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Passchendaele highlights uncounted casualties

Nic Clarke

The release of Paul Gross’ film Passchendaele in October 2008 caused a great stir in Canada. The film is an impressive piece of film making but it is not without both factual and dramatic weaknesses. Its depictions of Great War combat, and particularly the Battle of Passchendaele, are powerful pieces of cinematography and have been compared by some critics to other classic battle scenes, including Saving Private Ryan’s highly regarded portrayal of the US 1st Division’s landing on Omaha Beach on 6 June 1944.

In spite of the praise Passchendaele has received for its renderings of the nature warfare on the Western Front, the film is more than the sum of its battle scenes. Depictions of combat make up less than a third of the total running time, with much of the action taking place far from the bloody mire of Western Front in Calgary, Alberta. Indeed, it would not be unfair to argue that although ostensibly about the Battle of Passchendaele, the film is primary concerned with the war’s impact on Canada’s home front. The film explores themes commonly encountered in both fictional and non-fictional descriptions of the home front experience – the pressures placed on men to enlist; the disconnect between those who served in the trenches and civilians; rampant Germanophobia; and the impact of the war on soldiers’ loved ones. Given this focus, it is pleasing to see the issue of unfit volunteers highlighted in the character of David Mann (Joe Dinicol). Too often, the experiences of men who volunteered to serve but were rejected as unfit are overlooked in our recounts of this conflict.

Just like the fictional David Mann, a large percentage of Canadian men – some historians put the figure as high as 40 per cent – were turned away from recruiting stations due to medical conditions rendering them unfit to fight. While a number of men were rejected for obvious reasons, such as missing limbs, many were, like Mann, declared unfit on account of impairments that were invisible to the casual observer. Recruits were routinely rejected on account of heart conditions, poor eyesight, perceived mental deficiencies, hernias, varicose veins, and limited hearing. Others were rejected for conditions such as bad teeth that were not considered disabling in civilian society. Men rejected for service on account of such hidden or unrecognised impairments were not readily identifiable as physically unfit to fight by members of the public. As a result these men were, as is depicted in Passchendaele, subjected to condemnation from people who believed that they were shirking their responsibilities to King and country. Those men who attempted to defend themselves by drawing attention to their infirmities were either not believed, or were told they had not tried hard enough. Martin Colby, for example, described his experiences on the streets of Toronto during the Great War as “hell.” Constantly questioned by strangers as to why he was not in the khaki, Colby’s explanations that he had been rejected on multiple occasions due to his limited hearing were countered with “Go on, try again.”

Many rejected men did try again, and more than a few were successful in their quest to enlist. As is the case with Passchendaele’s David Mann, such success was often born of equal parts of perseverance and skulduggery on the part of these would-be warriors. Many unfit men travelled from recruiting station to recruiting station until they either encountered a medical officer who was willing – for whatever reason – to turn a blind eye to their infirmity, or found someone who was willing to help them hide their disqualifying impairment. Others asked or bribed acquaintances in positions of power to smooth the road for them.

Those rejected early in the war also “benefited” from the nature of the conflict in which Canada was embroiled. The grim realities of trench warfare, which would ultimately cost Canada over 60,000 dead and more than 150,000 wounded, obliged Canadian military
authorities to constantly lower the medical standards required of recruits in order to keep the ranks of the Canadian Expeditionary Force full. These lowered standards remained in place even after conscription was introduced in late 1917. Consequently, more than a few of the Canadian soldiers who fought in the bloody mire of Passchendaele in autumn of 1917 had been rejected as unfit to fight in the summer of 1914. Nova Scotian Will R. Bird, a noted postwar author, was one such individual. Rejected in 1914 on account of his teeth, he was passed fit to serve in April 1916 and found himself in France in December of the same year.7

