



"Broken Men: Shell Shock, Treatment and Recovery in Britain 1914–30. By Fiona Reid. Continuum. 2010; Treating the Trauma of the Great War: Soldiers, Civilians and Psychiatry in France 1914–1940. By Gregory M. Thomas. Louisiana State University Press. 2009; The Politics of War Trauma: The Aftermath of World War II in Eleven European Countries. Edited by Jolande Withuis and Annet Mooij. Aksant. 2010."

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Italianists. It will also certainly be compulsory reading for graduate students interested in modern Europe – and not only statisticians and economists – as it provides definitive arguments for both rejecting previous models of Italian modernization (such as agrarian accumulation, the role of entrepreneurial banks, the crisis of the 1880s, etc.) and reveals crucial under-researched aspects of the economic transformation of the peninsula during the second half of the nineteenth century, especially the determinant regional dimension of Italian development.

When it was first published in Italy six years ago the book garnered mixed reviews (some of them listed on page xxi). Although every reviewer acknowledged the immense contribution of Fenoaltea's thankless reconstruction of economic data and, at least partially, his conclusions regarding the so-called crisis of the 1880s, many of his most distinguished colleagues attacked his radical interpretations of Italian trade policies and his no less radical dismissal of the role of the state in favour of capital flows. The new English edition is greatly enriched by the author's responses to this first salvo of criticisms and, despite not wavering or moving an inch from his initial positions, he greatly clarifies, simplifies and documents all the tenets of his analysis. This added confrontation ultimately results in a potentially fascinating debate between historians and economists regarding the question of agency and rationality (p. 105) and the interpretation of statistical data (p. 142).

All that said, Fenoaltea does not answer some of the most profound arguments raised by his Italian colleagues, especially regarding the very narrow perspective his account adopted and the provocative dismissal of almost all traditional historical agents such as the state, the peasantry, innovators, investors or even the effects of changing social structure. Unfortunately, the same could also be said of the present edition, which should probably have dropped the pedantic definite article and should rather be entitled 'an economist's interpretation of Italian economic history'.

More importantly, though, even if we accept this economic partiality, it seems astounding that the author has failed to perceive the consequences of some of his own analyses. A significant argument of the book, for example, is that national political economy is not the key to understanding the evolution of Italian economic development and that flows of international capital are a better indicator of these cycles. The adoption of an international perspective is indeed perfectly justified, but how could one neglect the social, cultural and economic aspects of what made Italy an attractive (or not) destination for international capital, in particular from Britain? Overcoming the 'old' account of nationalistic political economy does not entail getting rid of states, culture and political economy altogether.

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***Broken Men: Shell Shock, Treatment and Recovery in Britain 1914–30.* By Fiona Reid.** Continuum. 2010. 214pp. £19.99.

***Treating the Trauma of the Great War: Soldiers, Civilians and Psychiatry in France 1914–1940.* By Gregory M. Thomas.** Louisiana State University Press. 2009. ix + 259pp. £53.30.

***The Politics of War Trauma: The Aftermath of World War II in Eleven European Countries.* Edited by Jolande Withuis and Annet Mooij.** Aksant. 2010. x + 369pp. £44.74.

In different ways these three studies address the question of war's psychological after-effects. Together they begin to outline a history of personal, family and social consequences, but also wider questions of nation state policy, collective mentality and transnational commonality. They hint too at a comparative history of traumatic cultures, now just visible in outline, across the full twentieth century.

Fiona Reid's account contributes to a well-established field of investigation – the lives of British soldiers traumatized by their experiences in the Great War – and adds to it by a sustained investigation of treatment through the 1920s. She begins and ends with the

surfeit of images, the debased coinage of 'shell shock' and 'trauma' as terms used within contemporary culture; terms which drown out all other meanings of war in general, of the Great War in particular. To regain a more balanced sense of what 1914–18 meant to the men who were part of it, and the relatives who lived with its consequences, Reid turns to the archives of the Ex-Services' Welfare Society (ESWS). Before attending to this the author considers the history of mental doctoring as it shaped wartime medical, military and civilian attitudes, the treatment of men in France by army medical officers, related thinking on mental illness and asylum reform, pensions policy and therapy. In dealing with this wealth of themes, several of which already have detailed studies of their own, some generalizations are unavoidable.

