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Leo van Bergen; Heidi de Mare; Frans J. Meijman

VU University Medical Center, Amsterdam, The Netherlands
VU University, Amsterdam, The Netherlands

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From Goya to Afghanistan – an essay on the ratio and ethics of medical war pictures

Leo van Bergen a,*, Heidi de Mare b and Frans J. Meijman a

aVU University Medical Center, Amsterdam, The Netherlands; bVU University, Amsterdam, The Netherlands

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For centuries pictures of the dead and wounded have been part and parcel of war communications. Often the intentions were clear, ranging from medical instructions to anti-war protests. The public’s response could coincide with or diverge from the publisher’s intention. Following the invention of photography in the nineteenth century, and the subsequent claim of realism, the veracity of medical war images became more complex. Analysing and understanding such photographs have become an ethical obligation with democratic implications. We performed a multidisciplinary analysis of War Surgery (2008), a book containing harsh, full-colour photographs of mutilated soldiers from the Iraq and Afghanistan wars. Our analysis shows that, within the medical context, this book is a major step forward in medical war communication and documentation. In the military context the book can be conceived as an attempt to put matters right given the enormous sacrifice some individuals have suffered. For the public, the relationship between the ‘reality’ and ‘truth’ of such photographs is ambiguous, because only looking at the photographs without reading the medical context is limiting. If the observer is not familiar with medical practice, it is difficult for him to fully assess, signify and acknowledge the value and relevance of this book. We therefore assert the importance of the role of professionals and those in the humanities in particular in educating the public and initiating debate.

Keywords: framing; history of war; medical history; medical images; photography; priming public interest; war; war surgery

Introduction

During and after war, throughout history and certainly in modern history, images of mutilated soldiers have been publicly circulated, often with a specific purpose. The public response could affirm that purpose or even be quite the opposite. In this article we focus on the intention of publishing – or not publishing – such medical war pictures and how this intention, from

*Corresponding author. Email: l.vanbergen@vumc.nl
medical instruction to anti-war protest, has changed over time. The effects of the publication of these images cannot go unnoticed, so we discuss the ambiguity of ‘truth’ and ‘reality’ in war photography as compared to other medical images.

The current debate

In 2008 the book War Surgery in Afghanistan and Iraq: A Series of Cases, 2003–2007 was published\(^1\). This substantially illustrated publication was meant to serve as an instruction book for American battlefield surgeons since newly recruited war surgeons had to face the consequences of modern war before heading off to the front. Only after training would they be able to perform the technical procedures necessary to help the casualties. The book is a remarkable publication because the photographs of GIs, as well as civilians and children, are shocking by earlier standards of war photography. These images did not attempt to cover up the nasty truth of war — that bullets and grenades maim and disfigure in ways that have to be seen to be believed. This is a breach with history since throughout the twentieth century official military medical instructions, as well as military publications for laypersons, were not shocking. In the past, shocking war pictures were published to protest against war, not to instruct medical personnel. These explicit medical war photographs were often attacked as being political, out of context, manipulated or staged. Therefore this medical instruction book is even more daring, for one can hardly dispute the legitimacy of photographs published by the military health service for their own use.

Due to the ghastly character of the many war photographs, War Surgery was published in a low-key manner by the American military. Nevertheless, it is most remarkable that the book was published at all with more than 250 full colour medical photographs and in a heavy coffee-table format. This means the book also targets non-professionally interested readers. Sectors within the military tried to prevent publication or attempted significant censorship of it due to the horrifying character of the printed images. The argument was that a book such as this could and would politically undermine public support for war (although it was not certain how many civilians would have access to the book), and as a result undermine support for the American forces deployed in Iraq and Afghanistan. The official reason for trying to prevent publication was that making these photographs public would violate the privacy of the soldiers seen in them. Moreover, it was argued that publication endangered the safety of the soldiers still fighting because the adversary would realize that the famous Humvee [high mobility multipurpose wheeled vehicle used in Afghanistan] was anything but safe. Although some military medical professionals supported these views, the top
personnel of the United States Army Medical Service were able to push publication through in an uncensored form. This was a relief to editor Dave Edmond Lounsbury, an internal medical specialist, war veteran and author of manuals used in Walter Reed Army Medical Center, who was convinced of the necessity of publication and said:

The average Joe Surgeon, civilian or military, has never seen this stuff. Yeah, they’ve seen guys shot in the chest. But the kind of ferocious blast, burn and penetrating trauma that’s part of the modern IED [improvised explosive device] wound is like nothing they’ve seen, even in a Manhattan emergency room. It’s a shocking, heart-stopping, eye-opening kind of thing. And they need to see this on the plane before they get there, because there’s a learning curve to this.

In short, military medical personnel considered this book as a medical handbook with life-saving potential, no more no less. Publishing the book had absolutely nothing to do with a political-military agenda and possible anti-war consequences were not the concern of doctors. It was simply bad medicine if the solutions found by experienced war surgeons in terrible medical circumstances, such as frontline surgery, were not shown and techniques taught to inexperienced surgeons. So no wonder Stephen P. Hetz, a retired colonel and also one of the editors, had always been convinced the project would be successful despite the opposition. ‘It was just a matter of getting around the nitwits’.

