

# CHAPTER I

## INTRODUCTION

### 1.1 Background

World War II was rightfully considered as the biggest, most ferocious large-scale war that the world had ever witnessed. The primary combatants were divided into two groups, which were the Allies (Great Britain, France, United States, Soviet Union, China) and the Axis (Germany, Italy, Japan). The Second World War broke out in 1939 when Germany invaded Poland, a nation to which Great Britain and France had guaranteed military support if it was attacked by Germany, followed by the declaration of war by both states.<sup>1</sup>

US was not deeply entangled in World War II until Japan staged a surprise attack on American military installations in the Pacific on December 7, 1941.<sup>2</sup> The Pearl Harbour attack forced US to move quickly, marking the involvement of US in the war. Japan seemed to have the upper hand for a while, until US forces beat the Japanese in the Battle of Midway and the Battle of Guadalcanal.<sup>3</sup> Since then, the Allies continued to win the battles against the Axis. One by one, Italy, Japan, and Germany surrendered, ending the war in 1945, with the exact number of casualties of both military personnel and civilians remains unknown, although it is

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<sup>1</sup> "World War II," *HISTORY*, October 29, 2009, <https://www.history.com/topics/world-war-ii/world-war-ii-history> (accessed February 22, 2019).

<sup>2</sup> "Take A Closer Look: America Goes to War," *The National WWII Museum New Orleans*, <https://www.nationalww2museum.org/students-teachers/student-resources/research-starters/america-goes-war-take-closer-look> (accessed February 22, 2019).

<sup>3</sup> Kimberly Amadeo, "World War II Economic Impact: How World War II Changed America's Economy," *The Balance*, January 21, 2019, <https://www.thebalance.com/world-war-ii-economic-impact-4570917> (accessed February 22, 2019).

believed to be around 60 until 85 million people. The Allies secured their victory, and two superpowers emerged—the United States and Soviet Union.

However, the victory of the Allies was not gained without cost. Apart from the visible war consequences, such as the death and injury of a large population of people, economic and infrastructure impact, the aftermath lasted longer and deeper than that. Military veterans from such an extreme and large-scale war as World War II have struggled more than what meets the eye. Witnessing death, destruction, and torture; or participating in hostilities and killing can potentially lead to mental health problems.<sup>4</sup> Related to the psychological aftermath of the First World War, the Second World War veterans also suffered with similar symptoms of “shell shock.” It referred to psychological trauma of war veterans which was initially studied by the UK. The symptoms included: fatigue, headache, tremor, confusion, nightmares, insomnia, loss of balance, and impaired sight and hearing, causing the soldiers to be incapable in functioning with no obvious cause.<sup>5</sup> Before it was described as a psychological effect, however, early medical opinion took the common-sense view that the damage was “commotional,” or related to the severe concussive motion of the shaken brain in the soldier’s skull, deemed to be a physical injury.<sup>6</sup>

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<sup>4</sup> Hans Pols and Stephanie Oak, “WAR & Military Mental Health: The US Psychiatric Response in the 20th Century,” *American Journal of Public Health* 97, no. 12 (2007): p. 2133.

<sup>5</sup> Edgar Jones, “Shell shocked,” *American Psychological Association*, June 2012, <https://www.apa.org/monitor/2012/06/shell-shocked> (accessed February 23, 2019).

<sup>6</sup> Caroline Alexander, “The Shock of War,” *Smithsonian Magazine*, September 2010, <https://www.smithsonianmag.com/history/the-shock-of-war-55376701/> (accessed February 23, 2019).

The field of psychology was not widely known yet back then, but Charles Myers, an English physician and a medically trained psychologist, theorized that these were psychological rather than physical casualties and believed that the symptoms were overt manifestations of repressed trauma.<sup>7</sup> This was due to the realization of military and medical authorities by 1916 as they were convinced that many soldiers exhibiting the characteristic symptoms had been nowhere near exploding shells (grenades, guns, cannons, and so forth).<sup>8</sup> The shell-shocked soldiers, Myers thought, had attempted to manage a traumatic experience by repressing or splitting off any memory of a traumatic event, and they described the shell shock symptoms as the outcome of an unconscious process designed to maintain the dissociation.<sup>9</sup>

