Marina Larsson: Shattered Anzacs: living with the scars of war. University of NSW Press: Sydney 2009. Reviewed by Josef Berghold, University of Klagenfurt

Marina Larsson's new and compassionate study sets out to fill an important gap in the historical analysis of the First World War. On the one hand, the author complements a growing corpus of studies which investigate the emotional impact of this war, personal and collective, and ranging from the battle front to the home front. Several studies have examined loss and grief in connection with official commemorations for fallen soldiers; others have investigated the long-term effects of war trauma, including shell-shock. Larsson's unique contribution is to adjust the emphasis of the emotions from the fallen soldier or war widow to the families or kin of wounded soldiers. As she writes, "Thousands of Australians have a 'shattered Anzac' in their family history" (17). Thus in a way her study of physically and mentally impaired Australian soldiers is also an ambitious study of twentieth-century Australian family history. Indeed, on page 280 we discover that Larsson's grandfather was severely wounded after "being at the front for only a matter of weeks" (279) and shortly thereafter "invalided home to Australia."

The book is organised chronologically. After an introduction that outlines how this is not only a study of war-time disability but also a life-history of invalid veterans and their caregivers, chapter one begins with the first decision of young Australian men (often in discussion with their family) to enlist. According to Larsson,

During the war, 40 per cent of Australian males between the ages of eighteen and forty joined up [...] including 50 percent of all single eligible men" (32).

Larsson then briefly explores many reasons for joining or not. For example, "Men who remained at home cited a fear of death and disablement as well as a complex array of personal and situational reasons, including family responsibilities, pacifism, and business commitments" (34). Many of those who enlisted—in part due to crucial financial considerations (ibid.)—openly admitted to fears of death or

disablement, as did their families on their behalf. Larsson then takes great pains to elaborate the emotional bond of hope, anxiety, fear, and support, once the son, brother or husband is serving, or at the first injury, basing herself, for example, on war correspondence found in personal papers at the Australian War Memorial Archives or the National Library of Australia and on published collections of letters memoirs and letters. Larsson also points out the silences in many letters, including those which were largely not censored by military hospital authorities, as well as possible discrepancies between a wounded soldier's letter and that of his nurse. Much of this chapter also establishes the pervasive Edwardian codes of manliness to which these men and their family members apparently strongly adhered.

Chapter two continues the journey home: both in terms of disabled soldiers' reunification with family members—and the hope and trepidation felt on both sides, as a "changed man" has returned, and not the one last seen as "fit"—and of public welcoming ceremonies, demonstrating the official recognition of war service. At the same time, personal recognition might lead to something else altogether, as in this coming together some people also grew apart. For example, Larsson states that "After the war there was a significant jump in the divorce rate" (81), and yet "Between 1919 and 1921, there was a sharp increase in the number of marriages in Australia" (82-83).

Chapter three investigates the financial burden placed on returning disabled veterans. In large part, Larsson focuses on the enormous struggles families had to make ends meet—in a society in which men were legally and culturally the family's breadwinners. Indeed, the 'family wage' principle established by the Harvester Judgement in 1907 "recommended that women's wages were set at about 54 percent of the male wage in most industries, even if a woman was the primary breadwinner" (107). With state funding for disabled veterans limited, dependent women (mothers, wives, daughters) were expected to step in as caregivers—sometimes for the remainder of their lives. Moreover, in many cases the disabled soldier alone could

not earn a decent family living. Thus, the Australian Soldiers' Repatriation Act "effectively consigned the disabled soldier families to the ranks of the working poor" (95), and the Repatriation Department seemed oblivious to the fact that if disabled men could not earn a decent wage, their families were forced into long-term poverty. And yet, "Disabled soldiers with professional or clerical skills often became good providers" (111). Where the State ignored its responsibility, charities such as the Red Cross, the Tubercular Soldiers' Aid Society, the Return and Services League and the Returned Sailors' and Soldiers' Imperial League of Australia moved in—at least for those who were willing or desperate enough to reach out to them.

From Chapter four onwards, as Larsson explores family life in interwar "normality," she makes use of eleven oral history interviews she conducted (mostly in 2004) with select children of disabled soldiers, including her aunt, all of whom were born between 1922 and 1932. Clearly, as the soldiers aged, as families grew, burdens tended to increase. So too might the unseen yet lingering physical and psychological wounds inflicted during war, such as shell shock or tuberculosis, two "cases" which Larsson examines in particular, in terms of the impact not only on the ex-soldier but also on his extended family. Larsson states that "The significance of the family as a therapeutic site for disabled ex-servicemen should not be underestimated" (148).

In Chapter five—which, from the point of view of trauma psychology, I consider the most informative—Larsson observes that the government during the war created a "two-tiered mental hospital system [...] that separated veterans from civilians wherever practicable" (155). Moreover, she argues, most families negotiated hard, if it was deemed necessary, to have their loved one put into the more privileged "military" asylum. This "protected them from the humiliation of being formally labelled 'insane'" (156). However, as Larsson continues, "veterans were not immune from the shame of madness" (157). In the course of her interviews, Larsson discovered that "one of the strongest sentiments to emerge" was the experience of shell shock as "embarrassing and dishonourable" (ibid.). As one inter-

viewee said, "shell shock was one of the worst disabilities, actually, because the stress and strain you'd been through, before you'd got like that, and the shame, shame, not sympathy but the shame of shell shock" (ibid.). In keeping with a long tradition of idealizing the "heroism" of the battle-field, its far-reaching traumatic impacts could be denied and repressed most forcefully by denigrating their victims as morally inferior human beings, malingerers, or cowards. Shell-shocked soldiers therefore "represented the antithesis of Anzac masculinity because their 'mettle' had buckled under pressure, and they had lost their 'captaincy of the soul'" (160).

In short, Larsson in this study has pointed out and partially filled a very important gap in military, war, medicine and gender studies: the physical and emotional life of disabled First World War veterans, as influenced by the State, which Larsson argues seems to have failed in providing adequate assistance, by veteran charitable organizations, which tended to include the family and/or community in their assessment of need, and of the veterans' family itself, which generally left no paperwork documenting the long-term, day-to-day physical and emotional care. The book is also well stocked with relevant images (especially family photographs), and it is written in a language quite accessible to a general public.

My critical points of this fundamentally more descriptive than analytical study are to be taken as encouragement for second editions and especially further work in this area. For example, the study tends to repeat quite a number of points in similar if not the exact same language within each chapter or in adjoining chapters, or even on the same page (164). And although we read about many multiple individual choices and outcomes, there are still several relevant factors not included. For instance, given that women were so involved as care-takers, Australian women's organizations political and charitable work are hardly mentioned. The same is true for religious organizations and churches. Or would not a "family perspective" be enriched by including more family memories (many of the interviewees had several siblings)? Indeed, one would like to understand why "a greater number of people [...] chose not to participate" in the study

(274). Furthermore, how do the emotional and financial suffering of a war widow, for instance, compare to the wife of a disabled veteran? One interviewee's family, for instance, experienced both death and disabled survivors. Did no one—veteran or family member—ever question whether the aims of the war were really worth their long-term "sacrifice"? Finally, in discussing "emotional lives," the addition of literature by (social) psychologists on terms such as "shame," "depression," and "trauma" may well complement Larsson's extensive bibliography.