Purpose

The discussion following the publication of War Surgery exemplifies the complexity of photographs that purport to tell ‘the truth’ of war. Should these images be made public because it is medically necessary or do the advantages not pale in comparison to the possible disadvantages? Should these photographs be released to the public simply because it is the function of journalists to show ‘the truth’ in spite of the possible consequences? Should the public be left in the dark because such photographs endanger war enthusiasm and war support, or should they be made public for exactly this reason? All these questions urge us to reflect on the ‘realism’ we assume when looking at war photographs and war documentaries.

Opinions on war photography are diverse and the discussion therefore complicated, especially if the pictures have a medical impact or are of medical importance. Medical war photos have medical, political and emotional connotations and therefore have an impact on the medical consequences of waging war as well as (medical) protest against war. Should the often noble argument for publication be decisive, or should the decision to publish be influenced by potentially negative consequences? Or should we (in Western cultures) be more reflective when war photography and war
documentary are at stake, as was argued for instance by Susan Sontag and Bill Nichols.\textsuperscript{3–7}

**Goal and guiding questions**

It is our aim to discuss three of the dimensions that determine our understanding of the current debate by focusing on three questions: How should we understand or evaluate *War Surgery*? Is it wise to publish such a book for a broad audience instead of limiting it to a medical one? How should we judge the claim of ‘truth’ in shocking medical war pictures?

Initially an historical overview of the use or abuse of medical war pictures can provide insight for the debate by focusing on the intentions of the artists, photographers and publishers. Secondly, we will question the ‘reality’ of shocking war images, especially photographs and film documentaries and how we think about the place of such images in modern society. This implies that we will largely ignore the impact of the photographs on the viewer, however important and interesting the subject. And thirdly, we will examine in detail the differences between specific medical images.

**Historical images of war as politics: a short overview**

The relationship between war and its image, as well as the relationship between war and medicine, are as old as war itself. It is no wonder that one of the oldest known pictures of war shows Achilles, the warrior archetype, bandaging his friend, Patrocles. Until the beginning of the nineteenth century war images, often paintings or drawings, were meant to glorify war or at least the main figures who engaged in war. The intention of distributing such war images was often nationalistic. The patriotic warriors were generally more handsome, powerful, humane, better dressed and obviously significantly braver than those of the adversary.

**Goya, Dix and Grosz**

The first and still one of the most impressive exceptions is Goya’s monumental *Los Desastres de la Guerra*, created between 1810 and 1820. The work includes 82 prints, half of which depict Spanish guerrillas fighting against the occupying French and the consequences including the horrifying measures the French took to oppose the resistance, therefore illustrating the atrocious measures a military force will stoop to when encountering a resisting population. Goya partly painted his work in the years after the war (1808–1814) and it was only published after his death in 1863. However, whereas Goya wanted to focus attention on the cruelty that the French perpetrated on the Spanish, the Nietzschean nihilist and Goya’s only real heir, Otto Dix, had no pacifist intentions when he drew scenes from the First
World War in his series *Krieg* (War), although humanism certainly began to drip in. Dix ‘just’ wanted to demonstrate, to the best of his ability, what he saw, experienced and witnessed. The result was utter ugliness. Dix used allegory to strengthen his point – in his view, an approach that would be more successful than photographs could be8,9. In spite of his intention this made him an icon of inter-war pacifism anyway. Georg Grosz, who also drew during and about the 1914–1918 war, attacked the literal and figurative loss of humanity as a consequence of the violent technological conflict of World War I, also using exaggeration as an artistic weapon. So it was no wonder that both German artists were declared *entartet* (degenerated) after the Nazi-party rose to power in 1933.

**The era of photography**

Glorifying war became increasingly difficult after photography entered the battlefield and its surroundings. Photography was a way to produce an image of war in a short time. Although in the first decades of photography it was rare to see a photograph of actual fighting, photographers were capable of exposing the naked truth by picturing the dreadful aftermath of war, including the dead and wounded. Photography was received by contemporaries – and in fact still is by the public in general – as a truth-telling device. Therefore, it became harder to hide the nasty truth about war from the public, that it was not only the adversary who was filthy, who struggled, and who was scared, and – although this took longer for photographers to show – that it was not only the adversary who committed horrific acts of cruelty. War photographs showed that death in battle often had little or no relationship to Horace’s famous words *Dulce et decorum est pro patria mori.* (It is sweet and honourable to die for one’s country.) Photographs made abundantly clear that soldiers did not die of a clean shot through the chest or of an honourable blow of the sword in valiant man-to-man combat. Since the twentieth century, showing the ugly side of war was most of the time interpreted as a complaint against war, and this was exactly what the opponents of publishing *War Surgery* feared.