Unfortunately, Myers was criticized by those who believed that shell shock was simply cowardice or malingering, and some thought the condition would be better addressed by military discipline.<sup>10</sup> Soldiers were typically heroic and strong, therefore, when they came home unable to speak, walk or remember, with no physical reason for those shortcomings, the only possible explanation was personal weakness.<sup>11</sup> Due to the belief that traumatized soldiers were simply weak and cowardice, the treatment options also revolved around this assumption. One of them was conducted by Lewis Yealland, a Canadian-born British clinician, as he

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<sup>7</sup> Edgar Jones, "Shell shocked," *loc. cit.*

<sup>8</sup> Caroline Alexander, *loc. cit.*

<sup>9</sup> Edgar Jones, "Shell shocked," *loc. cit.*

<sup>10</sup> *Ibid.*

<sup>11</sup> "From shell-shock to PTSD, a century of invisible war trauma," *The Conversation*, April 4, 2017, <https://theconversation.com/from-shell-shock-to-ptsd-a-century-of-invisible-war-trauma-74911> (accessed February 23, 2019).

described in his study, *Hysterical Disorders of Warfare* in 1918. Yealland's treatment rationale for "hysterical fits" was based on the clinical observation that patients reacted to external stimuli during a functional seizure, that they could be persuaded consciously to reproduce a seizure and that one individual always presented with the same type of fit.<sup>12</sup> In brief, this method aimed for the patients to reproduce or re-experience the seizure consciously and learn to control it, yet this treatment was considered harsh, not only because Yealland applied painful, strong electrical shocks, but also in the way he showed little to no compassion toward the patients by using their fear of being accused of malingering.

Around the time of World War II, "shell shock" acquired another phrase, "combat fatigue", and 35 years later when the war ended, it evolved into Post-Traumatic Stress Disorder (PTSD). PTSD symptoms included: intrusive thoughts (repeated and involuntary memories, distressing dreams, or flashbacks); attempts in avoiding reminders of the traumatic event; ongoing fear, horror, anger, guilt or shame, feeling detached or estranged from others; irritability, self-destructive behaviour, being easily startled, having troubles concentrating or sleeping.<sup>13</sup> In response to this, the US and the UK had a history of research collaboration on military since the First World War when the American National Research Council and British Medical Research Committee jointly published a medical bulletin focusing on the health problems of war, which was strengthened during the Second

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<sup>12</sup> Stefanie C. Linden, Edgar Jones and Andrew J. Lees, "Shell shock at Queen Square: Lewis Yealland 100 years on," *Brain: A Journal of Neurology* 136 (2013): p. 1982.

<sup>13</sup> "What Is Posttraumatic Stress Disorder?" *American Psychiatric Association*, 2013, <https://www.psychiatry.org/patients-families/ptsd/what-is-ptsd> (accessed February 24, 2019).

World War.<sup>14</sup> Furthermore, the United States created Servicemen's Readjustment Act of 1944, or better known as GI Bill, to provide a range of benefits for the US World War II military veterans. The bill was signed into law by President Franklin D. Roosevelt, which gave access for veterans to obtain immediate financial benefits, college tuition coverage, weekly unemployment compensation, guaranteed loans, and low-interest mortgages.<sup>15</sup>

In addition, GI Bill established hospitals and created a major shift in the field of psychology.<sup>16</sup> Before World War II, psychology was considered merely as an academic discipline, and the clinical side of it only exploded decades after the war when thousands of veterans grew interested in psychology, studied it, and became practitioners at Veterans Affairs (VA) hospitals.<sup>17</sup> Various ways in treating the mental health issues of the veterans evolved as more methods were used, such as Cognitive Behavioural Therapy (CBT) and pharmacotherapy. CBT itself consists of two types of therapies, which are Cognitive Processing Therapy (CPT) and Prolonged Exposure (PE).

In CPT, the therapist helps the patient identify negative thoughts related to the event, understand how they can cause stress, replace those thoughts, and cope with the upsetting feelings; while in PE treatment, repeated revisiting of the trauma in a safe, clinical setting helps the patient change how they react to memories of

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<sup>14</sup> Elizabeth J. F. Hunt et al., "The mental health of the UK Armed Forces: where facts meet fiction," *European Journal of Psychotraumatology* 5 (2014): p. 1.

<sup>15</sup> "G.I. Bill," *HISTORY*, June 7, 2019, [https://www.history.com/topics/world-war-ii/gi-bill#section\\_3](https://www.history.com/topics/world-war-ii/gi-bill#section_3) (accessed September 4, 2019).

