

British Journal for Military History

Volume 7, Issue 3, November 2021

Review of *Shell-shocked British Army Veterans in Ireland, 1918–39: A Difficult Homecoming* by Michael Robinson

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ISSN: 2057-0422

Date of Publication: 25 November 2021

Citation: Brian Hughes, 'Review of *Shell-shocked British Army Veterans in Ireland, 1918–39: A Difficult Homecoming* by Michael Robinson', *British Journal for Military History*, 7.3 (2021), pp. 161-163.

www.bjmh.org.uk



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UNIVERSITY OF LONDON

REVIEWS

The book is an important and timely contribution to the history of the First World War. Not only does it build on the growing body of literature on India's contribution to the war, but it speaks to the importance of recognising the global body of non-combatants who served, but rarely form the focus of commemorations or histories.

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DOI 10.25602/GOLD.bjmh.v7i3.1580

Michael Robinson, *Shell-shocked British Army Veterans in Ireland, 1918–39: A Difficult Homecoming*. Manchester: Manchester University Press, 2020. xiv + 253 pp. ISBN: 978-1526140050 (hardback). Price £80.

Michael Robinson's book makes a valuable contribution to two fields of study that have seen significant attention over the last decade or so: the treatment of physically and mentally disabled British ex-servicemen during and after the Great War, and the experiences of Irish veterans returning home from that war. Both are potentially difficult areas of study, if for different reasons. 'Neurasthenia' was potentially wide-ranging and ill-defined, while, unlike physical injuries, diagnosis was often subjective. Records are also comparably scant. A focus on Ireland – where conflict continued after 1918 and the island was ultimately partitioned into two new jurisdictions – brings additional complications. Robinson has done a fine job in meeting these challenges.

The book 'considers, contextualises and comprehends the lived experiences of disabled people in a past society' (p. 6). Its primary focus is on the treatment of shell-shocked veterans in Ireland. The opening chapters are chronological. Chapter 1 examines attitudes to mental illness and to the Irish soldier during the war, followed by Chapters 2 and 3 which treat the veteran experience and official policy in Ireland before and after partition. Chapters 4 and 5 offer case studies of the Richmond and Belfast war hospitals and the Service Patient scheme respectively.

The disabled Irish veteran is worthy of focused study because, as Robinson points out, the social and political context in Ireland was markedly different to Britain. Wider social stigma surrounding mental illness could be exacerbated by pre-existing prejudices, unfounded but regularly articulated in official circles, that regarded the Irish soldier as child-like, as more prone to emotional instability, and more susceptible to breakdown and shell-shock. After the Great War, the Irish War of Independence (1919–21) and Civil War (1922–3) hindered efforts to rehabilitate ex-servicemen, with disruption to transport and government infrastructure, the personal risk faced by staff

travelling around the country, and the potential targeting of ex-servicemen by republicans. Southern and western Ireland would thus 'provide the neurasthenic pensioner with the least favourable homecoming conditions in the UK' (p. 79). The creation of the twenty-six county Irish Free State in 1922 meant that the Ministry of Pensions was the only British institution left operating in this new jurisdiction, creating its own practical – and potentially political – problems.

As interesting as the Irish example is in its own right, Robinson does an impressive job of placing it in its wider context and demonstrates a firm command of several different strands of relevant literature. The book is well-grounded in work on mental illness and disability. Discussion of the provision of treatment and benefits outside of Britain is also introduced when evaluating British success and failure. The conditions and outcomes for ordinary patients in Irish asylums similarly provides important perspective on the treatment of ex-servicemen. Conditions for Service Patients in Ireland were worse in the Irish Free State than in Britain, and this was linked to specifically Irish circumstances. The delay in implementing the Service Patient scheme in Ireland caused problems, and experiences were ultimately local – shaped by the conditions in individual Irish asylums. These had deteriorated significantly during the war, and some – like Clonmel in Co. Tipperary – were particularly appalling.

One of the main arguments running through the book is that the British Ministry of Pensions' approach to mentally ill ex-servicemen was characterized by a mixture of progressive and conservative ideas and policies. Robinson does not hide from British failures, but nor does he ignore efforts at innovation and genuine efforts to provide suitable treatment for patients. Of the Service Patient scheme, for instance, the author concludes that if it was 'a disappointment, then it was, at the very least, a pioneering failure on behalf of a previously disregarded population' (p. 216).

The extent to which ex-servicemen of all shades suffered threat, harm, and discrimination on their return to the twenty-six counties has been a topic of some debate in the historiography of the Irish Revolution. In his examination of shell-shocked veterans in this context, Robinson's analysis is balanced and ultimately convincing. British army veterans were not openly victimized by the new state, but nor were they given any concessions or favours (unless they had subsequently joined the state's National Army, in which case they received the same benefits as other National Army veterans). The reasons ex-servicemen were targeted for violence were complex, and not necessarily always linked to service in the British forces. But, as Robinson suggests, perceptions about and the fear of violence was also significant, and perhaps even more so when it was widely recognised that the surrounding environment played such an important part in the recovery of mentally ill patients.

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Similarly, finding meaningful employment – again deemed a crucial part of the treatment process – was more challenging in the Irish Free State where unemployment was significantly higher. There were some cases of discrimination, and the King's National Roll system was not introduced owing to resistance by republicans and trade unionists, but there is little evidence of systemic efforts against ex-servicemen (indeed, anti-Treaty republicans would also complain about unemployment in the aftermath of the Civil War). Importantly, societal prejudice and reluctance to accept the potential financial impact of hiring shell-shocked veterans whose symptoms could be unpredictable also fatally hampered the Ministry of Pensions' policy of voluntarism and cooperation from civil society.

This is a book that will be of great interest to scholars of the Irish Revolution and its aftermath, those interested in the welfare of Great War veterans across Europe, and the history of medicine more generally. It deserves a wide readership, and it is to be hoped that the publisher releases an affordable paperback soon.

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DOI 10.25602/GOLD.bjmh.v7i3.1581

Jeremy A Crang, *Sisters in Arms: Women in the British Armed Forces during the Second World War*. Cambridge: Cambridge University Press, 2020. xii + 341 pp + Index + 46 images. ISBN 978-1107013476 (hardback). Price £25

600,000 women served in the British armed forces during the Second World War. Entering the most masculine of realms, these women took on a variety of roles. These ranged from the resolutely feminised (for example cooking and cleaning) to, despite the enduring combat taboo, near combatant roles (such as gunners in anti-aircraft batteries). Their service threw up often intractable questions about femininity, masculinity, British society and even the role and construction of the military itself. In *Sisters in Arms* Jeremy Crang presents a new history of these militarised British women during the Second World War. *Sisters in Arms* is a comprehensive analysis of the organisation and experiences of British women's military service during the Second World War, covering their service from volunteering or conscription until their demobilisation at the war's end. Looking collectively at the Auxiliary Territorial Service (ATS), Women's Royal Naval Service (WRNS), and the Women's Auxiliary Air Force (WAAF), Crang presents a wide-ranging study of the operational decision making in these forces themselves as well as discussing state level opinions and decisions regarding the auxiliary services.