**Showing Austrian-Hungarian cruelty**

In 1914 the Dutch physician, A. van Tienhoven, immediately went to work in a hospital in Serbia, a country he already knew from the Balkan wars. As happens frequently with doctors working on one side of no man’s land, he developed – or had already developed – sympathy for the side whose victims he saw – and previously had seen – on the operating table. He even became a member of a committee inquiring into Austrian-Hungarian war crimes. In 1915, the gruesome pictures he made of war victims, soldiers as well as civilians, were published in the Netherlands, in a book entitled *De Gruwelen*
van den Oorlog in Servië. (The Horrors of the Serbian War.) His intention was to publish evidence against the Austrians (for example, by showing that they were using forbidden types of bullets) and not to denounce war in general nor to rally medical assistance\textsuperscript{10}. Although the book’s impact was nil or almost nil, receiving no international attention, it can be considered as a precursor of a book that did gain international attention, Ernst Friedrich’s Krieg dem Kriege! (War against War!) of 1924\textsuperscript{11}. Susan Sontag said that if pictures really could end wars, this one would have done the trick. According to her it was nothing short of ‘photography as shock therapy’\textsuperscript{3,p.14}. As the title makes clear, the intention of Friedrich’s book was different from Van Tienhoven’s publication.

**Showing horror will end war – Wilfred Owen and Ernst Friedrich**

In 1917–1918 the famous British war poet, Wilfred Owen, collected photographs of the dead and maimed, intending to publish them when the war was over. By telling the truth about the war he was fighting, he aimed to warn against any possible repeat\textsuperscript{12}. Owen had quickly come to see war as an absolute evil, but he was convinced that only as a fellow combatant could he give voice to the sufferings of the soldiers\textsuperscript{13}. Owen was a poet, and normally poets tell the ‘truth’ instead of showing it in pictures. Nevertheless, obviously he too had become convinced that however powerful his words were to serve to witness the inhumanity of the 1914–1918 war, only images would make his words credible to those who had not seen it for themselves. Unfortunately, Owen was prevented from fulfilling his self-imposed task by his death shortly before the armistice. It was left to the German anti-militarist Friedrich, founder of the world’s first and still existing Anti-War Museum, to publish a collection similar to the one Owen had been planning.

For a large part War against War!\textsuperscript{11} was filled with pictures portraying the dead and wounded of the First World War, handed over by doctors who had worked in the trenches and war hospitals during this horrifying conflict. The most gruesome section is called ‘the Face of War’\textsuperscript{11:p.77–89}, containing pictures of execrably maimed soldiers. People responded by saying the photographs were repulsive, but in the eyes of Friedrich this only proved they were good photographs. He had chosen them precisely because they were repulsive, because in his eyes the entire 1914–1918 war had been repulsive\textsuperscript{11:p.19–20,14}.

However, the sickening character of the images in Friedrich’s book gave weight to the argument of the historian Jay Winter that since the photographs were ‘almost unbearable to look at’ they inevitably missed their target to some degree. They were unlikely to convince anyone of the horrors of war; at best they might reinforce the views of those who no longer needed convincing\textsuperscript{9,p.161}. Although this may be true, War against War!\textsuperscript{11}
prompts us to contemplate how terrible the reality must have been if even its portrayal was thought unbearable. Like Owen before him, and Virginia Woolf, TA Innes and Ivor Castle after him, Friedrich believed that showing the ugliness and senselessness of war would lead to the growth of the peace movement and finally to the abandonment of war as a means of resolving conflict. He wrote: ‘All the words of all peoples, of all countries, are not sufficient nor [sic] in present nor in future times, to really picture the human slaughter. But here is the sober-true, overall-truthfully [sic] picture of war [...] grabbed photographically. [...] Show these pictures to all men still able to think’ 11:p.19. Just as Goya gave his pictures names such as Que locura! (What madness!), Friedrich added cynical captions to his photographs that mocked militarist ideology. This practice emphasized that not even Friedrich relied completely on the forcefulness of an image alone, just as Owen did not rely only on the forcefulness of his words.

In addition to cynical captions, Friedrich manipulated at least one picture of soldiers (definitely not from World War I) who had decapitated heads on bayonets. Friedrich intended this photograph to prove the dehumanizing effect of war11:p.92. On occasion, Friedrich used captions that were not in coherence with the photograph they described. He considered this all for the greater good. It was meant to strengthen his main point – that war is the absolute evil which should be combated always and everywhere, even if doing so harms truth itself.

**War against war! The impact of an idea**

The combination of photographs and captions made Friedrich’s intentions clear for observers, but his purpose was only partly realized. Reprinted at regular intervals, most recently in 2004, the book unquestionably helped to foster the peace movement, or perhaps more accurately, the anti-war mood of the 1920s and early 1930s15. Between the two World Wars many pacifists were convinced that if people were shown the horrific side of war often enough, humanity would instinctively abandon war as a means of resolving conflict16. Virginia Woolf, for example, argued in her 1938 anti-war polemic about the Spanish Civil War, *Three Guineas*, that ‘war is an abomination, a barbarity’ that must be stopped and she believed that photographs of corpses would literally show decent people that she was right. And last but not least, the editors of the pictorial book *Covenants with Death*, published in 1934, reasoned that the revulsion created by war photographs of the maimed and dead would translate into an aversion from war itself. On the cover of the book, against a background of a decomposed corpse from World War I, Innes and Castle wrote:

The purpose of this book is to reveal the horror, suffering and essential bestiality of war, and with that revelation, to warn the nation against
the peril of foreign entanglements that must lead Britain to a new Armageddon\textsuperscript{17}.