For those men with infirmities who were unable to join the ranks, the psychological toll exacted by accusing looks, derogatory comments, ostracism, and personal shame was often heavy. As a result some rejected men cut themselves off from their communities in an attempt to escape their torments. Others, broken by their experiences, choose to take their own lives. 24-year-old George Baker, for example, hanged himself in March 1917 after suffering repeated rejections for service.9

Some realised that rejected men were not cowards. H.B. MacConnell's 1916 poem “Medically Unfit” instructed soldiers not to scorn those turned away as unfit. In the same year Captain R.J. Christie of the Toronto Recruiting Depot (TRD) stated that bearing the badge the depot gave to rejected men was “just as honourable as wearing khaki.” Such comments were at best cold comfort for rejected men, not the least because they were double-edged. Although MacConnell described rejected men as patriots he also labelled them as sickly and weak. In a similar vein, the TRD badge soon became a negative focus in an advertising campaign conducted by the Mutual Life Assurance Company of Canada.10

The rancour of having been rejected for service as young men continued to trouble individuals well into their senior years. Will Bird remained bitter about his rejection in 1914 for the rest of his life. “Why did they not let me go before?” he wrote in his 1930 memoir And We Go On when discussing his acceptance for service in 1916, “[n]ow I had to go with the men who never wanted to join, to be a late-goer and it was a rank injustice.”11

Bird's words not only reflect his anger at his treatment, but also reiterated the negative light in which
many people in Canada viewed those men who were not uniform during the Great War. As Passchendaele highlights and this article has discussed, the consequences of these negative perceptions impacted not only on those men who did not attempted to enlist, but also those who had volunteered to serve but were rejected as unfit. As we reflect on the horrors of the Passchendaele, which are so powerfully conveyed in Gross’ film, we should also take some time to remember the torment faced by those declared unfit to serve.

