asylums, welfare offices and life as civilians. Reid begins by providing background on the battlefield experience of shell shock to highlight the diversity of symptoms and problems raised by psychological wounds. While post-war veterans' organizations would successfully create a special, empathetic place in public memory for shell-shocked men, during the war men received inadequate and often dismissive treatment from skeptical doctors who were not equipped or trained to cope with the enormous influx of traumatized soldiers. Not all military doctors, however, scorned these men who broke down when faced with their masculine roles as the nation's warriors. Viewpoints among doctors and the public varied as pre-existing attitudes towards 'weak nerves' as a symptom of unmanly disposition competed with growing disillusionment with the military high command and traditional values. Sympathy for shell-shocked men, coupled with growing criticism of callous military doctors, led to civilian campaigns to raise money for special war neurosis hospitals. These campaigns were partly successful and some positive press reports helped generate support for mentally ill veterans, but widespread perceptions linking shell shock and 'madness,' and persistent skepticism about a breakdown of masculinity, continued to hang over these men. One of the first attempts at public support was the 1915 War Pensions Bill, which tried to free men of these stigmas with flexible categories, but diagnostic and linguistic confusion over the meaning of 'shell shock' frustrated war victims and their families as they sought economic security and respect. Medical and military leaders tried to project an image of control to downplay these problems, which actually fueled growing sympathy for traumatized men as unjust victims of the establishment.

In her analysis of how military doctors approached shell-shocked men, Reid rightly stresses that historians must keep in mind the context in which these doctors encountered this elusive wound. On one hand, socially conservative doctors were skeptical that 'shell shock' was really just a form of malingering by weak-willed men, but doctors also saw themselves as vanguards of social progress who advocated humane healing and were caught between the interests of the military – namely to send men to the front – and the interests of medicine. The hard pressed RAMC (Royal Army Medical Corps) had to take in an increasing number of civilian doctors who believed that the interests of army discipline resulted in the neglect of ordinary soldiers' health. However, most RAMC doctors, regardless of their perceptions of shell shock as a legitimate or faked injury, were hesitant to engage fully with the problems posed by this wound. Most were untrained in psychology, a field still widely disdained, and they labelled the complex, myriad symptoms of shell shock as another form of shirking. At the same time, these soldiers who lost their self-control and displayed tics, tremors and other visible forms of trauma despite their invisible wounds drew compassion from some doctors and the public. This empathy for men who appeared to lose their manhood would become the basis for the post-war constructions of shell shock as a 'special' wound. Even as doctors and the military mismanaged shell shock, the kernel of compassion for men 'whose minds the Dead have ravished,' as Wilfred Owen famously observed, set the scene for post-1918 memory of the war.

Reid effectively compares and contrasts perceptions of shell shock 'from above' with opinion 'from below.' While the British government saw shell shock as a distasteful subject that it wanted to forget, for shattered men, their dependents, and much of the public, the traumatic memories of the war were impossible to forget. Shell-shocked men attained a unique cultural status in the 1920s, as they were portrayed in popular literature as symbols of a disastrous, futile war. The political left used shell shock to criticize Britain's role in the war and the unjustified execution of 'cowards' at the front. Beyond just the question of rehabilitation, shell shock raised questions over commemoration of the war. While critics of the war used shell shock to shout 'never again' and 'never forget,' most traumatized men, many of whom were trapped in insane asylums and economically destitute, sought to be remembered as 'honoured' survivors of a 'glorious' war. To meet the practical needs of shell-shocked veterans, and promote their memory as legitimate, respected war victims, sympathetic civilians and veterans set up the ESWS to battle doctors and politicians who wanted to forget the 'lunatics'. At first, the ESWS concentrated on reforming the system of treating mentally disabled

veterans, in particular, liberating them from the squalid asylum system. However, the ESWS faced resistance from the pension bureaucracy, which shell-shocked men found frustrating and insensitive to their complex problems. Further, while the ESWS found some success reforming the lunatic asylums, public perceptions of 'neurotic' men were tarnished by negative media images of shell-shocked men as dangerous or morally corrupt. Thus, by the end of the 1920s, the ESWS distanced itself from lunatic asylum reform, as many in the public still conflated chronic 'madness' and 'shell shock,' making it difficult to win pensions and political support.