So the peace activists in the inter-war years agreed with Friedrich that horrible medical pictures of war-wounded told mankind the truth about war and that this truth would lead to an end of war. In their view, all pictures showing harmless or even the noble sides of war were false.

**The persuasive power of photographs**

At first sight the question is, of course, who’s right? What arguments can we distinguish in order to decide whether *War Surgery* should have been published, or not? Do ghastly war pictures indeed lead to war protests? Are pictures such as these necessary for instructing future war surgeons? A discussion of the history of war and associated images implies that we cannot look at pictures (paintings, drawings nor photographs) without asking ourselves the question: What do we understand by reality? Why did Goya’s drawings, showing the nasty side of the Napoleonic wars in Spain, create (and continue to create) such a lasting impression? Although one of Goya’s captions was ‘Esto es lo verdadero’ (This is the truth), his drawings certainly were not ‘real’ in the sense that they showed ‘what had really happened’. Perhaps it is exactly the fact that Goya drew an artistic rendering of the events he witnessed that makes a lasting impression of his *Los Desastres de la Guerra* drawings which, even after 200 years, leaving viewers stunned and shocked. However, Goya worked in an era when photography did not exist, so we have to wonder if the impact of his drawings has changed since the advent of photography in the nineteenth century.

**The visual artefact: analogue and artificial**

The fact that Goya’s images are still impressive even though full-colour photographs of war are more real (or at least are still considered more realistic) indicates that the aforementioned belief that the photograph is by definition a truth-telling device has to be reconsidered. The impact of a photograph is based on the common sense credibility that the photograph documents something that happened in reality. And that is correct; the mechanical reproduction guarantees, in principle, that the image is a registration of an event before the camera at a certain moment – we leave the consequences of digital photography aside for now. According to Barthes, the photographic image presents in an analogue way what took place\textsuperscript{6,p.17}. The technical rendering does not transform or reconstruct the image the camera shot; it is a perfect congruence. But, as Nichols\textsuperscript{7} has argued, this does not mean that the image the camera presents corresponds with the three-dimensional reality we know. In fact, the only reality that is captured
is the light and shadow pattern that passes across the camera lens and which causes a chemical reaction in the emulsion. Strictly speaking, the bond between reality and image, the resemblance, is of a purely optical nature\(^4\)p.5, 7p.35–36. The recording property of a photograph has two important consequences. On the one hand it means that the same ‘event’ may generate an endless collection of differing documents depending on the number of cameras and camera locations and thus result in a multitude of ‘real representations’. On the other hand, what Barthes called the ‘perfect analogon’ quality\(^6\)p.17 of photography creates a belief of verisimilitude as well as an emotional investment based on resemblance, although everyone knows that it is just ‘an image’.

To compare a photographic image with a drawing or painting of the same subject (be it a war setting, a loved one, or an item) indicates a second level of commonality between a photograph and other imitative arts. As we all know, a drawing is an interpretation of what has been seen. Although the viewer may recognize the image instantly, even then it is clear that the artist has made a selection. Some aspects of the scene have been left out, or some are amplified. The medium can cause this effect – a graphic drawing and a painting differ in what they can present\(^18\)p.6. However, what is easy to recognize in the visual arts is more difficult to see in photographs, because the denotative level is so credibly overwhelming\(^18\)p.6–7. The ‘natural’ photograph we are used to is the result of a set of codes that together form what Barthes has called the ‘period rhetoric’\(^6\)p.18. We have learned these historical codes by looking at many photographs. We became familiar with certain treatments of ‘real events’ that we recognized as ‘true’, whereas our expectations are, in fact, based on appropriate formal schemata (stereotypes, graphics, compositions, or colour patterning), as well as meaningful gestures (facial expressions, pose, or glances). What in the fine arts is called style or mode, the way a subject is rendered, is what Barthes defines as the level of connotation in the photographic image\(^6\)p.18.

This second, ‘rhetorical’ level is more difficult to identify in a photographic image, but it does play an important role in this artefact. So although a photograph is mechanically processed, the photographic image is worked on during the process. Next to the photographer and the editor, writers making captions and narrations have intervened too\(^6\)p.15, 19, 21. As a consequence the photo contains technical, formal and aesthetic aspects (such as framing, angle, size, tone, arrangement of items, and exposure techniques at the plane of expression), as well as the historical or ideological choice of what is shown (plane of content)\(^6\)p.20. Considering the multiple levels of connotation, a photographic image primarily echoes other photographic images\(^3\)p.84, or refers to conventions of the visual register in general. Even if the photographer is not aware of the stereotypical schemata s/he is applying they are modifying conventional visual knowledge that is located and stored in their eye and mind\(^19\)–21.
Although the photographic image is persuasive in presenting itself as a clear window to the real world, in fact it is a coded way to reflect on the world we share nowadays. In Barthes’ terms: the photographic message is ‘the manner in which the society to a certain extent communicates what it thinks of’, or in the words of Sontag: ‘what a society chooses to think about’. The meaning that we expect a photographic image to evoke is paradoxically based on the supposed neutral and transparent objectivity of this visual artefact. This impression is based on (invisible) connotations, as well as on (aesthetic and historical) conventions. Understanding the meaning of a photographic image usually means relying on linguistic remarks and captions. Captions and the external context are both cues that suggest a credible reading of the image and determine the reception and often the consequence of the picture. So the ‘photographic paradox’ is also an ethical one (priming). A photograph in a paper of a disfigured soldier accompanied by the words ‘The face of war’ makes quite a different impression from the same photograph in the same paper but with the caption ‘A patient just before surgery’. A photograph published in a medical handbook has an impact that is unlikely to be similar to the same photograph published in a book called War against War.

