

Disability and Discomfort: Robert Sargent Austin, *Injured Paratrooper* (1943)

Second World War artist Robert Sargent Austin's drawing of an injured paratrooper presents an uncomfortable contrast between a healthy, vivacious nurse and a frail, disabled serviceman. This article explores how and why Austin's image inspires a sense of discomfort in the viewer.

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Depictions of the wounded and disabled body in the Second World War rarely crop up in either war art from the period, or in subsequent art-historical study. One explanation for this is that much of the art work made in Britain during the conflict was commissioned by the government's official War Artists' Advisory Committee (WAAC) and despite a lack of strict official censorship, commissioned art tended to avoid subject matter that could be too damaging to public morale. Although injury and bodily trauma were a daily fact of life during the conflict, artists typically shied away from depicting them.

This 'In Focus' piece will explore the challenges that images of physical infirmity pose to viewers through analysis of the drawing *Injured Paratrooper* (1943, The Potteries Museum and Art Gallery), by the war artist Robert Sargent Austin. I shall focus in this article on the theme of discomfort, including: the sense of discomfort engendered by depicting a person who has experienced a disability in a way that may undermine their dignity and individuality; the psychological difficulties in confronting disability, which cause the able-bodied to restrict the visibility of disability; and the uncomfortable ways that depictions of disability disrupt traditional, hetero-normative gender identities.

As little literature exists on depictions of wounding and disability in the art of the Second World War, it is helpful to look to studies of the First World War for ways to analyse the visualisation of bodily disfigurement in the context of conflict. Equally useful is scholarship about the experience of witnessing trauma in conflict, which demonstrates how difficult it is to retain a sense of a survivors' individual identity when depicting injury and suffering.¹ My aim is to uncover some of the fascinating history of Austin's image, and to show how it can help us understand and critique the sense of discomfort that attends images of the wounded male body.

Austin produced his drawing for a commission from the WAAC in 1943. Set up under the auspices of the Ministry of Information and headed by Kenneth Clark, the WAAC's remit was to commission images of all aspects of the war effort, with the purpose of creating a national record of British life during the conflict, and sharing this with the public through exhibition and publication. As Brian Foss has explored in his book *War Paint* (2007), this was in part an exercise in public relations and morale-building; it was also the result of Clark's deeply held beliefs that the arts were an essential part of the cultural well-being of the

nation, and the government was therefore obliged to support their development.² Clark's stylistic preference when commissioning war art centred on 'popular legibility', and for figurative work, this meant 'a certain tradition of popular but ennobled figuration'.³ An example of the sort of approaches commissioned artists took to this can be seen in the work of [Henry Moore](#), particularly his tube shelter drawings, and, from the other end of the spectrum, [Eric Kennington's](#) portraits of RAF servicemen, which present a conventional interpretation of 'ennobled figuration'.

Injured Paratrooper by Austin is one of 10 images of nursing that he produced for his eighth commission for the WAAC. Earlier works include depictions of the RAF, coastal defences, the Women's Royal Naval Service, barrage balloons, troopship armament, and Woolwich Arsenal factory workers.⁴ These preceding commissions align with the stylistic preferences of the WAAC: popular figuration and conventional portraiture. In *Injured Paratrooper*, however, the artist departs from convention in order to explore the intimacies of surgical treatment, the injured and disabled male body, and the vulnerable relationship between veterans and their nurses.

The drawing shows an emaciated man, only partially clothed, hunched over and sitting on a bed. His arms are immobile: bandaged, bent at the elbow and secured with splints. Unable to feed himself, an attractive young nurse sits beside him, putting spoonfuls of food in his mouth. His thin, unclothed torso with protruding clavicle, his loosened trousers, and his drawn face with receding hair contrast with the healthy, shapely figure of the nurse beside him, who wears the fitted uniform of the Queen Alexandra's Imperial Military Nursing Service (QAIMNS). Her professional status in the image is clear: the crisp lines of her uniform and wimple are depicted in marked detail, alongside the rank insignia pinned to her left breast pocket. The status of the soldier is less evident: only the dog-tag around his neck marks him as a military man. His withered appearance is at odds with the physical strength we commonly associate with soldiers, and we are reliant on the image's title to identify him as paratrooper. This depiction seems to undermine traditional views of gender difference: while the female nurse is the picture of professionalism and strength, the male soldier is shown in a state of vulnerability, physical frailty and anonymity, with his injury displacing his individual identity.