<sup>16</sup> Christopher Munsey, "The veterans who transformed psychology," *American Psychological Association*, November 2010, <https://www.apa.org/monitor/2010/11/veterans> (accessed September 4, 2019).

<sup>17</sup> *Ibid.*

traumatic experiences, as well as learn how to master fear- and stress-inducing situations moving forward.<sup>18</sup> Due to the reason that some patients do not respond quite well to non-drug methods, therapists sometimes refer these patients to pharmacotherapy, where they combine psychotherapy and the usage of certain drugs.<sup>19</sup> In this case, they mostly choose to use antidepressants which belong to Selective Serotonin Reuptake Inhibitors (SSRIs) group, such as sertraline and paroxetine.<sup>20</sup> These therapy options have proved themselves effective in treating veterans with psychological issues, mainly PTSD.

In the context of International Relations, wars in general are linked to violations of human rights. In war, basic rights such as right to live, right to health, and right to safety are not cared for. World War II might have ended long ago, but the unseen psychological aftermath lasted years and years later in the lives of the veterans, which was another human rights violation. Furthermore, as allies and great powers, the US and the UK went through similar combat events and suffered the consequences. During and after the war, they were supposedly entitled to pensions and treatment in regards of their deteriorating mental health. The US and the UK tried to make up for it through providing accessible and high-quality treatment for their psychological needs.

The US and the UK veterans have contributed enormously to their victory, so, it is hardly debatable to say that they deserve compensation from the state. In the previous years, the soldiers did not receive appropriate mental health services.

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<sup>18</sup> Miriam Reisman, "PTSD Treatment for Veterans: What's Working, What's New, and What's Next," *Pharmacy and Therapeutics* 41, no. 10 (2016): p. 625.

<sup>19</sup> *Ibid.*

<sup>20</sup> *Ibid.*

Even so, as the years passed by, the relevance of psychology in war grew, especially around the period of World War II. Its importance was analysed first by the UK, then it was significantly recognized by the US, proven by the fact that each state built an institution to help their veterans deal with psychological impact, which were Veterans Affairs (VA) for US and National Health Service (NHS) for UK. Moreover, compared to most countries that were involved in World War 2, US and UK paid greater attention to the needs of their veterans. Therefore, I believe it is interesting to analyze whether the improvement of psychology in war has caused significant effects in taking care of the psychological issues of the veterans and how these actions express both states' commitment in fulfilling human rights.

## **1.2 Research Question**

Based on the explanations previously provided, this research suggests one research question:

1. How do the US and the UK as great powers uphold their commitments to human rights through World War II veterans mental health treatment?

## **1.3 Research Objectives**

The objective of the research is to discover how does the evolution of psychology in war contribute in treating the mental health of the US and UK World War II veterans who deal with war trauma, mainly those who are suffering with PTSD. Furthermore, this research aims to explore whether Veterans Affairs of US and National Health Service of UK act effectively in treating their World War II

veterans. Within the field of International Relations, the findings of this research will provide evident explanation of how the evolution of psychology in war can related to the concept of human security and contribute in supporting the 2030 Agenda for Sustainable Development.

#### **1.4 Significance of the Research**

I hope that, first, the research proposal would contribute in raising awareness among the society about the issue of mental health and the seriousness of it. It is necessary for the society would act with compassion and supportive attitude toward the veterans who are struggling with psychological issues resulting from war. Secondly, this research proposal could provide more knowledge and education to the government and policy makers, that they may consider the importance of mental health centres for the veterans while determining policies and national budget. Within the international area, I wish that this topic could evoke a progressive change among nations and communities all around the world in improving human security and respecting human dignity. To the IR scholar community, it is expected that the research proposal would enhance a more profound understanding and establish a larger space for future research regarding the relation of psychology field in international relations and its relevance.



### **1.5 Structure of Writing**

The first chapter is the introduction, providing a general overview of the topic, the research questions, and the purpose of the research. The second chapter contains theoretical framework, which elaborates the theories and concepts used in analysing this issue. It also provides the comparisons and summaries of the previous studies regarding psychological impact of World War II veterans and the treatment methods that have been implemented. The third chapter explains the methodological process, including research approach, data collecting and data analysing techniques. The fourth chapter provides discussion and analysis of the data using the theories and concepts previously chosen to answer the research questions. The fifth chapter states the conclusion of the research and recommendation for future studies regarding this topic.