Shocking (photographic) images of war

Given the priority of the denotative register of the photographic image, the archive of images that has been built up since the invention of photography has not only given us a rather selective duplication of the world but has also provided us with an interpretation of the image world, without supplying us with a clear understanding of the underlying structures.

In looking at war photographs in particular we expect (or even demand) certain codified features we have become acquainted with as ‘objective’ and ‘true’ in order to distil or develop a moral statement about the war and what is appropriate to show. But compared to words, a photographic image can never make a clear, true or false statement. A photograph uses other means for credibility; for example, it may contain formal cues that invite us to consider what and how we see. What we may learn from the above-mentioned scholars is that judging the reality and the truthfulness of photographic images is first and foremost a formal task of questioning, dissecting and classifying images. That is the only way to trace our assumptions concerning (photographic) images, to understand the emotions that are evoked, and to map opinions and understand the current debate about surgical war photographs in a systematic way. Before we suggest an initial classification, we have to consider horrifying photographs, pain, compassion and our position as modern spectators in a globalized world with many ‘theatres of war’.
Showing gruesome pictures endangers the fight for democracy and freedom

At first, medical handbooks served as a counterpart to the overkill of horror strategically used by pacifists. Pacifists accused these authors (doctors) of consciously covering up the ugly face of battle. By restricting themselves to drawings of splinted broken arms and legs, they were guilty of Verniedlichung des Krieges (trivialization of war), making wars look more innocent than they were, as is visible in pictures of lovable war nurses as well. In the eyes of Friedrich and his anti-militarist colleagues, by doing so doctors were supporters instead of opponents of war.

Of course this accusation was disputed. According to health officers (and many other medical professionals as well) the pacifist claim that war was an abomination to humanity always and everywhere was simply wrong. Every once in a while perhaps war was an evil, but it probably was a necessary evil. Only by waging war could one defend one’s country or values such as democracy or freedom. In such cases giving medical care to sick and wounded soldiers was a necessity. Military medicine had a highly important objective – maintaining the hearts and morale of the fighting men to make victory possible23. Showing the gruesome consequences of war without restraint could endanger this goal.

Sontag and the paradoxical value of war photographs

In Regarding the Pain of Others3, Sontag distances herself from traditional pacifism, as defended by Virginia Woolf, by writing that nowadays even pacifists do not believe war can be abolished. In her 1973 On Photography18 Sontag had acknowledged the power of photography within this debate, especially the paradoxical role that war images play in our modern world, which is saturated by an overload of images. Photographic images can be dangerous because they inculcate two contrasting processes. On the one hand, the ‘presumption of veracity’ is authoritarian and excluding. Photographic war images claim the pain and suffering they show are real, and that stimulates our imagination and may cause a shocking effect. On the other hand, the overwhelming amount of photographic images we are confronted with in daily life, be it as family member or as a tourist, diminish the impact of the diversity of events that are ‘shot’. In the case of war photography there is a risk that banality, triviality and in the end passivity might result.

Sontag concluded that photographic images endanger our ethical understanding of the world, because they are limited and invite sentiment whether they are cynical or humanist. She questioned the moral standard of modern spectatorship that proclaims the ‘visual culture’ as the one and only existing reality. But her sharp criticism here is directed not at the intrinsic photographic qualities, but at the loose attitude of modern people.

Citizens of modernity, consumers of violence as spectacle, adepts of proximity without risk, are schooled to be cynical about the possibility of sincerity. Some people will do anything to keep themselves from being moved. How much easier, from one’s chair, far from danger, to claim the position of superiority.

This reduction of complexity (as suggested by Baudrillard and Debord, for example) is unacceptable for Sontag, as well as for Nichols. Common ground for both is their recognition of the reality of suffering and pain apart from the image world and the way it is treated. In the words of Nichols:

Lives continue to be lost in events such as the invasion of Grenada even if such a ‘war’ is reported and perceived far more as a simulation of war than war itself. The reality of pain and loss that is not part of any simulation, in fact, is what makes the difference between representation and historical reality of crucial importance. It is not beyond the power of documentary to make this difference available for consideration.

Sontag agreed. In contrast to her 1973 argument, she delivered a plea to take war photography seriously in 2003. Not because war photographs are part of our ‘collective memory’ (according to her a misconception, because most people in Western countries have never had any experience with war, except through photographic images), but because wars without images bother us less. For Sontag, war photography challenges us to articulate and reflect on our ethical position in this globalized world and therefore distances us from a naïve and conceited point of view by forcing us to consider what is unthinkable in our daily lives.