For example, 'During the First World War military and political authorities persistently argued that shell-shocked men were not mad, or that shell-shocked men should not be treated as mad men. In stark contrast, by the late twentieth century it was the norm to present shell-shocked men as mad' (p. 99). While such a statement tells a general and admittedly undeniable truth, it hides much more subtle attitudes at both ends of the century. For much of the war, afterwards too, there were strenuous efforts not to stigmatize officers, who were a relative minority; however, definitions of what constituted legitimate war trauma contracted or expanded according to highly variable criteria, both at the front and in Britain. Some 'military and political authorities' not only argued, but also (perhaps more importantly) acted as if soldiers and ex-servicemen were best disciplined and hidden as far away as possible. Similarly, whatever its limits, anti-psychiatry did call into question the very notion of 'madness', and since its introduction in 1980 Post-Traumatic Stress Disorder (PTSD) has further nuanced the term among both medical professionals and the wider public. Any sense of how 'shell shock' became conflated with 'trauma' or 'madness' needs to be set on the wider stage of changing attitudes to memory, especially public memorialization, and the increasing medicalization of emotional states by the American Psychiatric Association.

Perhaps of most interest in Reid's account is the history of Thermege, a self-supporting subsidiary company intended to employ 'persons suffering from neurosis or neurasthenia' from 1927. Still, this does not obviously justify Reid's claim that 'retelling the shell-shock story . . . is long overdue' (p. 168). Rather the opposite: almost all of this particular tale has already been told a number of times. By contrast, Gregory M. Thomas capably details the parallel, and so far little described, situation for the soldiers and civilians of France over roughly the same period. Giving equal space to each of these groups, Thomas states his intention to investigate how doctors understood the effects of the war on soldiers and civilians, how this affected their patients, and how war trauma changed psychiatry.

Medical practice is a convenient way into psychological disorders because it provides a ready set of records and obviously ties into wider debates in the history of medicine. Its limitation is the relative absence of the patient's point of view. So, throughout Thomas's book there are vivid individual character portraits which convey personal circumstances, but this account remains in many ways a history of the French psychiatric profession through the war. In particular it shows that professional psychiatrists remained for the most part loyal servants of the state, and that their greatest concern was to strengthen their own professional prestige by the successful treatment of soldiers using electricity, 'counter-suggestion' or re-educative, therapeutic techniques. An absorbing chapter on civilian trauma cases, particularly in the Alsace region, shows how peacetime values direct wartime judgements since constitutionally 'pre-disposed' cases were seen to be most affected by bombardment, while suicide cases were seen to have multiple rather than single points of origin.

Like Reid, Thomas devotes much attention to ex-servicemen, deservedly so, given the unusual generosity with which they were treated. This situation contrasts starkly with the persistent attitudes in other countries during the inter-war period: a charity ethos in Britain and a search for scapegoats in Germany. The 1919 pensions law in France brought in, as

it turned out, a generous system of benefits with the burdens of both proof (against disability) and payment (for costs) on the state. Unsurprisingly, war-neurotic ex-servicemen were at a disadvantage, but found unlikely allies in the medical profession intent on asserting their right to 'own' such disorders, treat the patients successfully, and at the same time prove their continuing loyalty to the state. Nevertheless, as in Britain, the state's response was to evade costs wherever possible, to reject mental cases as non-attributable, not least because they were so difficult to prove, and to target psychiatric cases for economies in the cash-strapped inter-war years. Within these quite confined limits Thomas reaches useful conclusions: as elsewhere, there was persistent under-diagnosis. Part of the difficulty remained the protean, ever-changing symptoms of such conditions, so that they were difficult to diagnose even when medics were sympathetic. As elsewhere, the continued political, fiscal and medical scepticism meant that the apparently dwindling number of recognized cases did not necessarily reflect actual levels of persistent war-related mental disorder within inter-war society.

The new attention given by historians to 'psychological aftermaths' in these two studies is very much strengthened by *The Politics of War Trauma*. This major, multi-author volume is a collaborative study rather than a collection of papers, the result of collective work by two psychologists, two psychiatrists, three sociologists and four historians. Editors Jolande Withuis and Annet Mooij note, moreover, that across the three years of the project the authors had very little prior scholarship as a foundation for their work. From the beginning, then, it was necessary to investigate and collate research systematically across disciplinary and geographical boundaries: to consider the pre-Second World War history of war trauma, wartime events, the very different responses in the years just after 1945, the relevant developments in public memory, politics and medicine, pensions laws and statistics, national traditions and international trends in psychology, as well as the broader social and political particularities of the countries under discussion. After a short, illuminating introduction the first and longest section of the study details the conditions in eleven nations (Austria, Belgium, France, East and West Germany, Italy, Luxembourg, the Netherlands, Poland, as well as Denmark and Norway), while the second section considers comparatively the aftermath of the Second World War, and then describes the 'management of victimhood' into the early twenty-first century.