Austin's focus in this drawing is the work of the nurse, an officer of QAIMNS, the official military nursing service, which, in the Second World War, served across the world from Europe to Palestine, far-east Asia, and North Africa.⁵ This drawing went on to be used as the cover illustration for a book about the service, *Grey and Scarlet*, published in 1944, with Austin's other QAIMNS pictures included as illustrations throughout the rest of the book. A collection of nurses' memoirs, *Grey and Scarlet* was edited by Ada Harrison, the artist's wife (undoubtedly the reason for the inclusion of his work in the text).⁶ It focuses on factual details of the nurses' deployment, with an emphasis on their professionalism and stoicism, and little to no discussion of their actual medical duties or reference to any violence or

trauma they encountered. Throughout this book, Austin's work is framed as a celebration of the positive qualities of nurses and nursing: care, devotion to duty, and efficiency.⁷

In some ways, the drawing conforms to this traditional view of care, portraying in one sense a normative image of a woman looking after a man. A close look at the image, however, belies the simplicity of this interpretation. Where we might expect the nurse to appear in the role of a motherly, protective and nurturing figure, we see instead a young and attractive woman, a fashionable hair-do peeking out from under her wimple hinting at a vivacity unsuited to a motherly protector of the wounded. This injects a sense of discomfort into our viewing of the relationship between herself and her patient. Her marked femininity combined with her position of power as healthy and able-bodied can be seen to emasculate the soldier, who is restricted by his immobility: without the use of his hands and arms, he has become somewhat helpless. The fragility of his appearance, thin, immobile, partially clothed, further serves to diminish his dignity.

His depiction is especially shocking given his identification as a paratrooper. The 'paras' were newly formed in 1941 and took part in key campaigns including Operation Torch (raids on the French coast in 1942), Operation Biting (raids on North Africa in preparation for invasion of Italy), Operations Husky and Fustian (the invasion of Sicily in July 1943) and then Operation Slapstick (the invasion of Italy in September 1943). From their inception, there were expectations that paratroopers would be capable and physically fit. This aligns with typical depictions of serving soldiers in Second World War art. An example can be seen in another WAAC painting held at the Potteries: Henry Lamb's *Fatigue: Canadian Forces* (1942). In this work we see five soldiers digging a trench, with two additional soldiers standing by. Those digging are stripped to the waist and wearing braces, emphasising their arm and back muscles in a manner that fully asserts their normative masculinity. The soldiers are so posed as to showcase their physical strength, with their strong bodies depicted in active labour. These bodies are whole, healthy, 'normal', and conform to our pre-conceived expectations of the male figure.

The contrast with Austin's image of the paratrooper is striking, and highlights the drawing's atypical depiction of masculinity. Another reason for our discomfort in viewing this image becomes apparent also: the fact that it forces us to confront the injured, unhealthy human body. In Second World War art, figurative images tended to emphasise the integrity of the human body, and avoid images of suffering, wounding or death. Foss's study of paintings of the Blitz confirms this: he discusses how WAAC commissions of Blitz subjects avoided dealing with the scale and nature of civilian casualties, and instead focused on scenes symbolic of suffering, commonly depictions of architectural damage.⁸ Startlingly few artists chose or were able to depict images of the wounded body during the conflict (a notable exception being work by [Louis Duffy](#)).⁹ However, the wounded body was an important subject for artists of World War One, and scholarship on art during this earlier conflict has offered some explanation for why such imagery is so problematic for viewers, both at the time and retrospectively.

Susanna Beirnoff and Emma Chambers, in their studies of surgical portraiture in the Great War, both touch on the inherent difficulty of visualizing corporeal wounding and confronting the disabled, non-normative body.¹⁰ This is a common concern in studies of the effects of trauma, where the argument is that it is incredibly difficult (if not impossible) to represent trauma in a meaningful or authentic manner. Historians Frances Guerin and Robert Hallas, for example, note that viewers dislike images that seem to violate victims and survivors, particularly images that ‘transgress the integrity of the human subject’, which are seen as ‘disrespectful’.¹¹ This moral discomfort on the part of the viewer provides one explanation for the lack of images of physical trauma in war art, indicating that viewers’ discomfort creates a major barrier to the representation of physical disability.