Let the atrocious images haunt us. Even if they are only tokens, and cannot possibly encompass most of the reality to which they refer, they still perform a vital function. The images say: ‘This is what human beings are capable of doing – may volunteer to do, enthusiastically, self-righteously’. Don’t forget.

Classification of formal differences among (historical) medical images

Given our reasoning so far, it is useful to look at the images that are collected in War Surgery in more detail and to compare them to various historical medical handbooks.
Henry Tonks and Harold Gillies: painting for the medics

During the First World War, harsh and detailed drawings of casualties were made with no other purpose than medical instruction. The British painter and physician Henry Tonks assisted plastic surgeon Harold Gillies in his Sidcup hospital by painting the mutilated faces of Gillies’ patients as naturally as possible. For Gillies believed this would make him perform better, showing that the concept behind *War Surgery* was not entirely new. The colourful images created by Tonks show some resemblance to the full colour photographs taken by the military surgeons and presented in *War Surgery*. In both books there is a clear relationship between the wound, the consequential mutilation, and the impact this has, often on the face.  

Military medical instruction in the 1930s: harmless drawings

In contrast to the practice of realistic representation of the effects of war on soldiers’ bodies, during the years between the World Wars physicians chose to describe the wounds of soldiers in words instead of pictures. The images they did use were black and white pencil drawings showing only the wound – and not the man – that required repair. The purpose was to show the injury without colour, without the suggestion of actual flesh and blood. As the drawings focused only on the wound, leaving aside irrelevant parts of the body, the wound usurped the importance of the soldier. Even if a gruesome wound was shown, it was included amidst pages and pages of clinical medical explanations. This context made it extremely unlikely that anyone outside the small surgical professional circle would ever set eyes on the illustrations, or have the opportunity to ‘see’ how horrifying the outcome of the war had been for so many soldiers.

Strictly speaking, the decision to keep the devastating consequences of war far from the public view is based on the same reasoning that the gruesome effects of traffic accidents are not presented on the television news or in newspapers: the priority of medical care. In both cases medical professionals are expected to do their job. They are not to blame for what caused the injuries; rather their task is to use their knowledge, skills and training to manage these devastating injuries in a professional and unemotional way. *War Surgery* is dedicated to this perspective and the book endorses as its primary focus ‘immediate trauma care’ (cover). *War Surgery* presents more than 50 black and white drawings, computed tomography (CT) and magnetic resonance imaging (MRI) scans, and more than 80 illustrations in the tradition of providing images for immediate trauma care. All the images ‘illustrate’ a certain level of knowledge of the injury and each image is accompanied by its own complementary information. In fact, many of the 250 full-colour photographic images of a trauma could be argued to belong to this informative, clinical category.
They add information that is not available in the drawings or in the CT or MRI scans. So medical knowledge about an injury is multi-layered and the realities of a wound are represented by various visual codes and conventions.

Concentrating on this last point, occasionally a medical photograph or drawing of an entire body can make the wound and its details appear more or less gruesome. A detail of a specific wound can be almost too horrible to look at, but this detail can also take away the horror if it has pushed the human context out of the frame. In other words, dependent on the external context, the viewer’s focus will be on detail or on the whole. Historically, when only medical instruction is intended, then horror has been removed as much as possible. If abhorrence of war is intended, then probably the picture that is considered the most gruesome will be chosen. Apart from that, for public viewing, publishers have traditionally shown restraint when showing the dead whether they are in body bags or not. But there is no hesitation in showing the burial of dead soldiers, flags on top of coffins or honorary salutes by other soldiers. In other words it is not acceptable to show the bare bodies, but permissible to show dead bodies wrapped in ritual.

**A discerning eye**

Strictly speaking and without nuance the medically-focused attitude of military medical professionals continued after the Second World War and even the Cold War. However, events such as the fall of the Iron Curtain, the war in former Yugoslavia, the incidents at Abu Ghraib, the increase in United Nations humanitarian and peace missions, and the seldom-seen misery of refugee camps and genocide in Africa, caused the military doctors to change their view on war and this occurred in parallel to how the pictures of war, including medical pictures, were seen and valued, and subsequently how the pictures were used. Using this perspective, the publication of *War Surgery* certainly is more than just a matter of ‘getting around the nitwits’.

So, although the purpose of a book such as *War Surgery* is still in line with those of the old surgical textbooks, to medically prepare future colleagues, there have been significant changes. Since there is no indication of anti-war intention or conviction in *War Surgery*, in which the photographs and illustrations have solely medical captions and context, an interpretation of the book as demonstrating the horrors of war (as was the intention of *War against War!* would be narrow and naive. So we opt for another, more disciplined view, with a discerning and trained eye that is capable of shifting perspectives. The various images in *War Surgery* themselves invite us to do so and require the spectator to show mental courage, which is only possible if we understand what images can accomplish, given their puissance.
The range of images and the public imagination

We believe that *War Surgery* is a major step in a historic process that has continued for a century. It is significant that the collection of images in this book is not strictly medical. It is a mix of images that includes not only the aforementioned full-colour photographs, black and white drawings and the CT and MRI scans of injuries but also administrative forms and statistical diagrams, some patients who have been cured or stitched, or smiling patients (a dozen), medical instruments (15) and war material and weapons (5). Background scenes show the photographic settings in a general way (almost 40), during action, outside in the field (bringing in injured soldiers, some 25 small-scale pictures), as well as inside medical facilities (about 25 images of surgeons operating including full page illustrations).

