

The Stretcher Bearers of WWI With Emily Mayhew

Emily, a Historian in Residence in the Biomedical Department of Imperial College London, began by explaining that she is a military medical historian, working in the Centre for Last Injury Studies, whose particular interest is wounds, which is reflected in the title of the book on which her talk was based: *Wounded: The Long Journey Back from the First World War*.

She regards the stretcher bearers of WWI very much as the unsung heroes of the war, whose skill and courage saved many lives but who have all but disappeared from the records. They were, in fact, the first specialist medical corps and the Western Front saw the foundation of the medical system still in use today. Previously, stretcher bearers had been those deemed to be too big or too stupid to be of much use as soldiers, but by the end of the war they were recognised and valued as highly skilled paramedics.

The mechanised warfare of WWI, together with the new pointed bullets, meant injuries on a scale and of a severity never seen before and the British were flexible enough to recognise that the key to survival was stopping the catastrophic haemorrhage in the field, rather than waiting until the patient reached hospital for treatment to begin.

Although many of the Medical Officers at the front were young, they had served in South Africa, where it tended to be disease rather than injury that killed. In light of the shocking injuries now being inflicted, it was clear their skill was needed close to the action; accordingly, a stretcher bearers' corps was formed at the end of 1914.

In January 1915, the Cambridge Military Hospital in Aldershot started training stretcher bearers, selected for their strength and intelligence, in emergency first aid. The six-week course placed a strong emphasis on stopping bleeding. At this point, they relied on sustained pressure because it was thought that using a tourniquet would inevitably mean the loss of a limb, and it wasn't until 2002 that medical opinion about the tourniquet changed.

Another key part of their training was in the administration of morphine, which requires very good judgement. However, this would always be a last resort since it would render the injured soldier both dead weight and unable to describe his symptoms, which is absolutely crucial for effective treatment. In the absence of pain killing medication, calm reassurance was a vital part of first aid.

To build stamina, part of their training was to march up Box Hill with a 10st weight on their stretcher. Strength was paramount, not least because stretcher bearers also functioned as pall bearers, meeting trains at Aldershot to offload the dead in the early days of the war, before they were sufficiently well trained to ship to the front.

Once at the front line, the stretcher bearers were assigned either to Regimental Medical Officers or to field hospitals. RMOs gave weekly lectures and manuals in first aid were provided, so that the stretcher bearers were constantly improving their skills and knowledge. In fact, the RMOs and the bearers learned together, on the job, exchanging

ideas and information on a remarkably equal basis. This meant that the bearers were able to take on more and more responsibility over time. They were, for instance, given the task of carrying out inoculations, which resulted in much reduced mortality from disease. They also conducted sick parade, ran supplies and treated trench foot.

The bearers conducted themselves very much like the medics of today and, although initially regarded as omens of bad luck, they very quickly established themselves as exactly the people to have behind you when you were ordered 'over the top'. So valuable were they deemed, in fact, that the celebrated cleric 'Woodbine Willis' immortalised them in his *Ode to Stretcher Bearers*.

At considerable risk, the bearers headed towards screams to find the injured, and presented an easy, slow-moving target for the enemy to pick off as they carried their patients to safety. By 1916, soldiers understood very clearly what medics could do and really valued them. The writings of MOs tell how important they bearers were to them, adept at planning and timing routes, and in setting up first aid stations, for which they dug their own trenches. They were flexible and independent, and constantly learning and improving.

By contrast, the Germans relied on transporting their injured to hospitals, where their trained MOs were stationed, by train. Such a rigid system left little potential to improve. With untrained MOs at the front and will supply problems such that they actually ran out of morphine, their survival rates were very much lower than the British. The French, too, relied on the injured reaching hospital and were similarly inflexible. Like the Germans, their survival rates were low.

Field hospitals were remarkably well equipped, with pathology labs, radiologists, pre-op and post-op facilities, etc., all in tents. There were even mental wards for those suffering from shell shock.

Emily has had to painstakingly construct the story of these remarkable men from diaries and letters because the National Archives destroyed their records in the mid-20th century, deeming them of insufficient interest. Sir Alfred Keogh may have started the stretcher bearers' corps but there's no way of knowing. But we do know that, contrary to popular conception, only 30% were conscientious objectors. Many were Quakers and in fact the Quakers set up their own training station at Didcot. Gathering information is further complicated by the fact that the trauma of WWI was such that few would talk about their experiences.

Many stretcher bearers suffered long-term physical problems, with their hands, backs and shoulders. Many, too, were traumatised by the experience of witnessing executions and having to deal with the bodies, which they were compelled to do. In addition, they had invariably spent much longer periods at the front than most soldiers. All this must have taken a dreadful toll but we simply don't know: they were generally not of the class to chronicle their experiences or write poetry.

In spite of everything, though, some people benefitted from being stretcher bearers. Many miners, for instance, used the opportunities it provided to improve their families position in society, by giving them entrée into the professions.

There were stretcher bearers from the Commonwealth, with Australians training on board ship before Gallipoli and New Zealanders training at the Cambridge Hospital. Both countries acknowledge the part played by stretcher bearers in WWI; the UK and Canada do not.

Gradually, though the work of historians like Emily, and a new appreciation of the work of war artists such as Gilbert Rogers, the role of stretcher bearers in WWI, and indeed in all wars, is coming to light.



The Royal Army Medical Corps at Messine during the 1917 Offensive



The Dead Stretcher Bearer (1919)