

World War 1: Trauma and Memory

Historian Fiona Reid talks about developing attitudes to shell shock

[MUSIC PLAYING]

FIONA REID:

Once men returned home they of course faced all the problems of relationships, of families, of sometimes unemployment. And some men found that transition very difficult to cope with. So you have some men who come home and suffer some kind of a breakdown after they've come home. You had some men who came home, appeared to get better, but then suffered relapses in later years. And on the whole there was a level of support for men. But it's a very, very limited level. The government had accepted in 1915 that they simply could not conscript men, send them out into the trenches, and then not support them in any way at all. So there was a statutory pension scheme. And men did claim and were awarded pensions for shell shock. And in 1921, 65,000 men were receiving pensions for shell shock and neurasthenia.

The system was that a man had to go to a board, he had to explain his symptoms, and he would then be awarded a percentage. And he would be told, come back in three months. And sometimes men went on doing that for years. And people found that very stressful. People with mental health problems found that extremely stressful. And then at the end of it you might be told, well you are categorised as having 20% disability, so you get a small pension to supplement your earnings. And so there was a pension system but men felt that it was complicated, it was stressful, and it was also paltry.

Whilst it was possible to be shell shocked and to be considered as respectably wounded, there was a harsher judgement applied to shell shocked men as the 1920s progressed, and it became less respectable. So I think that during the war it was possible to make a stronger distinction between shell shocked men and lunatics, after the war it became much more difficult. The Ex-Services Welfare Society actually insisted that shell shocked men were of a higher status. There was a strong sense that these men ought to be treated properly. But at the same time, on a day-to-day level there was still stigma associated with them.

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There obviously has been a change. But I think that change is largely tied to what we think about the war. So the First World War in Britain is largely seen as the futile war. We have all studied the war poets at school. We have all seen documentaries about men shot at dawn. We all know that 10 million men died in the First World War and that 20 years later we have the Second World War. In AJP Taylor's famous phrase, this was the bad war, the war we shouldn't have had. And for that reason, shell shock is the perfect symbol for this mad war. We have this mad man as a symbol. It's quite different after the Second World War, where despite the Horder Committee, there were people medicalised with psychological problems. But they don't become emblematic of the war in the same way, because the war is viewed differently. So our responses to men who come home are very much tied to the wars they have been in. We're not talking about objective medical categories here.

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It's difficult to say why shell shock has become so culturally important in Britain when it is not in France and Germany, because those countries suffered similarly. Jay Winter has argued-- I think quite effectively-- that shell shock has become so important to Britain because class is really important in Britain. This is something that affected young, elite males. And so the story of their war became everyone's story, because class prejudice is so entrenched in Britain. I think there is something in that. We are much more likely to take on board the story of Siegfried Sassoon, for example, than anyone else. But I also think these empirical explanation, the ones to do with context and contingency, are important too. For political reasons, shell shock mattered in the early 1920s. And so it became embedded in literature, in politics, and in popular memory.

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We don't use the term shell shock to medicalise people who are suffering from war-related conditions. We haven't done, really, since the beginning of the Second World War. Old soldiers in the First World War might still have been referred to as shell shocked. But soldiers in the Second World War were not referred to as shell shocked and haven't been since. Shell shock has entered British life as something very much tied to the First World War and something which is now used in a sort of colloquial sense. When Brazil lost to Germany 7-2. we hear that the Brazilian nation is shell shocked. We use it almost in a sort of flippant way to mean extreme and unpleasant surprise. So the term is still there. It's still within our language as a living remnant of the First World War.

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There is a clear link between shell shock and post-traumatic stress disorder. But it is not the case that shell shock is undiagnosed post-traumatic stress disorder or that post-traumatic stress disorder is what we now call shell shock. Shell shock, as I've said, is this huge basket of categories. Post-traumatic stress disorder is much more defined. Also, shell shock diagnoses were largely framed on the understanding that 'this man has broken down' for one reason or another. It may be his fault, it may not be his fault. But he has broken down. He has demonstrated weakness. Post-traumatic stress disorder is predicated on the belief that whatever it was that produced the trauma it was so extreme that it would produce the trauma in almost anyone. And so the fault lies not in the man but in the war.