In addition the book includes eight sober, black and white, non-clinical photographs in a military environment far away from war sites that were taken by David Leeson of *The Dallas Morning News*. These sometimes poetic, large photographs register the pain, sorrow and grief associated with war but without showing irreversibly mutilated, devastated or lost lives. The images are located at the beginning of the central chapters, although they are separated in a sensitive way from the harsh reality of the combat theatre that follows. Leeson’s photographs of the suffering, emotions and the tears that accompany war circulated among soldiers for a long time – and in this medical context they poetically present compassion in regard to the fate of many soldiers who gave their lives, one way or another.

Closing remarks

As with every picture, and every pictorial book, *War Surgery* will now begin its own history. Time will tell if this history will correspond with the one the medical editors, the photographers, authors and publisher intended. But given our analysis, we think it may be useful to make a distinction in the way the public will appreciate this publication.

On the one hand, this book can be understood as an attempt by military medical professionals to reflect on the wars and casualties of Iraq and Afghanistan. Not in a philosophical way, but starting with human beings who are most vulnerable and experience a violation of the integrity of their human body. The purpose of the editors was to prepare surgeons on their way to the battlefield – and that is not a neutral, but a professional aim. But the book turned out to be much more than an instruction manual for future war surgeons. Strictly speaking, it is not a pure medical instruction manual; it is a statement about the reality of modern war. It is a book to honour the people who gave their lives, and to the ones who try to save them. It tells something about the power of medical professionals to focus on the horrifying job that has to be done, as well as their mental power to change
the perspective and look at the human beings who suffer. In this sense, it is also a book in honour of life. This is evident in the sequence of the chapters – starting with acute and life-threatening trauma of the head and the eye, followed by spine, thorax, abdomen, lower limbs, and vascular trauma inside the body. The book ends with images of military medical professionals saving babies of local pregnant women who were injured by war actions. In that sense, the extreme flexibility of the medical view in this book is generated within a specific medical scene that can be understood as a high-pressure laboratory. In the normal civic medical settings such a differentiated view is much more difficult to accomplish and implementing this change takes much more time.

On the other hand, the invitation this book offers the public in general – as a heavy coffee table book, it is not a convenient or practical format for preparation during a war – is rather unrealistic, to say the least. To fully understand what the images imply, is beyond the imagination for spectators who judge these images from a distance. They, like us, will be horrified by the extremes they are confronted with, given the rhythm of the book. So perhaps the military medical personnel were naive and did not realize that the presented mixture of images is emotionally explosive if viewed with no battlefield experience. Within the public imagination this collection of visual extremes is probably unbearable. In this sense, Sontag is right when commenting, in Regarding the Pain of Others, on a picture of a First World War veteran with half his face blown away, that there are limits to respect:

Perhaps the only people with the right to look at images of suffering of this extreme order are those who could do something to alleviate it – say, the surgeons at the military hospital where the photograph was taken – or those who could learn from it. The rest of us are voyeurs, whether or not we mean to be.

Because the endless images of blood, open wounds and distorted body parts are not connected to the possibility and capacity to act, the catharsis that this book may represent for military medical professionals working under hard conditions, will never be achieved by the public at home. On the contrary, it may give rise to frustration, anger, and indeed increase anti-war feelings. From this public perspective, the sensitive and poetic elements of the book may even be seen as totally out of place, not as a means to keep a balance in a war situation, but as a mockery, because poetry is a fundamental contrast to a horrifying war.

It is because a war, any war, doesn’t seem as if it can be stopped that people become less responsive to the horrors. Compassion is an unstable emotion. It needs to be translated in action, or it withers. The question is what to do with the feelings that have been aroused, the knowledge that has been communicated. If one feels that there is nothing ‘we’ can do – but who is
that ‘we’? – and nothing ‘they’ can do either – and who are ‘they’? – then one starts to get bored, cynical, apathetic³.p.101.

Visually uneducated as a danger to democracy

All this illustrates how very uneducated the public in general is when it comes to understanding the impact of a variety of images that give rise to the public imagination. This implies that democracy is also in danger when the public is not taught to distinguish between images in the same way that grammar and counting are learned at school. The overload of images, with various perspectives and realities, makes education about images an urgent matter. We have to take into account the vast and rich archive of images as well as the body of visual knowledge that has accumulated in Western cultures. It is our intellectual obligation to care for this heritage, because it gives us the tools to think about war photography and act ethically in the world we inhabit and share.