Notes
1. Passchendaele’s dramatic weaknesses, which have been identified by a number of reviewers, primarily relate to the film’s love story; Gross’ sometimes heavy-handed use of symbolism; and, the use of common war film tropes. The film’s errors of fact are minor, but nonetheless grating. For example, the physical requirements for infantrymen quoted by the 10th Battalion’s recruiting officer, Major Randolph Dobson-Hughes (Jim Mecron) to Michael Dunne (Gross) are the 1914 requirements, not those for 1917.
2. The actual number of men rejected as unfit for service are impossible to calculate accurately. No reliable information about CEF discharges existed for dates prior to the middle of 1915, and even after that period the data varied greatly in quality. In early 1917, a Department of Militia and Defence report estimated that in 1916 (the first full year for which reliable information was available) over 50,000 men almost 25 percent of those who had volunteered in that year had been deemed unfit to serve. This estimate was rough at best. Rejection-rate data provided by Military District (MD) 13 (Alberta) to the Department of Militia and Defence was so fragmented that it was not included in the department’s final calculations. Likewise, other MDs stated they were unable to provide information regarding men rejected by civilian practitioners conducting examinations outside of the military’s purview. Moreover, the framers of the report were also careful to point out the statistics only related to men who had failed the medical examination, and not to those individuals who had been had been turned away by recruiting sergeants before they ever crossed the threshold of a recruiting station’s door. On the opposite side of the ledger it should also be noted that the report did not take into account the possibility of multiple enlistment attempts. Contemporary attempts to calculate rejection rates are also hindered by the fact that statistics relating to men discharged (as opposed to rejected outright) as medically unfit do not differentiate between those deemed unfit based on pre-war impairments and those who developed disqualifying impairments while on service. Department of Militia and Defence memorandums, 26 February 1917, and 27 April 1917, Library and Archives Canada (LAC). Records of the Department of National Defence (RG 24). Vol. 6600, File HQ 1982-1-83 “Number of Recruits Rejected as Medically Unfit”; Clyde R. Scott, Asst. Director of Records to The Secretary, Board of Pension Commissioners, 29 December 1927, LAC, RG24, Vol. 1844, File G.A.Q. 11-11, “Medically Unfits, C.E.F.”; Hon. A.E. Kemp, 14 April 1916, Debates of the House of Commons of the Dominion Canada, 6th Session, 12th Parliament, Vol. 3 (Toronto: King’s Printer, 1916), pp.2879-2880; Ian Miller, Our Glory and Our Grief: Torontoian and the Great War (Toronto: University of Toronto Press, 2002), pp.76-80.
3. The author’s examination of the files of 3,080 men rejected as unfit for service at Valcartier Mobilisation Camp in August-September 1914 indicate that the four most common reasons for rejection were substandard vision (24.4 per cent, 892 cases), poor teeth (9.8 per cent, 352 cases), varicose veins (6.5, per cent, 235 cases), and varicocele (6 per cent, 215 cases). These figures reflect the fact that some men were rejected on multiple grounds, meaning that the total number of reasons for rejection recorded, 3,605, was greater than the number of men examined.
5. George Atkins, for example, claimed to have tried to enlist 210 times! – crossing most of Western Canada in the process – before finally being accepted for service in late 1915. The myopic Alfred Andrews, on the other hand, passed his medical examination at Valcartier in September, 1914 by memorising the answers to the visual acuity card being used to assess recruits’ vision before being tested. Andrews’ hernia – a disqualifying impairment – was also missed by his examiner. RS1178 George Stanley Atkins, LAC, Appendix to the proceedings of the Board of Inquiry into the report on the Canadian Army Medical Service by Colonel Herbert A. Bragdon, the interim report of Surgeon-General G.C. Jones, LAC, William Babtie Fonds, MG30-E3, p.M27; “Diary of Alfred Herbert John Andrews,” The Canadian Letters and Images Project <http://www.canadianletters.ca/letterlist.php?collectionid=328&docid=2&varid=3> (accessed 12 April 2008). Also see Tim Cook, At the Sharp End: Canadians Fighting the Great War, 1914-1916, Vol. 1 (Toronto: Viking, 2007), pp.24-25.
6. The minimum height requirements for the infantry, for example, drop from 5’3” to 5’ between 1914 and 1918. By the end of 1917 men in support units could be as short as 4’11”. “Mobilization – Qualifications for Service,” General Orders, Militia Orders and Precis of Headquarters Letters Bearing Upon The Administration of the Canadian Army Medical Service Published Between August 6 1914 and December 31, 1916, [ACAMS], p.14; Regulations for the Canadian Medical Service, 1910, (Ottawa: Government Printer, 1910) p.48; Regulations for the Canadian Medical Service 1914 (Ottawa: Government Printer, 1915), pp.46-48; Canadian Expeditionary Force Units: Instructions Governing Organisation and Administration (Ottawa: Government Printing Bureau, 1916), pp.26-27; Physical Standards and Instructions for the Medical Examination of Recruits for the Canadian Expeditionary Force and for the Active Militia of Canada, 1917 (Ottawa: King’s Printer, 1917); Physical Standards and Instructions for the Medical Examination of Recruits for the Canadian Expeditionary Force and for the Active Militia of Canada, 1918 (Ottawa: King’s Printer, 1918).
9. Baker was not the only individual to take his own life after having been rejected for service. 18-year-old Daniel Lane took strychnine after failing the CEF’s medical examination in 1914. One year later 28-year-old Joseph Coley drank carbolic acid because, so it was reported, he feared a recently acquired disability would not only cause him to lose his job, but also cause him to be “rejected by the military doctors.” “Disappointed Lad Attempts Suicide,” Toronto Globe, 18 September 18 1914, p.9; “Dragoon Ends His Life In Despondent Mood,” Toronto Globe, 18 October 1915, p.3; “Rejected Three Times, Then Hangs Himself,” Toronto Star, 17 March 1917, p.5.

Nic Clarke recently received his Ph.D. from the University of Ottawa. His dissertation, “Unwanted Warriors: The Rejected Volunteers of the Canadian Expeditionary Force,” examines men rejected as unfit for service during the Great War.