Chambers, in her study of First World War surgical portraits by [Henry Tonks](#), argues that the sense of discomfort experienced by the viewer is most notable during encounters with a disfigured face. She argues that the face stands as a ‘guarantor of identity’.¹² The disruption and disfigurement of the face, and in this she includes both physical wounding but also masking through use of prosthesis, disrupts a process of recognition, both between survivor and viewer, and also, by extension, between injured exterior of the survivor and his interior identity. Any sense of ‘likeness’ is denied by the physical rupturing of the face. The result is an attack on the survivors’ self-identity, but also sets in motion a process of unwilling gazing between viewer and subject. This sense of discomfort relates to the wider challenges of depicting a wounded male body in the context of mechanised warfare. Wounded male bodies in art, as Biernoff has outlined, have conventionally been positioned with a framework of Christian imagery, established in historic depictions of the wounded and crucified body of Christ. This kind of imagery depicts the wounded male body as at once tragic and heroic, imbued with the valour of self-sacrifice. Un-problematic images of the wounded male body, therefore, draw on this heroic Christian imagery and mask the disfiguring or debilitating effects of injury. Often, the most palatable interpretations of the trope show the injured or dying body as peaceful, drifting off into a gentle a gentle sleep. An example of this can be seen in another work in the Potteries collection, Edward Ardizzone’s *Royal Herbert Hospital Surgical Ward* (1941), where hospital patients are depicted sleeping peacefully or engaged in friendly conversation, and with no obvious wounds. In contrast, images that show graphic scenes of injury and death transgresses this myth of a valorised, Christ-like wounded body and become imbued with feelings of ‘disgust and shame’.¹³ These uncomfortable feelings are provoked by ‘the violation of the body’ through injury in conflict, and the resultant ‘transgression of natural order’ this injury instigates i.e. the disruption of the integrity of the body.¹⁴

Austin’s image falls into this category: it provokes a sense of discomfort in the viewer, who is forced to come face-to-face with the non-idealised, damaged, immobile and frail body. This unwilling gazing in turn victimises the soldier, who is afforded little dignity in the viewing process. This is emphasised in Austin’s drawing, in the soldier’s averted eyes and in the absence of individualising personal effects. By means of the sense of discomfort elicited,

this image cautions us about the difficulties of representing such sensitive subject matter, and the challenges of respectfully visualising and witnessing disabled bodies.

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¹ Frances Guerin and Roger Hallas, *The Image and the Witness: Trauma and Memory in Visual Culture* (Wallflower 2007), S. Felman and D. Laub, *Testimony: Crises of witnessing in Literature, Psychoanalysis and History* (New York, 1992).

² Brain Foss, *War Paint: Art, War, State, and Identity in Britain, 1939–45* (New Haven, CT: Yale University Press, 2007); David Mellor, “Second World War”, in Chris Stephens and John-Paul Stonard (eds), *Kenneth Clark: Looking for Civilization* (London: Tate, 2014).

³ Mellor, 2014, 101, 113.

⁴ See Imperial War Museum Archives: ART/WA2/03/095

⁵ Ada Harrison (ed) *Grey and Scarlet: Letters from the War Areas by Army Sisters on Active Service* (London, 1944).

⁶ Harrison had no ostensible connection with QAIMNS, and it is thought that it was Austin’s commission that led to the book. Source: conversation with artist’s daughter Clare Calder, 7 October 2019.

⁷ It is not clear which hospital Austin produced these images in- QAIMNS were based in a great number of military hospitals around the country-, but we know that the artist spent the majority of the war between the Royal Academy once it relocated to Ambleside, and his family home in Norfolk, where his daughter recalls seeing the QAIMNS drawings pinned up. *Ibid.*

⁸ Foss, 2007, 41.

⁹ See Ted Gott, ‘Military Objectives’ (2014), <https://www.ngv.vic.gov.au/essay/military-objectives-some-reflections-on-the-forgotten-second-world-war-artist-louis-duffy/>, [accessed August 2019].

¹⁰ Susanna Biernoff, ‘Shame, Disgust and the Historiography of War’ in *Shame and Sexuality: Psychoanalysis and Visual Culture* ed. by C Pajaczkowska and I Ward (Abingdon: Routledge, 2008), 217–236; Emma Chambers, ‘Fragmented Identities: Reading Subjectivity in Henry Tonks’ Surgical Portraits’, *Art History*, 3:32 (June 2009), 578–607.

¹¹ Guerin and Hallas, 2007, 6.

¹² Chambers, 2009, 593.

¹³ Biernoff, 2008, 222.

¹⁴ Biernoff, 2008, 224.