Noblesse oblige

As a consequence in a world saturated with images of violence and suffering, we must break with the politically-engaged ideas that have dominated the humanities in Western cultures for some time in the US and Europe alike. In Barthes’ terms⁶.p.15–16, many academics have entrenched themselves in what he indicated as one of the sociological domains involved in understanding images: the image reception. Propagating a sociological approach, as representatives of cultural studies and cultural analysis have been doing for the last decades, proved to be convenient for both parties involved. On the one hand, accepting every personal idea as worthwhile and liberating, gives these academics credit within a variety of emancipating groups. On the other hand, these academics are comfortable because such a ‘critical’ sociological interpretation of the communicated message is sufficient in lieu of a more comprehensive analysis of an image that is in fact seen as superfluous, and therefore unnecessary. The result of this bond nowadays is an endless range of differing opinions and individual meanings, circulating in the public sphere as well as in the academic humanities.

Although understanding these perceptions is important, it is of secondary importance to understanding the photographic message itself. To understand the signifying process as a whole, we have to start at the beginning, with the analysis of the photographic image as an artefact with conventions of its own, and thus rejecting the common sense conviction that the photographic image is just a truth-telling device. This more nuanced approach is the primary task of (medical) humanities. Only through an understanding of the immanent and multi-layered structure of the photographic image does questioning the individual reaction become a useful intervention.
According to Walter Benjamin such a populist bond, in this case between engaged cultural analysts and public groups, is also a serious threat to democratic society. Instead of giving people the chance to understand the globalized image world they are living in by educating them, setting high standards, and providing them with an adequate vocabulary to think meticulously about images, academics invite the public to express themselves by promising individuals an identity of their own instead of reflecting on it. These academics renounce their task as intellectuals because they withhold the knowledge necessary for the public to think about their place in the world they share with others. It would be better to provide people with the conceptual tools to make them aware of the manifold perspectives for understanding images and their persuasive potencies, and the possibility of switching between views. Transmitting the visual knowledge that has accumulated in the last centuries would help to make the public less vulnerable vis-à-vis images. If the range of horrifying, painful, professional and poetic, consolatory images in War Surgery should teach us anything, it is that historical sense, cultural capital and a discerning eye have become basic as well as critical requirements for citizens in democratic states to determine the weight and ethical value of photographic (war) images.

Conclusions

Within the medical context, War Surgery can be seen as a major step forward in the development of medical war documentation and communication, by giving these a broader context and perspective. Although the majority of the knowledge presented – written or visual – is medical, the book also addresses the impact of injuries on a patient and the quality of his or her future life. Within the military context, War Surgery can be understood as an attempt to put matters right, given the enormous sacrifice some individuals and their families have suffered. As everywhere else, in the USA as well, it is difficult to acknowledge all the losses related to the wars covered in War Surgery. Quotations by statesmen such as Abraham Lincoln and John F. Kennedy (at the beginning of War Surgery) and poems by Virgil and William Wordsworth (at the end of the book) emphasize public interest and the value of the sacrifices made. Nevertheless, in regard to public interest the relationship between ‘reality’ and ‘truth’ becomes more ambiguous. If one only looks at the photographs in this book, without reading the medical context and having no knowledge of or experience with medical (war) practices, it might be impossible to fully assess, signify and acknowledge the value and relevance of a book like this. Should this be a reason for limiting circulation to medical personnel and the military? Certainly not. But we should be aware of the complex reactions and consequences of the publication of the book.
amongst various segments of the public. In our view War Surgery is an urgent plea to increase our efforts and to invest in intellectual guidance, in particular of the humanities, and initiate public debate about the nature of the image world.

Notes on contributors

Leo van Bergen is a medical historian working at the VU University Medical Center, Department of Metamedica (Medical Humanities) (Amsterdam). His main research subject is the relationship between war and medicine. Amongst other works on this subject he is author of Before my Helpless Sight. Suffering, Dying and Military Medicine on the Western Front (Ashgate Publishing 2009).

Heidi de Mare is an image scientist, educated in art history and film studies and attached to the Faculty of Arts, VU University (Amsterdam). In 2003 she finished her PhD (cum laude), a comparative study of seventeenth-century Dutch painting, architecture and literature. She was a successful co-applicant for the Dutch Scientific Research NWO-programme Urban Nebula (www.urbannebula.nl). Since 2007 she has been developing a 'Trained Eye' programme for public sectors in which existential matters are of critical importance (Medical Humanities VU Medical Centre, the Amsterdam-Amstelland Police Academy). Since 2009 she has been director of the IVMV-Foundation, a Dutch Institute on Public Imagination (www.publicimagination.eu).

Frans J. Meijman holds a chair in medical science communication, journalism and its history at the VU University Medical Center, department of Metamedica (Medical Humanities) (Amsterdam) since 1999. He worked as a general practitioner/family physician in Amsterdam for 27 years and as the editor of the Dutch scientific journal of general practice/family medicine for 15 years. His research focuses on consumer health communication in the public domain.

References


10. van Tienhoven A. De Gruwelen van den Oorlog in Servië. [The horrors of the Serbian war.]. Rotterdam: W.L. & J. Brusse’s Uitgeversmaatschappij; 1915.