Reid demonstrates that to be successful, the ESWS had to devote its activities to men who possessed enough self-control to be on the verge of reintegration into work and everyday life. By the end of the 20th century, the archetypal image of the shell-shocked soldier was one of a pitiful wreck, a ghost-like shell of a once intact man. However, in the late 1920s, the ESWS worked tirelessly to debunk this image that was being solidified in the literature and popular culture. Instead, activists asserted, shell-shocked men were hard-working, easily assimilated, dedicated men who could restore their masculine character if given a chance by employers. Shell-shocked men continued to be haunted by their memories of the trenches, and despite their nightmares, tremors, and other disturbing symptoms, worked to restore their status and present themselves as ordinary, recovering veterans. Despite their efforts, Reid argues, by 1930 shell-shocked veterans were in more dire circumstances than at the beginning of the decade, as health care and job resources were in decline in the wake of the Great Depression. However, the ESWS had largely succeeded in discrediting perceptions of shell-shocked men as unproductive malingerers, and the organization built positive relationships between the government's pension system and shell-shocked men and their families.

Reid's study adds new insights to the growing scholarship on shell shock. In particular, by concentrating on the post-1918 experiences of traumatized men, she is able to shift the focus from evidence left primarily by doctors to letters and other sources that document veterans' perspectives. Most intriguing is Reid's analysis of how men attempted to reclaim authority over their minds and identities, especially as they fought to prove their manhood and productivity in their families and society. Reid demonstrates that scholars dealing with shell shock have much to gain, and more ground to cover, by looking at the voices of traumatized men and contrasting their memories and conceptions of shell shock with the military, medical and political establishments. While Reid astutely develops her arguments over the course of her chapters, the book could be strengthened with a more developed introduction. In particular, it is important for historians to directly address the larger historiographical significance of their work, and Reid's introduction would have benefited with a more precise analysis of how her work relates to existing scholarship on British shell shock, in particular studies by Peter Leese and Elaine Showalter, whose work on the bureaucratic pension labyrinth and battles over gender roles are essential. Further, though it would not have been necessary to distract from her well-focused chapters with comparisons across national lines, Reid's introduction and conclusion might have been enriched with some comparisons of the experience of British men to 'war neurotics' in Germany and the 'walking dead' in France. Extensive studies of mental trauma in those contexts, even in the interwar period, would make for interesting comparative analysis, especially in terms of strategies taken by war neurotics to attain economic and political status, their different memories of the war, and debates over how to describe the traumatic wounds of war. Nevertheless, Reid's well-written, engaging prose, command of her sources, and thoughtful analysis of grass roots efforts to defend 'hysterical' men make this a successful book. Specialists in trauma studies and the social and cultural effects of the war, as well as a broader audience of students interested in the history of memory and representations of the Great War, would benefit greatly from adding Reid's work to their libraries.

## Notes

1. A fascinating study of post-1918 experiences of traumatized veterans is Peter Barham, *Forgotten Lunatics of the Great War* (New Haven, CT, 2007). [Back to \(1\)](#)
2. A key work on British shell shock is Peter Leese, *Shell Shock – Traumatic Neurosis and the British Soldiers of the First World War* (New York, NY, 2002). [Back to \(2\)](#)
3. A study of postwar French soldiers' experiences with mental trauma includes Gregory Matthew

Thomas, *Treating the Trauma of the Great War: Soldiers, Civilians and Psychiatry in France, 1914–1940* (Baton Rouge, LA, 2009).[Back to \(3\)](#)

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