The question which Reid poses towards the end of *Broken Men*, 'why has the dominant public memory of shell shock become one in which we associate shell shock with victimhood, frailty and futility?' (p. 166), is, in many respects, answered by Withuis and Mooij. Their volume investigates, among other things, the long-term historical dynamic of war memory politics, which, as they demonstrate convincingly, develops in complex, contradictory ways across the continent of Europe, but nevertheless creates a connected history of remembering.

This history ends in the present, with the common media currency of 'trauma' which, Jolande Withuis notes, 'illustrates the radical changes in how we feel severe adversity affects our lives and health, and in how people assess others and themselves as being victims' (p. 1). One of its starting points is the Allied victory over Nazi Germany in 1945 and Europe's responsibility to recognize its human and political losses. In many of the countries under consideration in this study the 1980 introduction of the diagnostic category 'post-traumatic stress disorder' by the American Psychiatric Association leads to a necessary acknowledgement and opening-out of discussions of the psychological after-effects of war. However, this is the end point to other medico-political campaigns for recognition by Vietnam War veterans and by feminists seeking acknowledgement for the effects of various kinds of domestic violence including rape or incest. Especially since the 1970s too there has been a gradual recognition and acknowledgement of what might be called the 'late consequences' of the Second World War, for instance, its lifelong effect on resistance fighters or camp survivors. Noted in passing but not much commented on is the role of film in bringing these discussions into the public eye. The authors mention Alan

Pakula's film version of *Sophie's Choice* (1982), for instance, but two more directly European documentaries – Marcel Ophüls's *Le chagrin et la pitié* (1969) or Claude Lanzmann's *Shoah* (1985) – are perhaps even more important to rethinking how individuals were affected by the war as well as the ways in which societies both forget and remember.

The subject of *The Politics of War Trauma* can be defined more precisely as: first, war-related psychological conditions as they gradually developed after 1945; second, illnesses as they were seen by survivors as well as by doctors and societies; and third, the ways in which certain groups were supported or neglected by their respective nation-states. What emerges is a set of variable conditions across western Europe (eastern and central Europe represented solely by the chapter on Poland) which were above all dictated by post-war politics: Austria's reluctance even to name, let alone support financially, certain groups until after the Kurt Waldheim case (1986); France's reconsideration in light of the Algerian war and the 1992 acknowledgement of *troubles psychiques de guerre*; Poland's crippled political response until after the Cold War, as well as its inhibitions, both historic (martyrological) and financial. One common aspect of this history is in the phases of wartime recollection which invariably incorporate an intense post-war recovery stage, a falling away of numbers, funding and interest in medical research through to c.1960, a gradual reworking of attitudes with the emergence of what Jay Winter describes as 'the memory boom' between 1960 and 1980, and from 1980 the emergence of PTSD, post-memory and the end of the Cold War. Finally, there is a new phase of acknowledgement explored publicly through the cycle of the Second World War anniversaries during the 1990s. Attitudes and finances remain volatile. Nations which pioneered trauma as a medical concept, say, in relation to human rights or torture (Denmark, France, Norway) do not necessarily related it to the Second World War; general acceptance of PTSD, let alone state support for those affected by it, has in other places not yet arrived (Poland, Italy); while in some of the countries where it was most widely recognized in relation to war (USA, UK, Netherlands) the diagnostic category is increasingly criticized.

While all these studies give increasing depth and richness to our understanding of war trauma, they are still small parts in a much larger puzzle. Beyond the immediate politics of pensions or medical diagnostics there is a history of socially situated mentalities, of imaginative expression, of cultural politics in the historical perspective of the twentieth century. Exactly how to grasp this new history is not yet clear, but it should certainly involve the kind of innovative cross-disciplinary approach used by Withuis, Mooij and their colleagues; it should certainly bring together medical practitioners, social historians and specialists in the imaginative arts.

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***The Stalin Cult: A Study in the Alchemy of Power.* By Jan Plamper.** Yale University Press. 2012. xx + 310pp. £40.00.

Surprisingly, this is the first English-language scholarly monograph on the Stalin cult. One reason for this extraordinary dearth is the perhaps equally surprising difficulty of finding good source material on which to base a study. Unlike the Mussolini or Hitler cults, which felt no need to apologize for themselves, Stalin's cult never sat comfortably with the collectivity-focused tenets of Marxism(-Leninism); there is no 'Stalin Cult' section in either party or state archive to which the researcher might turn, for it was never quite official, and, after Khrushchev's 1956 'secret speech', it had become an embarrassment. How can one study something which became omnipresent yet remained amorphous?

Plamper rises to the challenge and certainly did not scrimp on his research. He read *all* of *Pravda* for this period, meticulously counting the various pictorial and textual representations of Stalin. This enormously time-consuming 'leg work' means that Plamper is